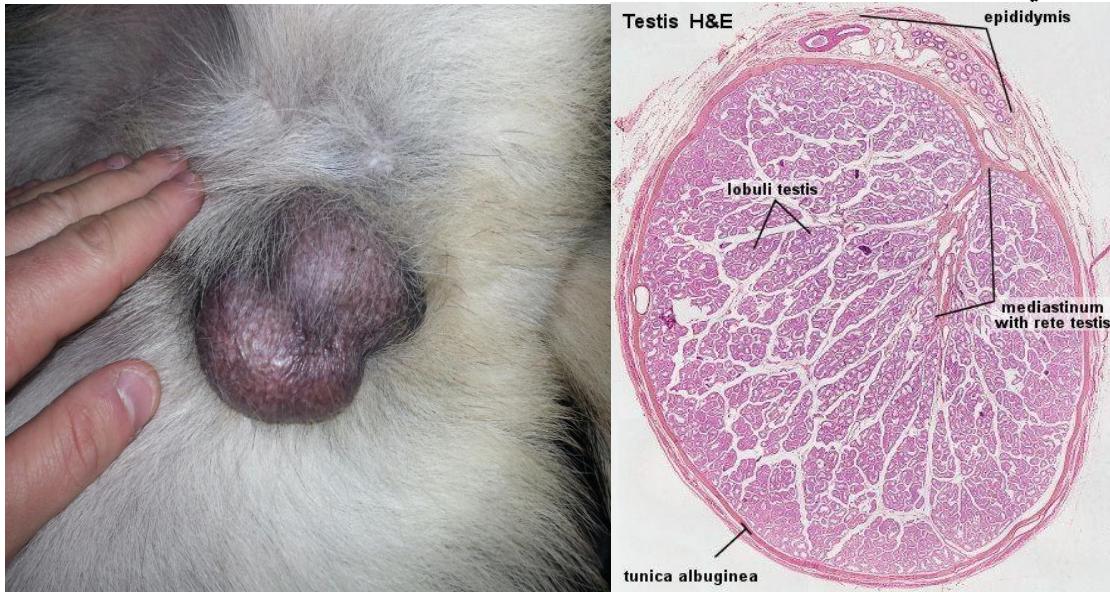


إزالة الخصية (castration)

Anatomical structure

1. the scrotal wall consist of 2 layers
 - outer skin covered with fine hairs
 - the dartos consist of smooth muscles and fibrous tissue firmly adhering to the first
2. layers of external spermatic fascia
3. tunica vaginalis
4. tunica albuginea
5. testes

دوعي العملية

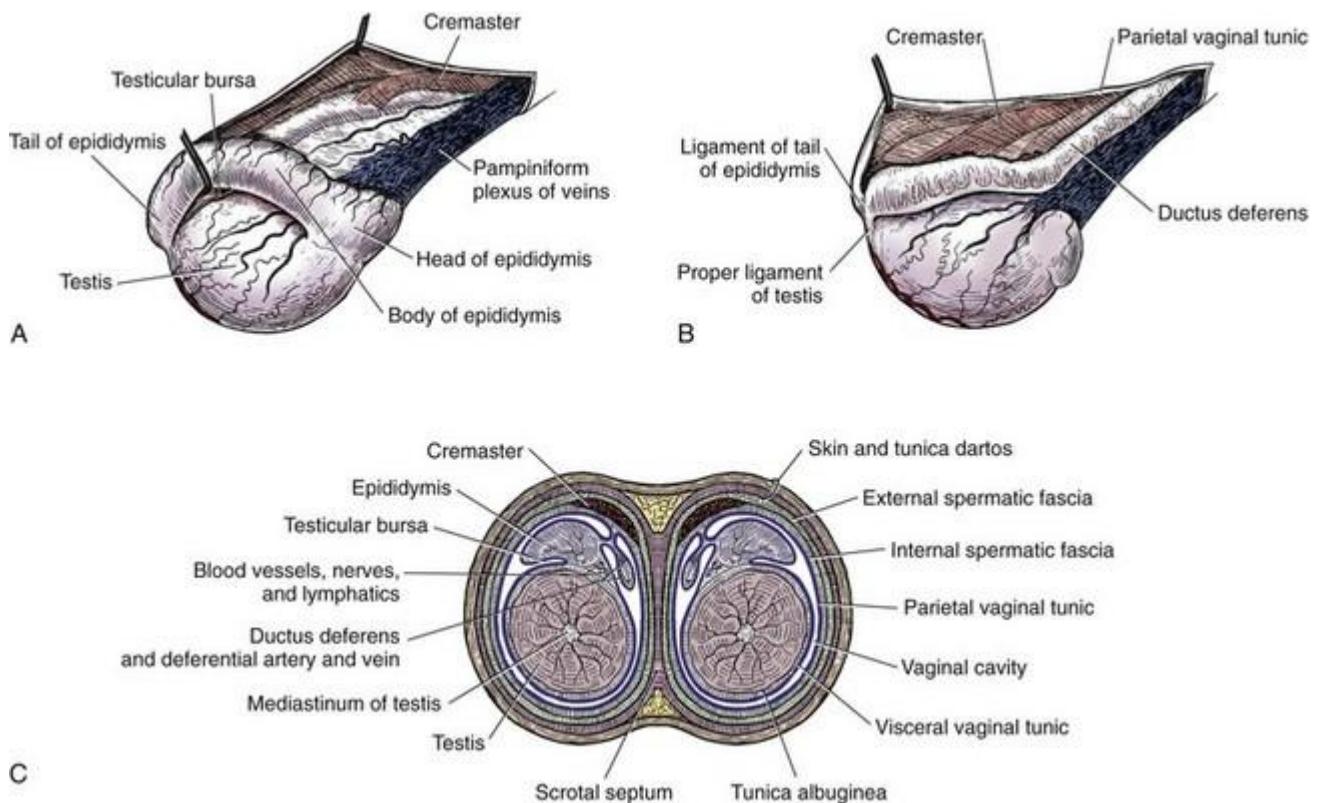


١. حصول جرح للصفن يتداخل مع الخصيتين
٢. التهاب الخصيتين المزمن
٣. تسمين
٤. اجرائها روتينيا قبل قطع القضيب في الخيول
٥. منع الذكر من التكاثر عند وجود صفات وراثية غير مرغوبة فيه
٦. علاج الفتوق الارببية و الصفنية في الخيول
٧. تهدئة الحيوان و جعله سهل الانقياد
٨. تحديد النسل و منع التزاوج غير المرغوب
٩. التسمين بالنسبة للحيوانات المهيأة للذبح
١٠. تحسين الصوف كما و نوعا

Surgical procedure

Close technique

1. Place the dog in dorsal recumbency and aseptically prepare the prescrotal area
2. Incise the prescrotal skin on the midline while gently pushing one testis
3. incise the sub cutaneous tissue and spermatic fascia over the testis to expose the parietal vaginal tunic
4. exteriorized the tunic covered testis and using scissors incise the spermatic fascia and ligament close the testis
5. reflect fat and fascia surrounding the parietal vaginal tunics using a gauze sponge to enable expose the spermatic cord
6. double ligate the intact spermatic cord and vaginal tunics using transfixing ligature of absorbable suture material and transect it or emasculate the spermatic cord
7. close the sub cut tissue with simple interrupted pattern , the skin with interrupted suture pattern



open method

1. incise the parietal vaginal tunic
2. double ligate the spermatic cord using transfixing ligature of absorbable material
3. ligate the parietal vaginal tunic and cremaster muscle using an encircling ligature transect the spermatic cord and cremastis muscle
4. close the skin with usual manner

complications

1. bleeding
2. excessive swelling because of in adequate drainage
3. wound infection and septicemia
4. hydrocele because collection of fluid
5. fibrosis of spermatic cord stump due to chronic infection



post operative care

1. give systemic antibiotic for 3 days
2. remove the sutures after 7-10 days

