New research and advise on the necessity to remove Retained Testis

Bruce Fogle a well-known and respected author and vet, periodically had a phone / write in slot on the now debunked, and sadly missed Jimmy Young Program, on BBC Radio 2. During the program he would give information and advice on veterinary and animal behavioural topics. In such a 'surgery' in January, the question was posed, 'What action should be taken with a young dog with retained testicles?'. As Irish Setters can be affected in this way and as they are also sensitive to anaesthesia. I listened with interest and documented a summary of his reply. He started by saying 'If I were to have been asked this question a year ago, I would have had no hesitation in recommending that the retained testis should be removed at a time when the dog had reached maturity. Having read a recently published paper on the subject, my view has significantly changed'

I contacted Bruce Fogle's office the following day, but unfortunately he was unable to afford the time to write an article for us due to prior commitments. But I was able to identify and subsequently obtain from the BVA, a copy of the paper he had referred to on the program. It appeared in the BVA Veterinary Record, 30th March 2002, entitled *Decision analysis tree for deciding whether to remove an undescended testis from a young dog, by M. A. J. Peters PhD, and F. J. van Sluijs, DVM, PhD, DipIECVS*, of the Faculty of Veterinary Medicine, Utrecht University, the Netherlands. This article is written for vets and so, not in a lay person friendly way.

I made attempts to contact the authors of the article, initially without success, and so contacted Mike Stockman who as a retired vet could put the contents of the article in word we could understand, and this he did. However, subsequently Frederik van Sluijs did contact me, and although a very busy lecturer, and english not being his first language, he kindly consented to validate, amend and build on to, my summery of Bruce Fogle's reply.

F. J. van Sluijs write

There are a number of types of tumour that may occur in the testicles of the dog. Although, the risk that a tumour will arise, is higher in retained testicles than in normal testicles. These tumours should they arise are rarely life threatening. They do not spread to other organs or parts of the body and in most cases, are slow growing and do not cause serious illness. So the tumour does not pose a great threat to the dogs health.

When the time arrives that a decision has to be made, on whether the retained testicle should be removed at a young age. The risk that the dog may subsequently get sick due to the tumour has to be balanced against the risk of surgery and anaesthesia.

A decision analysis has shown, that the risk posed by anaesthesia and by complications arising during

and posts surgery, is roughly equal to the risk of the dog being affected by non-removal of the retained testis. In simple terms if you took 100 affected dogs and performed surgery on them all, a small percentage would die due to complications associated with surgery. Take the same 100 dogs and do not perform surgery, roughly the same percentage would die from the effects of the cancer.

The advice is then, that if the dogs quality of life is unaffected by the retained testis, the choice can be made to do nothing. However, if a tumour arises in the retained testicle, it is not visible from the outside as it is in a normal testicle. Therefore your vet should monitor the dog during routine visits, throughout the dogs' life, to check for enlargement of the retained testicle. If it is found to be too large it should be removed before it causes clinical signs.

Bruce Fogle having received a copy of the above, replied, supporting what Frederik van Sluijs' has written, and he made further comment.... "Concerning anaesthetics, setters are no more prone than any other lean breeds such as whippets, salukis, greyhounds etc. to longer recovery times from barbiturate anaesthetics. And, as barbiturates are no longer the intravenous anaesthetics of choice, I'm sure your readers will be aware of their setters' faster recover times with anaesthetics such as Rapinovet".

Mike Stockman writes

Cryptorchidism – To Cut or Not to Cut – That is the Question!

Let's get two or three things straight for starters ...

Firstly: If a dog is found to have neither testicle descended by the time he appears to be mature, he is not capable of producing live sperms.

Secondly: If a dog is found to have only one testicle descended (correctly describes as a unilateral cryptorchid) he is all too likely to be capable of mating and getting a bitch in whelp.

Thirdly: Nobody should ever contemplate using a unilateral cryptorchid as a sire, as the condition is capable of being passed from one generation to the next.

Right! Having got that dictate out of the way, let me explain why I'm even penning this article. Your Editor rang me to tell me she had been listening to that very clued-up central London Veterinary Surgeon, Bruce Fogle, on the Jimmy Young Show some month's back. During the particular JY programme, Bruce had been asked his advice about treating a dog with only one descended testis. Bruce, in reply, had quoted from an article published in the Veterinary Record.

This article discussed the decision facing owner/veterinarian on whether or not to carry out "a preventive orchidectomy", i.e. to remove the offending testis, or leave it in its intra-abdominal state. The article quotes from no less than 40 different references from all over the world. I have read the paper from end to end with considerable care and I will start by quoting from the last line of the authors' summary as it appears in the Record ... "The expected life span without and orchidectomy was not significantly different from the expected life span after an orchidectomy.

I am asked to relate this advice to the Irish Setter as a breed. The original article takes the theme that the average life span of dogs is 10 years. In my experience, a goodly proportion of Irish Setters last a lot longer; the Irishman rates as a 'big dog' though by no means a 'giant', which do have a tendency to a short life span. I am told that the breed did once suffer from an apparent excess percentage of males which did not have 'two apparently normal testicles fully descended into the scrotum' as the Breed Standard tells us. As a retired practising vet, I cannot say that that is my experience, but then we didn't have a plethora of Irish Setter breeders in the ten-mile radius area around Potters Bar, so I bow to those wizards who tell me that this was once a problem.

The problem of the intra-abdominal testicle is that it has a greater tendency to produce tumours than do normally descended testes. This is quoted in the paper as 26 times higher in the case of the Sertoli Cell Tumour, 15 times higher in the case of Seminomata. The Sertoli Cell Tumour to my mind is the one that leads to the greatest problem for both dog and owner as it often gives rise to feminising effects. These lead to them being attractive to and chased by normal males, to alopecia and a smell offensive to humans; and often to a swollen pendulous prepuce. In addition, afflicted dogs may grow fat and greasy-skinned.

It is extremely difficult to diagnose what may be happening in an abdominal testicle; biopsy involves surgical interference and therefore much the same risks as anaesthesia. Frankly, my advice is still the same as it was when I was at the sharp end remove it while the dog is still young and best able to cope with any stress associated with surgery.

Clearly the decision we make is individual to each dog, and can be made at any time in the dogs life. If you have a dog with retained testis, and would like a copy of the Paper to assist in the decision you will make with your vet, for your dog. A copy is available from the Hon. Sec, on receipt of a SAE.

Rosie Dudley