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**CASE REPORT** **OPEN ACCESS**

# Traumatic Dislocation of the Testis into the Thigh: A Rare Case Report

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**A B S T R A C T**

Traumatic dislocation of the testis is an uncommon injury typically associated with high-impact trauma. We present the case of a 36-year-old male who sustained dislocation of the right testis into the thigh following a motorcycle accident. Diagnosis was delayed by two weeks, with confirmation made via ultrasonography and computed tomography (CT). Surgical management involved inguinal exploration and successful orchidopexy. This case underscores the importance of early recognition and appropriate management of this rare urological injury to preserve testicular function.

**Keywords: TRAUMATIC DISLOCATION OF TESTIS**

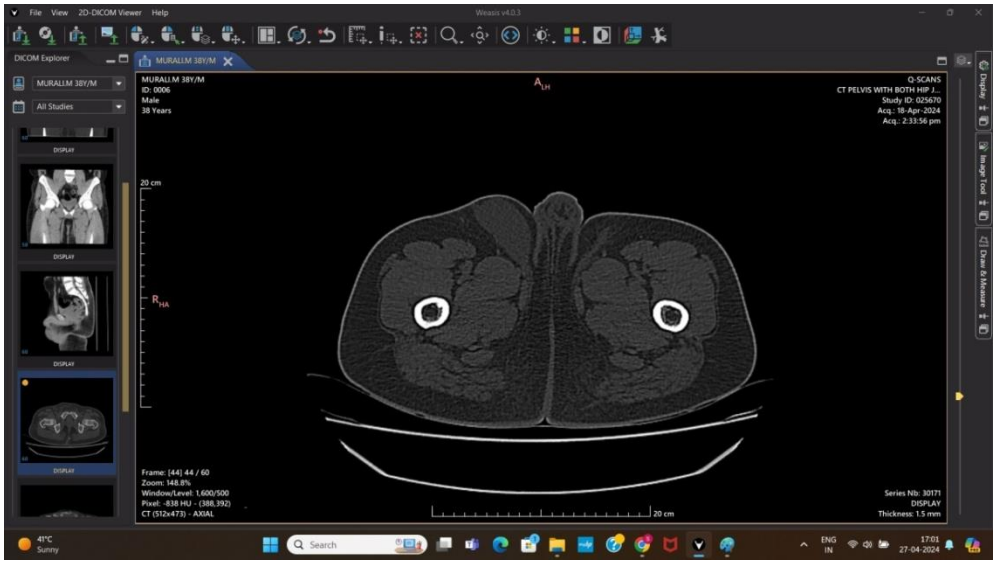
## INTRODUCTION

Traumatic dislocation of the testis, also known as luxation, refers to the displacement of the testis from the scrotum into an abnormal anatomical location. This rare injury is primarily associated with high-energy trauma, such as motorcycle accidents. Fewer than 200 cases have been reported in the literature over the past two centuries, with dislocation into the thigh being exceptionally rare and accounting for only three documented cases, including the one presented here.

### Case Report

A 36-year-old male was involved in a high-speed motorcycle collision with a stationary vehicle while under the influence of alcohol. Initial evaluation at a local hospital identified bruising on both thighs, but swelling in the upper right thigh was misdiagnosed as a subcutaneous hematoma. The patient subsequently presented two weeks post-injury with the primary complaint of an absent right testis.

On examination, the right testis was absent from the scrotum, while the left testis appeared normal. A fluctuant swelling in the upper right thigh was identified. Ultrasonography revealed a normal-sized right testis with surrounding fluid and preserved vascularity. CT imaging confirmed the testis's displacement into the thigh. Surgical exploration via an inguinal approach was performed. The dislocated testis was isolated, mobilized, and successfully repositioned into the scrotum using the subdartos pouch technique. Postoperative recovery was uneventful, with follow-up confirming normal testicular position and function.




**DISCUSSION**

Traumatic testicular dislocation is an infrequent complication of high-impact trauma, most commonly involving motorcycle accidents. The mechanism typically involves sudden deceleration, with the perineum forcibly impacting the fuel tank or handlebars, displacing the testis out of the scrotum. Dislocations may be classified as superficial or deep,

depending on the final position of the testis. Deep dislocations, such as those into the thigh, are rare and often associated with significant trauma.

Risk factors for testicular dislocation include retractile testes, a wide superficial inguinal ring, and concurrent inguinal hernia. Diagnosis requires a high index of suspicion, detailed patient history, and thorough physical examination. Imaging modalities, including ultrasonography and CT, are critical for confirming the diagnosis, assessing testicular viability, and planning surgical management.

Management strategies depend on the timing of presentation and the extent of associated injuries. Manual reduction may be attempted in acute cases without significant trauma. However, surgical intervention is often necessary, particularly for delayed presentations or deep dislocations, to reposition the testis and perform orchidopexy. Timely management is essential to preserve testicular function and prevent complications such as ischemia or atrophy.

## CONCLUSION

Traumatic dislocation of the testis, though rare, should be considered in patients with scrotal trauma and absent testis on examination. Prompt recognition and intervention are paramount to avoid misdiagnosis and ensure optimal outcomes. This case highlights the importance of maintaining a high level of clinical suspicion and utilizing appropriate imaging and surgical techniques to manage this uncommon urological emergency.

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