C.S. MOTT CHILDREN'S HOSPITAL
MICHIGAN MEDICINE

Pediatric Varicocele

What is a varicocele?

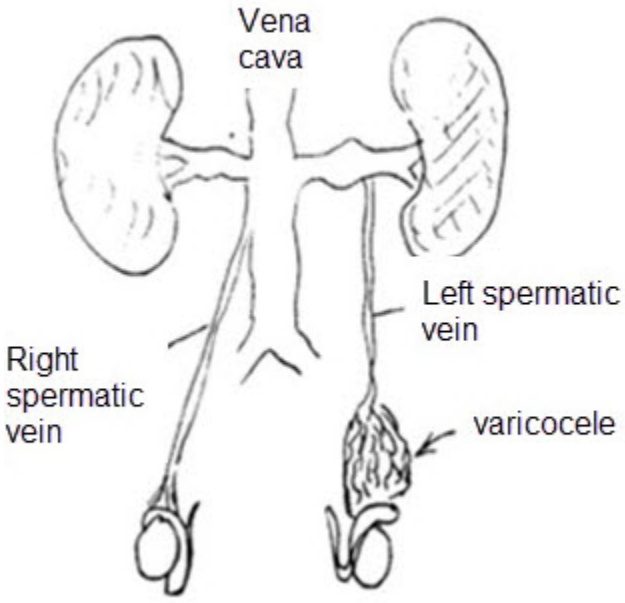
A varicocele is a collection of large veins draining the testicle. This is similar to the varicose veins that you might see on someone's legs. The veins bulge out because of the effect of gravity on the column of blood in the veins. The veins of the legs are the longest in the body and the veins in the testicles are the second longest. In either part of the body, the left veins are longer than the right and therefore more likely to become varicose. In most people veins have valves that keep the blood in small segments to prevent varicosity. People who get varicose veins or varicoceles do not have a normal system of valves in the veins. **Varicoceles are classified as Grade I (small), Grade 2 (medium) and Grade 3 (large).**

Is a varicocele common?

One in five men has a varicocele, which is usually small and does not result in any problems.

What are the problems with a varicocele?

In some cases, but not commonly, varicocele can cause problems. In boys around and after puberty, a varicocele can interfere with growth of the testicle. That is why we measure the testicles in boys with varicocele. Usually the testicles are nearly the same size; but, when the size of a testicle that has a varicocele is significantly smaller than the



normal testicle, correction of the varicocele can be considered.

Most men with varicocele are fertile, but when a man with a varicocele is not able to father children, correction of the varicocele may improve sperm quality and make fatherhood possible.

How is a varicocele corrected?

The techniques used to correct varicocele involve blocking or cutting the enlarged veins and include X-ray methods (placing small coils or foreign material in the veins to cause them to clot), conventional surgery through the groin or flank, laparoscopic surgery, or a minimally invasive subinguinal operation under the microscope with a tiny incision. The last method is performed here by Dr. Julian Wan and Dr. Kate Kraft and has the lowest complication rate and recurrence rate in our experience.

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