MP46: Evaluating Testicular Torsion Outcomes and Frequency of Manual Detorsion Attempts Across Tertiary and Community Hospitals

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Testicular torsion (TT) is a well-known urologic emergency.

Prompt detorsion essential for testicular salvage.

Prior studies demonstrate benefit of manual detorsion (MD)*
  - Tightly controlled and protocolled
  - Not real-world experience

MD is NOT part of the urologic guidelines for management of testicular torsion.

*Filho AC, et al, J Urol, 2017
Methods and Hypothesis

• Retrospective review of all TT patients
  – Determined MD attempt and facility characteristics
  – Primary outcome:
    • orchiopexy (Testicular Salvage) vs. orchiectomy

• Hypothesis: MD is not associated with improved rates of testicular salvage in a real-world setting
Results

• MD attempted in 15% of all TT occurrences
  – Similar rate of MD attempts between tertiary and community (44% vs 56%)

• Predictors of Testicular Salvage:
  • Normal echotexture
  • Shorter duration of torsion
  • Degree of torsion
  • MD attempt NOT significant
CONCLUSIONS

• Manual detorsion is attempted in 1/8 patients

• MD seems to not improve the rate of testicular salvage in a real-world setting

• MD only attempted in 15% of cases of TT with an even split between tertiary care centers and community hospitals

• Large scale studies warranted to determine maximum benefit of MD in ED setting