

CASTRATION IN THE EVENT OF INGUINAL/SCROTAL HERNIA

- The procedure is done under general anaesthesia with the animal in lateral or dorsal recumbency and hind limb slightly elevated.
- Incise the skin over the external inguinal ring near base of scrotum.
- Reduce hernia manually if possible or by twisting the testicle and spermatic cord to return the hernia contents to the abdomen
- If the hernia cannot be reduced, the tunic is opened and the hernia reduced manually. Adhesions are bluntly separated if necessary. Intestine is resected only if obviously devitalized, and devitalized omentum can be resected if desired.
- The twisted spermatic cord can be transfixed with no.-2 absorbable sutures and tacked to the sides of the external inguinal ring, effectively occluding the inguinal canal. The hernia is reduced, the testis emasculated, and the external inguinal ring closed



Figure 12.1.3-2 A, Bull in lateral recumbency with affected limb abducted. The inguinal area is prepared for aseptic surgery. B, Twisting the vaginal tunic to reduce an indirect hernia. C, Use of an emasculator. D, Placement of sutures in the external inguinal ring (Courtesy of Dr. David Anderson; The Ohio State University.)