

The above drastic measures are only temporary; they only act so long as the stitches hold, and cease to have any effect as soon as the stitches are removed or when they cut through. The tendency to return to the old position persists for a long time after the operation, and hence a case which, a few weeks after, appears likely to be successful, may, if seen again some months later, show that the testicle has returned to, and become fixed in, the groin. The patient, or his parents, may be instructed to persevere with daily manipulations of the organ in a downward direction, but it appears unlikely that this can entirely overcome the strong tendency to retraction.

In a good many cases the testicle does not develop, but shows evidence of further atrophy, and may become merely a small fibroid nodule; this is generally associated with retraction towards its former position, but may occur even though it remains in the scrotum. This atrophic change is probably due to injury to the testicle and interference with its blood supply. Even a normal testicle is a delicate structure, and in an imperfectly descended and developed organ, which it is hoped will, after transplantation, undergo further development, the injury produced by transfixion and laceration of its substance by sutures, and the interference with its blood supply by tension on the cord, are likely to imperil this desired result.\*

Mr. McAdam Eccles ("The Imperfectly Descended Testis," p. 39) thus sums up the results of the operation:—

"In a certain proportion of such cases it will grow and develop so as to become in the future a thoroughly efficient organ. The exact number of instances in which this happy termination does occur is unknown, because there are no proper statistics on the subject. But, from the after-inspection of not a few cases where the testis has been transplanted into the scrotum at the same time that a radical operation has been performed upon the accompanying inguinal hernia, it has been found that the

\* Mr. L. B. Rawling, "The Surgical Treatment of the Incompletely Descended Testis," *Practitioner*, 1908, Vol. LXXXI., p. 250, investigated the results in a series of forty cases. He classifies them as follows:—

4 cases	.	.	.	.	.	.	Fair results.
3 cases	.	.	.	.	.	.	Promised favourably.
8 cases	.	.	.	.	.	.	Not traced.
25 cases	.	.	.	.	.	.	Failures.