

as to completely incapacitate the patient. The pain is due either to injury or to definite attacks of inflammation, which are probably of traumatic origin. The liability to injury depends upon the fact that, in its abnormal position, the testicle is less mobile, and thus is more liable to blows as well as to slighter injuries, the result of friction from the clothes or even of muscular action. The most serious result of injury is the occasional occurrence of torsion of the spermatic cord, which, though a rare contingency, is more likely to occur with an imperfectly descended than a normal testicle, owing, most probably, to the presence of a definite mesorchium and the large tunica vaginalis. Torsion is likely to be followed by gangrene, and will generally call for castration. More frequently there are definite attacks of orchitis, or a chronic inflammation may occur, giving rise to persistent and disabling pain. A common complaint is that, after walking a short distance, severe pain occurs, which renders rest imperative before further exertion can be undertaken. This is probably due to friction with the clothes or to slight injury, owing to the movements of the hip in walking. Inflammation may also be due to any of the causes which lead to orchitis, for instance, after mumps, or to epididymo-orchitis, which is secondary to infection of the prostatic urethra. The most important of these is gonorrhœa, and in the event of septic infection occurring, which is fortunately very rare, the process may, owing to the patent processus vaginalis, extend to the peritoneal cavity. These inflammatory complications are likely to occur when the testicle is arrested in the abdominal cavity, as well as when it is in the inguinal canal or in one of the other abnormal positions. These repeated attacks of inflammation must have an important effect in increasing, even if they do not actually produce, atrophy.

Occasionally a hydrocele may be present, and this may be either of the type of the ordinary vaginal hydrocele or may be secondary to inflammation. The swelling may be reducible or irreducible, though the latter does not necessarily mean that the communication with the peritoneal cavity is closed.

The imperfectly descended testis is liable to be the seat of growths, both innocent and malignant, similar to those which