|  |  |
| --- | --- |
| **ORCHITIS** **Background**Orchitis is an acute inflammatory reaction of the testis secondary to infection. Most cases are associated with a viral mumps infection; however, other viruses and bacteria can cause orchitis.ClinicalHistory* Testicular pain and swelling
* The course is variable and ranges from mild discomfort to severe pain

Associated systemic symptoms* Fatigue
* Malaise
* Myalgias
* Fever and chills
* Nausea
* Headache

Physical* Testicular examination
* Enlargement
* Induration of the testis
* Tenderness
* Erythematous scrotal skin
* Enlarged epididymis associated with epididymo-orchitis
* Rectal Examination
* Soft boggy prostrate(prostatitis) often associated with epididymo-orchitis
* Stool for occult blood
* Other
* Parotitis
* Fever

Causes* Most commonly, mumps causes isolated orchitis
* the onset of scrotal pain and edema is acute
* mumps orchitits presents unilaterally in 70% of the cases
* In 30% of cases, contralateral testicular involvement follows by 1-9 days.
* Other rare viral etiologies include coxsackievirus, mononucleosis, varicella and echovirus

ReferenceMycyk, M.B. (2007). Orchitis. Retrieved February 8, 2009 From:http://emedicine.medscape.com/article/777456-overview | **CANCER OF THE TESTIS****Background**90% are germ-cell tumors arising from the male gamates.* Seminomas for 30%-35%,(least aggressive)
* Nonseminomas: embryonal carcinomas, teratomas and choirocarcinomas, the most aggressive making up 1%
* Mixed types
* Specialized cells of the gonadal stroma for <10% (named after their cellular orgin)
* Leydig cell
* Sertoli cell
* Granulose cell

ClinicalHistory* Painless enlargement
* Gradual and may be accompanied by sense of heaviness or dull ache in the lower abdomen
* Occasional acute pain with rapid growth
* Gynecomastia in 30%-45% seen in men with Leydig or Sertoli tumors.

Physical* Palpation of scrotal contents (erect and supine positions)
* Signs of abnormal consistency, induration, nodularity, or irregularity
* Palpation of abdomen and lymph nodes to r/o mets
* Scrotal ultrasonography
* Tumor markers

Causes/ increased risk with* Cryptorchidism
* Mumps orchitis
* Familial
* Injury

Reference McCance, K. L., & Huether, S. E. (2006).*Pathophysiology: the biologic basis for disease in adults and children*. St. Louis, MO.: Mosby Inc.. |
|  |  |