

Short Report*Open Access, Volume 5***Huge hydrocele in patients with COVID-19: A case series*****Corresponding Author: Ahmad Reza Shahraki**

Department of surgery, General Surgeon, Assistant professor, Zahedan Medical Faculty, Zahedan University of Medical Sciences and Health Services, Zahedan, Iran.

Email: a.r_sh@yahoo.com

Received: Jan 05, 2024

Accepted: Jan 25, 2024

Published: Feb 01, 2024

Archived: www.jcimcr.org

Copyright: © Shahraki AR (2024).

DOI: www.doi.org/10.52768/2766-7820/2830

Abstract

Medical and surgical priorities have changed dramatically at the time of this pandemic. Scientific societies around the World have provided rapid guidance, underpinned by the best knowledge. A valuable, on the adaptation of their guidelines recommendations to the current situation. We report the rare cases of adults patient with giant hydrocele. Despite recent trends toward less invasive treatments, in this case, the surgical approach through an inguinal incision was the better therapeutic option with a satisfactory outcome and their covid-19 treat by guidelines. The treatment is ordinarily surgical. Different approaches have been described like paramedian laparotomy, an inguinal or Inguinoscrotal approach.

Keywords: Hydrocele; Surgery; Urology; SARS-CoV-2 COVID-19.

Background

The hydrocele is a collection of fluid between the two layers of the tunica vaginalis that surrounds the testicle. The hydrocele swells the scrotum but the testicle remains normal [1]. The treatment is ordinarily surgical. Different approaches have been described like paramedian laparotomy, an inguinal or Inguinoscrotal approach [2].

Medical and surgical priorities have changed dramatically at the time of this pandemic. Scientific societies around the World have provided rapid guidance, underpinned by the best knowledge available, on the adaptation of their guidelines recommendations to the current situation [3]. Since the COVID-19 epidemic was first declared in China in December 2019 [4]. The virus has spread rapidly around the World owing to its characteristics: rapid spread, high contagiousness, and mortality from viral pneumonia. Critically, hospitals in many countries have had to transform. In Europe as of April 28, there have been 880,000 cases of COVID-19, and specifically in Spain 213,000 cases have been confirmed by Polymerase Chain Reaction (PCR) [5]. This virus has a lot of effects on body such as: Long-lasting testicular pain, headache, chest pain [6]. Covid 19 shoes a lot of rare signs and symptoms can be seen among population.

Case presentations**Case 1**

A 27 years old man with positive PCR test for covid and left enlargement of scrutum. An ultrasonography show a huge hydrocele and we scaduled an operation with inguinal line opening:

Case 2

He was a 38 years old man with positive PCR test for covid and admitted because of enlargement of scrutum, an ultrasonography shows right huge hydrocele:

Discussion & conclusion

The treatment is ordinarily surgical. Different approaches have been described like paramedian laparotomy, an inguinal or inguino scrotal approach [5]. Further studies are necessary on the pathological effect of SARS-CoV-2 in the male reproductive system and to ensure a proper andrological follow-up for male patients [7]. The relationship of testicular pain with SARS-CoV-2 infection could be explained by high expression of ACE2 in testes, in particular, spermatogonia, sertoli cells and Leydig cells, suggesting possible effects on spermatogenesis and the occurrence of orchitis in male patients secondary to infection by this virus.

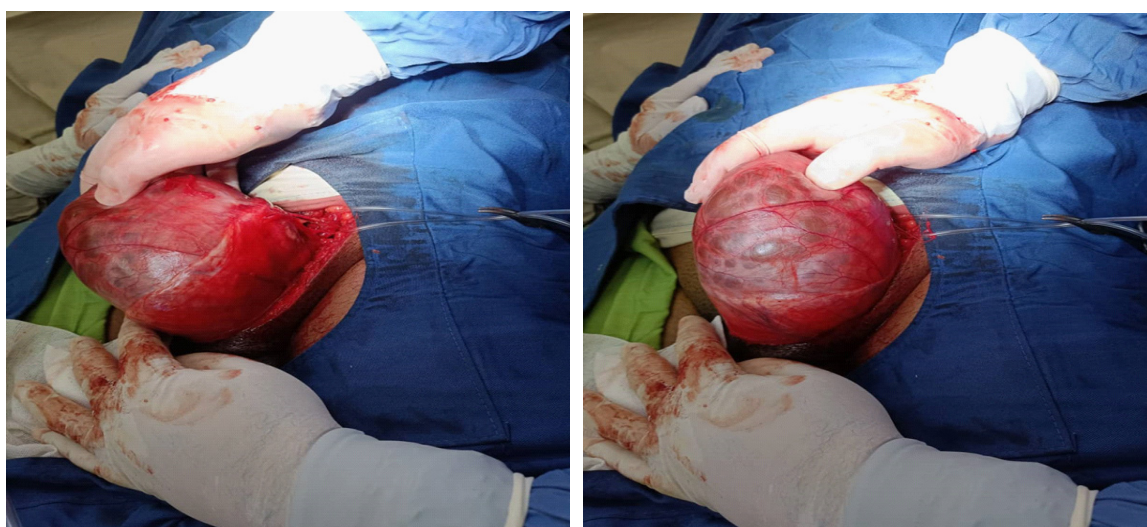


Figure 1: Huge hydrocel.

Several studies have emphasized critical illness polyneuropathy as the explanation of neurologic presentations secondary to the diagnosis of COVID-19, and multiple reports have documented acute polyneuropathy in patients infected [8]. We experienced a rare case of testicular torsion complicated by acute pneumonia during the COVID-19 pandemic [9]. A giant communicating hydrocele is very rare. Health education and improvements in standards of living will make for early diagnosis and treatment of communicating hydrocele. In infancy before hydrocele of such enormous proportions develop. Communicating hydrocele should be suspected in an adult with hydrocele who has a recurrence after open drainage [10].

Declarations

Ethical approval and consent to participate: The content of this manuscript are in accordance with the declaration of Helsinki for Ethics. No committee approval was required. Oral and written consent to participate was granted by the her husband.

Consent for publication: Written informed consent was obtained from the patient's legal guardian for publication of this case report and any accompanying images. A copy of the written consent is available for review by the Editor-in-Chief of this journal.

Availability of supporting data: It is available.

Competing interests: The author declares that they have no competing financial interests and nothing to disclose.

Funding: There is no funding.

Authors' contributions: Ahmad Reza Shahraki is the surgeon of patient and writes this paper. The authors declare that they have no competing financial interests and nothing to disclose.

Acknowledgements: Only in uncommon circumstances of unclear imaging findings or deterioration in the patient's conditions, a diagnostic laparoscopy as a minimal invasive approach may settle the diagnosis and can be extended to a therapeutic maneuver.

References

1. Lyman RB, Feldtman RW. Abdominoscrotal hydrocoele: Youngest case report and review of the literature. *J Urol.* 1981 Dec; 126(6): 847-8.
2. Abdelfattah Latabi, Mohammed Amine Lakmichi, Zakaria Dahami, Mohammed Said Moudouni. Giant abdomino scrotal hydrocele: A case report with literature review. Ismail Sarf. Abdelfattah Latabi et al. Giant abdomino scrotal hydrocele: A case report with literature review. *Pan African Medical Journal.* 2018; 31: 213. [doi: 10.11604/pamj.2018.31.213.14470].

-
3. Anna Bujons Tur, Juan Carlos Prieto, Andrés Gómez-Fraile, Juan Pablo Corbetta. The effect of the Covid-19 Pandemic on pediatric urology. 2020; 46 (1): 133-144. doi: 10.1590/S1677-5538.IBJU.2020.S112.
 4. Zhu N, Zhang D, Wang W, Li X, Yang B, et al. A Novel Coronavirus from Patients with Pneumonia in China, 2019. *N Engl J Med*. 2020; 382: 727-33.
 5. Información CORONAVIRUS. Gobierno de España. 2020.
 6. Antonio La Marca¹, Stefano Busani², Valeria Donno¹, Giovanni Guaraldi³, Guido Ligabue¹, et al. Testicular pain as an unusual presentation of COVID-19: A brief review of SARS-CoV-2 and the testis. *RBMO*. 2020; 41(5).
 7. Kenneth Fiala, Joshua Martens, Alaa Abd Elsayed. Post COVID Pain Syndromes. *Current Pain and Headache Reports*. 2022; 26: 379-383.
 8. Aníbal Salazar^{abc}, Agustín González^d, Nigel P. Murray^d, Carlos Castro^b. Atypical presentation of COVID-19: Chronic bilateral testicular pain with lower extremity peripheral polyneuropathy, case report. *Urology Case Reports*. 2022; 40: 101932.
 9. Masahiro Arai, Yohei Okada, Hideki Takeshita, Kojiro Tachibana, Makoto Kagawa, et al. Rare case of a patient with testicular torsion complicated by acute pneumonia, requiring emergency surgery, during the COVID-19 pandemic. *IJU Case Reports*. 2022; 5: 99-101. doi:10.1002/iju5.12404.
 10. P A Egharevba¹, A K Cassell², A I Okunlola¹, O A Omisanojo. Giant Communicating Hydrocele in a 36 Year Old Nigerian Man. 2021. <http://www.njmonline>.