Excision of Epididymal Cyst

Patient Information

Day Surgery
Ward 3, Leigh Infirmary
Welcome to: Day Surgery  
Ward 3  
Leigh Infirmary, The Avenue,  
Leigh. WN7 1HS

Monday to Thursday, 7.30am to 8.30pm, Telephone 01942 264260 or 01942 264261

This leaflet aims to give you information about your operation and your stay in hospital and advice for when you go home.

If there is anything you are worried about that is not covered by this leaflet, please feel free to speak to a member of staff.

**Operation for epididymal cyst**

An epididymal cyst (spermatocele) is a fluid filled swelling of the epididymis. The epididymis is a coiled tube, on the top of and behind the testicles, which stores and then carries sperm away from the testicles. Numerous cysts may develop along the epididymis. The cysts are usually small, do not usually cause pain and are harmless. Surgery is performed under a general anaesthetic. It involves a cut in the skin of the scrotum to remove the cyst or cysts.

**Benefits of surgery**

- To remove large cysts causing pain/discomfort
- Cosmetic

**Are there any risks involved with this procedure?**

**Common (greater than 1 in 10)**

- Swelling of the scrotum which may last several days.
- Seepage of yellowish fluid from the wound several days after surgery.

**Occasional (between 1 in 10 and 1 in 50)**

- Recurrence of the cyst.
- Blood collection around testes, which resolves slowly or requires surgical removal.
- Possible infection of the incision site or testes requiring further treatment.

**Rare (less than 1 in 50)**

- Very rarely the scarring can damage the epididymis causing sub fertility.
- Chronic pain in the testicle or scrotum.

**Alternative therapy**

- Observation
- Removal of fluid with a needle
- Various other surgical approaches
Pre-operative Assessment Clinic
At the clinic you will be seen by a nurse, who will complete a pre-operative screening assessment. This will include taking a nursing and anaesthetic history, organising investigations such as blood test’s ECG’s; as necessary. The nurse will advise you about your particular operation. He/she will explain to you about your pre and post-operative care, how long you will need someone to take care of you when you go home and how long you will be expected to be off work, etc. If you need a sick note please ask the nurse on arrival to hospital on the day of your admission.

How long will I be in hospital?
Ward 3 is a day surgery ward with no overnight facilities. Your operation has been planned as a day case procedure which means that you will be able to come into hospital and be discharged later the same day. Very rarely, some patients do not recover in time to go home and will therefore need to be transferred to the Royal Albert Edward Infirmary, Wigan.

Before you come into hospital
Before you come into hospital you will need to bath or shower.

Admission to hospital
On arrival to hospital, you will need to book in at the Admissions desk, which is situated on the ground floor below Ward 3. You will then be directed to the ward; there you will meet your nurse and other members of the team who will be looking after you. The facilities and general routine of the ward will be explained to you.

(Please note that you will be on a theatre list with several other patients, so be prepared for a wait.)

Getting ready for your operation
The nurse who is admitting you will ask some routine questions, about your general health, the medications you take at the momen and any allergies you have. Your surgeon and anaesthetist will see you. The surgeon will mark the operation site pre-operatively with a marker pen. The anaesthetist is the doctor who will give you your anaesthetic and look after you during the operation. You will be asked to sign a consent form if you have not already done so, to say that you understand what you have come into hospital for and what the operation involves. If you have any questions, please ask.

Going to theatre
You will be asked to put on a theatre gown. A nurse will check that you have a wristband on with your name, ward and district number and that your documentation, consent is in order. (You will be asked the same questions by several staff en route to theatre, these are all safety measures.) A nurse will escort you to the operation suite where you will meet your anaesthetic nurse who will take you to the anaesthetic room where your anaesthetic will be administered.
After your operation

You will wake up in the recovery room; here specially trained nurses will monitor closely how you feel. On waking you will have a small clear oxygen mask in place, this will help the anaesthetic wear off. The nurses will check your blood pressure and pulse and make sure that you are comfortable. When the doctors and nurses are happy with your condition you will be taken back to the ward were you will be made comfortable and can rest. Refreshments will be offered as soon as it is safe for you to have these.

Pain control

Expect some discomfort. You will have been given strong pain killing and/or local anaesthetic drugs in theatre, which will reduce pain for the first few hours. Your pain will be closely monitored to ensure that it is kept to a minimum. You will be offered and given pain relief, as appropriate. You will be given painkillers to take home, which you should take as directed.

The wound

You will have dissolving stitches, which may begin to come away after a few days but can take up to 2 weeks to clear completely. If all is well you may bathe or shower the day after the surgery. Pat the wound dry gently with a clean towel for the first seven days or so. Thereafter you may treat the wound as normal. You should expect some swelling of the wound and testicles, which may feel hard and there may be some bruising. Wearing supporting underpants will help to reduce swelling and ease discomfort.

Going home

You must make sure that an adult can take you home in a car or taxi. You will need to go to bed or rest on the settee when you get home. An adult must stay with you for the first 24 hours after your operation. You must not drink alcohol for a minimum of 48 hours.

What to look out for

It may be several hours before you pass water. If you have any difficulty, particularly if your bladder feels uncomfortably full but you still cannot pass water, you should attend your local Accident and Emergency Department.

You should not suffer excessive pain, excessive bruising or excessive swelling of the testicles. If this occurs you may contact the ward you attended for advice, see your GP or attend your local Accident and Emergency Department Tel. 01942 244000.

The first few days

Gently increase your activity over the first few days, little and often until you can do more each day.

You are encouraged to move and walk as this will help prevent stiffness, soreness and help with your circulation and minimize the risk of complications such as chest infection,
deep vein blood clots and clots to the lungs. Take painkillers to ease any discomfort to enable you to mobilize.

**Work and activity**

You can get a sick note from the ward for the first week. You will need to see your GP for any further sick notes if required. You can return to normal activity when the pain has settled. Swelling of the wound or testicle may take longer to settle but need not prevent normal activity (if it is not severe). Sex will not harm you but may be painful in the first few days. Heavy lifting or strenuous exercise should be avoided for one or two weeks.

**Driving**

You may drive as soon as you are confident that you can do an emergency stop. One or two weeks is usual. Check with your insurance company.

These notes do not cover everything. We hope you will find them useful however, and that they will help towards making your stay in hospital less worrying. Try and read these notes a few times before you come in, and bring them with you on admission. If you have any questions or worries prior to admission, please contact the ward: 01942 264260/6.

**Outpatient appointment**

An outpatient appointment is not generally given. See your GP or contact the Ward for advice is you have any problems.
Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am to 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh NHS Foundation Trust
Royal Albert Edward Infirmary
Wigan Lane
Wigan WN1 2NN

Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

How We Use Your Personal Information

For details on how we collect, use and store the information we hold about you, please take a look at our “how we use your personal information” leaflet which can be found on the Trust website: www.wwl.nhs.uk/patient_information/Leaflets/default.aspx

This leaflet is also available in audio, large print, Braille and other languages upon request. For more information call 01942 773106.