Brief Communications

Cryptorchidism

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 \mathbf{n} ryptorchidism is a common congenital anomaly C with a prevalence of approximately 2.7% at birth and 1% at one year of age. Incidence of cryptorchidism is increased several folds by premature birth of whatever cause. This entity also seems to have same prevalence in our part of the world. Generally classified as per the anatomic sites, 10-15% of cases are bilateral. The known causes of cryptorchidism constitute only a small fraction of cases and the etiology in most cases remains to be identified. Inadequate intra-abdominal pressure and deficient endocrine function of the testes, either due to the deficient testosterone production or inadequate formation of mullerian duct inhibitor (MDI) are the 2 general theories advocated as far as the etiology is concerned. The finding of cryptorchidism in patients with spina bifida suggest the role of spinal nerves in signal transmission for testicular descent. There are many inherited syndromes in which cryptorchidism is an associated anomaly. Familial incidence of cryptorchidism is a described entity. We hereby report a case of cryptorchidism who had this congenital anomaly in 3 successive generations. A 42-year-old Sikh male married with 3 children (one male and 2 females was admitted to the Medical Oncology Department with complaints of low back ache and abdominal pain of 5 months duration. Clinical examination revealed a vague mass in the umbilical region and right undescended testes. Radiodiagnostic evaluation revealed a retroperitoneal paracaval lymphadenopathy. mass with On exploratory laparotomy, it was found an inoperable tumor and incisional biopsy of nodes revealed seminoma and patient was started on intensive cyclical combination chemotherapy. The incidence of testicular cancer is increased in patients with cryptorchidism. Among men with testicular cancer, approximately 10% have a history of cryptorchidism, compared to the expected figure of 1%. Cancer is



Figure 1 - The 3 generations of the patient with cryptorchidism.

highest in men with abdominal testes and entire spectrum of germ cell tumor is observed. During interaction with the patient it was found that his father and his only son had also right undescended testes which was confirmed at his home. Although familial incidence of undescended testes is known but the incidence of malignancy in this group has not been however reported to our knowledge. Keeping in view the occurrence of malignancy in this family, we postulate a higher risk of malignancy in familial cryptorchidism for varied biological reasons.

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