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CRYPTORCHID AS A PREDISPOSING FACTOR IN ORIGINATING GERM CELL TESTICULAR TUMOR

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INTRODUCTION

Between 7 and 10% of testicular tumors are related to cryptorchidism, which occurs when the testicles do not physiologically descend into the scrotum until three months of age, being found in an anomalous location, which can be either in the abdominal cavity or anywhere in the peritoneal-vaginal conduit. Therefore, although controversial, hormonal clinical treatment can be administered from nine months onwards. If it is not effective, surgical correction becomes necessary, which must be carried out up to two years of age, ideally before twelve months of age. However, if it is not corrected by this age range, it is considered a significant risk for developing testicular cancer.

OBJECTIVE

Therefore, this work aims to analyze the consequences of cryptorchidism, especially in testicular germ cell tumors, as well as the developments that may lead to an increased predisposition to this risk.

METHODOLOGY

This work is a descriptive study based on a literature review with the aim of searching for articles that dealt with cryptorchidism as a factor in causing testicular germ cell tumors. The database used was the National Library of Medicine (PUBMED).

RESULT

There is much discussion about cryptorchidism as a predisposing risk factor for tumors, therefore, hypotheses were formulated in order to explain how young men with a history of cryptorchidism have a 4 times more significant association with germ cell tumor. The first hypothesis is that of common cause, which attributes unknown etiological factors to the genesis of the disease and the second hypothesis concerns position, as it ensures that the suprascrotal environment increases the malignant potential of undescended testicles, the latter being the hypothesis most attributed to testicular germ cell tumor. Thus, studies demonstrate that, when it comes to unilateral cryptorchidism, the risk of acquiring the disease in the ipsilateral testicle is approximately 4 times greater than in the contralateral testicle, as well as in bilateral cryptorchidism as a risk factor, the chances of developing it double. develop the tumor. Likewise, orchidopexy as a treatment for cryptorchidism is discussed, because there is a greater risk in patients who undergo the orchidopexy procedure late. For example, a Danish study showed that the risk of acquiring the disease increases the later orchidopexy is performed, with the risk being 1.1% in boys who underwent surgery between 0-9 years old, gradually increasing to 2.9%. with 10-14 years, 3.5% with 15 years or more and 14.4% risk of developing testicular germinal tumor when it comes to adults with persistent cryptorchidism. However, the data analyzed are not sufficient to predict the ideal age to perform orchidopexy in order to reduce the risk to baseline. Therefore, regardless of the age at which orchidopexy is performed, all individuals with cryptorchidism must be aware of potential future risks and be closely observed.

CONCLUSION OF THE WORK

As a result of the literature review, the present study confirms that cryptorchidism is a predisposing factor for the development of germ cell tumors, as it understands that the suprascrotal environment provides the potential for malignant cell replication of the ascending testicles. Therefore, it is important to maintain regular follow-up of boys with a history of cryptorchidism with a urologist, in order to establish an early diagnosis and obtain better prognoses.

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