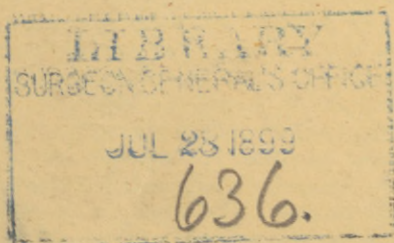


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On the frequency of cryptorchism  
and its results.







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ON THE FREQUENCY OF CRYPTORCHISM AND  
ITS RESULTS.

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Cryptorchism and incomplete descent of the testicle are congenital defects, the frequency of which has never been established by reliable and extensive statistics. Undescended testicle, partial and complete, is frequently seen in infants and children, but becomes more rare with the development of the body to manhood. The writer has recently had an opportunity to make an accurate investigation into this subject by the examination of 9815 recruits for the Volunteer Service at Camp Tanner, Springfield, Ill. The ages of the men varied from 16 to 51. The following is the result of the examination with reference to the incomplete descent of the testicle:

*Cryptorchism.*—Right side, 12; left side, 22; both sides, 1.

*Incomplete descent of testicle.*—Right side, 10; with hernia, 1; left side, 14.

Total number of incomplete descent of the testicle in 9815 men, 59. Unilateral incomplete descent, the left side was affected 36 times, the right side 22. Out of 59 cases the defect was bilateral only once. In this case the inguinal canals were found completely obliterated, no trace of the testicle could be found. The man was in excellent health, married and father of several children. In only two instances was the incomplete descent of the organ complicated by a small hernia, in both cases on the right side. Both of these men were rejected. In all cases in which the testicle could be palpated the organ was found atrophic, seldom exceeding the size of a filbert or pigeon's egg, soft and not tender to touch. The testicles were most frequently found just within or below the external inguinal ring; in the latter location it could be freely moved in all directions without causing any pain. None of the men thus afflicted complained of pain or even discomfort caused by the imperfectly developed and incompletely descended testicle. Recent scientific investigations appear to establish the fact that cryptorchism and incomplete descent of the testicle are attributed rather to an imperfect development of the organ than to a failure to reach its normal destination at the right time. The results of these researches as well as the deductions to be drawn from statistic material utilized in this paper seem to combine in teaching surgeons caution in undertaking early operations for cryptorchism for the purpose of transplanting the organ into its normal position and with a view of maintaining or increasing its functional activity. The congenital hernia which so constantly attends retarded descent of the testicle frequently disappears in the course of time without operative or truss pressure.

presented by the author

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