

Ali Ekber Hakalmaz, Buse Karakurt, Ayşe Kalyoncu Uçar\*, Cansu Tekgöl\*, Ayşe Çiğdem Tütüncü\*\*,  
Ayşe Karagöz Hakalmaz\*\*\*, Ali Sezer\*\*\*\*, Yunus Söylet, Haluk Emir, Mehmet Eliçevik

Division of Pediatric Urology and Departments of Pediatric Surgery, \*Radiology, \*\*Anesthesiology,  
Cerrahpaşa Faculty of Medicine, Istanbul University-Cerrahpaşa

\*\*\*Department of Pediatric Surgery, Bağcılar Training & Research Hospital

\*\*\*\*Pediatric Urology Clinic, Konya City Hospital

## Patients and Method

Retrospective / 2011 – 2023

Unilateral inguinal testis  
Inguinal approach

Prentiss maneuver and modifications

## Indication

Complete retroperitoneal dissection  
was not adequate

## Technique

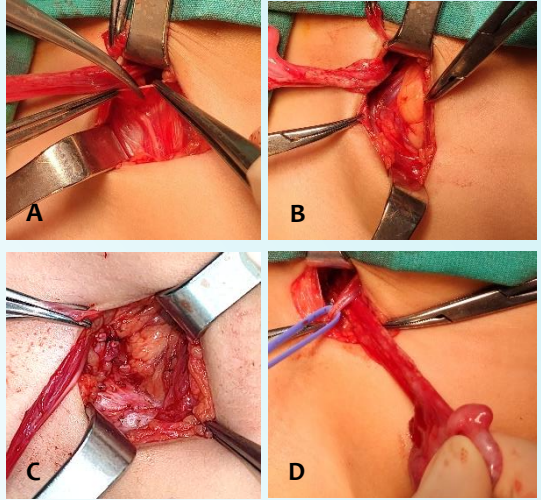
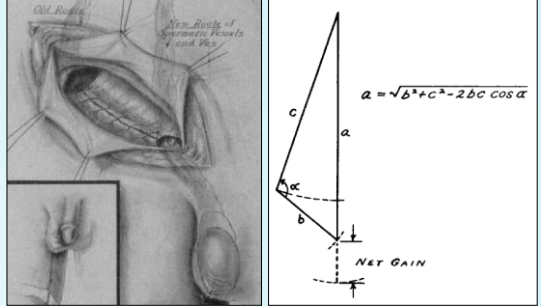
Fascia transversalis was opened from  
internal ring to ramus pubis. (A-B)  
Inferior epigastric vessels was **ligated** (C)  
or **preserved** (D) and spermatic cord  
rerouted behind vessels.

## Follow-up

Postoperative 6th months  
Examination and Ultrasonography

- Equal volume → Normal
- Volume difference → Testicular atrophy index (TAI)

TAI = Volume Gap / Volume of normal testicle  
Atrophy = TAI > %50, Hypotrophy = %20 < TAI < %50



## Results

N:43	LIGATED (n:21)	PRESERVED (n:22)
RIGHT (n:26)	14	12
LEFT (n:17)	7	10

Age at operation: 2,8 yrs (2mo – 9yrs)  
Varicocele (n:1) → left proximal inguinal, ligated.  
Microthiasis (n:1) → left proximal inguinal, ligated.  
Follow up: 22 mo (6mo – 5yrs)

N:43	PROXIMAL INGUINAL / PEEPING (n:19)		MIDDLE AND DISTAL INGUINAL (n:12)		SUPERFICIAL POUCH / EXTERNAL RING (n:12)	
	LIGATED (n:11)	PRESERVED (n:8)	LIGATED (n:3)	PRESERVED (n:9)	LIGATED (n:7)	PRESERVED (n:5)
EQUAL VOLUMES	3	1	1	3	4	4
SMALL / NORMAL DEVELOPMENT	6	6	2	4	3	1
HYPOTROPHY	<u>2</u>	<u>1</u>	<u>1</u>	<u>2</u>	-	-

## Conclusion

Prentiss maneuver is effective and safe. Ligation and preservation of vessels both have similar outcomes.