

## Summary

---

### Summary

Most undescended testes are palpable, but around 20% of cases are reported as non-palpable, and these represent a major challenge as regards determining the most effective strategy for diagnosis and treatment.

The study was performed to evaluate a newly described vessel sparing technique (gradual traction method) <sup>[135]</sup> for treatment of high impalpable undescended testes.

This study included 18 patients who presented with 23 impalpable testes to the outpatient clinic of fayoum university hospital in 2012-2013, and underwent laparoscopy by the same surgeon. Intra-abdominal testes were managed by standard inguinal orchiopexy if intracanalicular or peeping, laparoscopic orchiopexy if low and staged traction (Shehata technique) if high. Children were evaluated postoperatively to check the location and size of the testicle and to exclude any other complication.

Mean age at presentation was 6.86 years (range 1-18 years). seven testes were absent while inguinal exploration was necessary for six testes with the vas entering the internal ring. Of the 10 intra-abdominal testes, 9 were identified as high (staged traction) and one as low ( primary laparoscopic orchiopexy). Follow up was 6-18 months (mean 10 months). On follow up, the testes were normal sized and well positioned in the scrotum in traction groups with an overall success rate of 89% as one testis slipped off the traction stitch and was converted to a staged Fowler-Stephens procedure.