

# Hydroceles

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| **Commissioning decision** | **The CCG will provide funding for secondary care treatment of hydroceles for patients who meet the criteria defined within this policy.** |

# Policy Statement:

The CCG will agree to fund surgical referral for hydroceles in patients aged between 2 and 17 years old. Children under 2 years of age should rarely need treatment unless there are significant concerns about a hernia being present as most infant hydroceles will resolve without intervention.

In patients aged 18 and over referral should only be made if the patient meets the following criteria:

* Hydrocele symptoms are causing significant discomfort or functional impairment that is interfering with normal work, educational responsibilities and/or normal domestic activities. Description of problems should be documented in referral letter.

Where a Patient or GP has concern about scrotal swelling and is unclear if this is caused by a hydrocele an ultrasound scan should be considered as a simple way to alleviate concerns and may obviate the need for a referral. This does not require repeating if hydrocele confirmed ultrasonically.

# Rationale:

Hydroceles (fluid collection around the testicles) may be present at birth and are common, affecting around one male baby in every 10. They do not usually require treatment as they often resolve on their own during the first 2 years of life. The CCG will fund treatment for hydroceles in children if they do not disappear by the age of 2.

Less commonly, hydroceles can develop in adult men, spontaneously, or following infection and/or injury. Hydroceles are commonly asymptomatic. Therefore, in adults treatment is not funded unless the hydrocele is causing significant symptoms.

# Plain English Summary:

Hydroceles are swellings caused by a build-up of fluid around the testicle. A hydrocele results in a (usually) painless, swollen scrotum, on one or both sides, that feels like a water- filled balloon. Hydroceles are not usually dangerous and therefore treatment is not always medically necessary.

Hydroceles are common in babies, affecting up to one in ten male babies. However, they will often disappear without treatment before the age of two. Treatment is therefore not normally available for children under the age of 2. In children, where a hydrocele has not resolved itself by the age of two, the CCG will fund treatment if it is recommended by a specialist.

As hydroceles are usually painless and they are not dangerous to health, it is not necessary to operate in all cases where hydroceles are present. Hydroceles diagnosed with symptoms significantly impacting ability to work, perform educational and/or domestic activities will be considered for surgery.

If your doctor believes that you meet the criteria set out in this policy the CCG will fund your treatment.

# Evidence base:

Similarity to neighbouring CCG policies – Bristol, North Somerset and South Gloucestershire CCG.

Bath and NE Somerset, Swindon and Wiltshire CCG

1.NHS Clinical Knowledge Summaries, <http://www.cks.nhs.uk/>

Link to application form – Not applicable

For further information please contact [GLCCG.IFR@nhs.net](mailto:GLCCG.IFR@nhs.net)

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| **Date of publication** | 4th April 2016 |
| **Policy review date** | September 2024 |

**Consultation:**

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| **Consultee** | **Date** |
| Planned Care Programme Board | July 2015 |
| GHNHSFT Leads | May/June 2015 |
| GP Membership (via What’s New This Week) | July/August 2015 |
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| Has the consultation included patient representatives? | Yes |

**Policy sign off:**

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| **Reviewing Body** | **Date of review** |
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| Effective Clinical Commissioning Policy Group | 17th September 2015 |
| Integrated Governance and Quality Committee | 3rd March 2016 |

## Version Control:

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| **Version No** | **Type of Change** | **Date** | **Description of Change** |
| 2 | Review date changed at ECCP meeting | 21.6.18 | Review date changed to June 2021 |
| 3 | Minor wording changes  Policy type change and review date agreed at ECCP meeting 16.9.21 | 22.7.21  16.9.21 | Minor wording changes recommended by Urology consultant.  Review date changed to September 2024  Policy type changed from CBA+PA to CBA from 01.10.2021 agreed by Executive Directors M Walkingshaw & Marion Andrews-Evans 20.9.21 |