



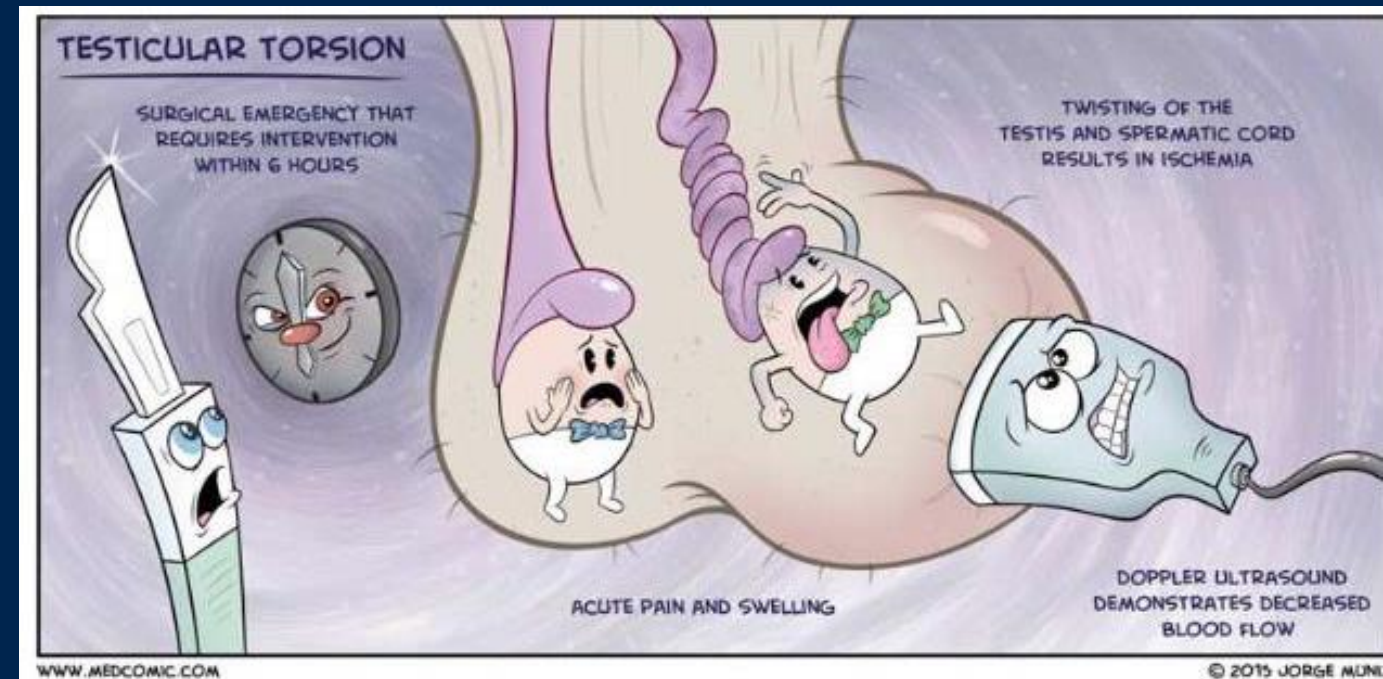
# MP46: Evaluating Testicular Torsion Outcomes and Frequency of Manual Detorsion Attempts Across Tertiary and Community Hospitals

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# BACKGROUND

- 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