

The Treatment of Varicocele by Excision 95

some connective tissue, is situated behind and is much more closely connected with the sheath, is reached. The anterior three-fourths or so of the venous plexus, including all the dilated veins, are then separated, leaving a few small veins with the vas, which is not touched and is not separated from the sheath. The anterior mass of dilated veins is now drawn downwards and, by a little dissection, freed from the sheath and the vas as high as is thought desirable. Next, they are drawn upwards, and the

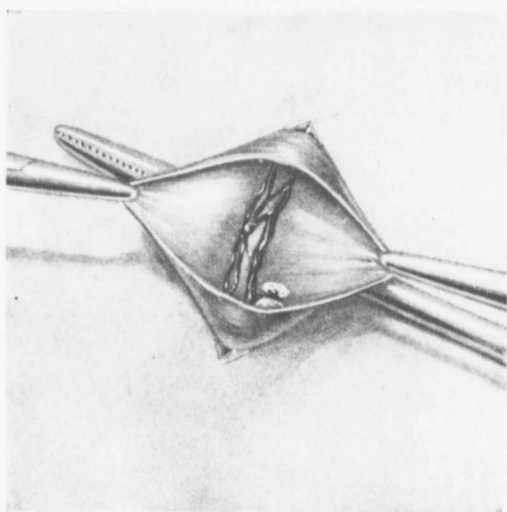


FIG. 21.

same separation can now be effected as low as the upper limit of the tunica vaginalis, care being taken not to open this structure.

Excision of the Varicocele.

The isolated group of veins, perhaps four inches in length, or even longer, is now ligatured above and below by medium catgut, and the intervening part is cut away (Fig. 20). The ends of both ligatures are cut short, and the testicle, which has probably been drawn up into the wound, is replaced in its bed in the scrotum. During the separation and excision of the varicocele there should be no injury to the vessels, but, if there