

NTP Nonneoplastic Lesion Atlas

Testis – Fibrosis

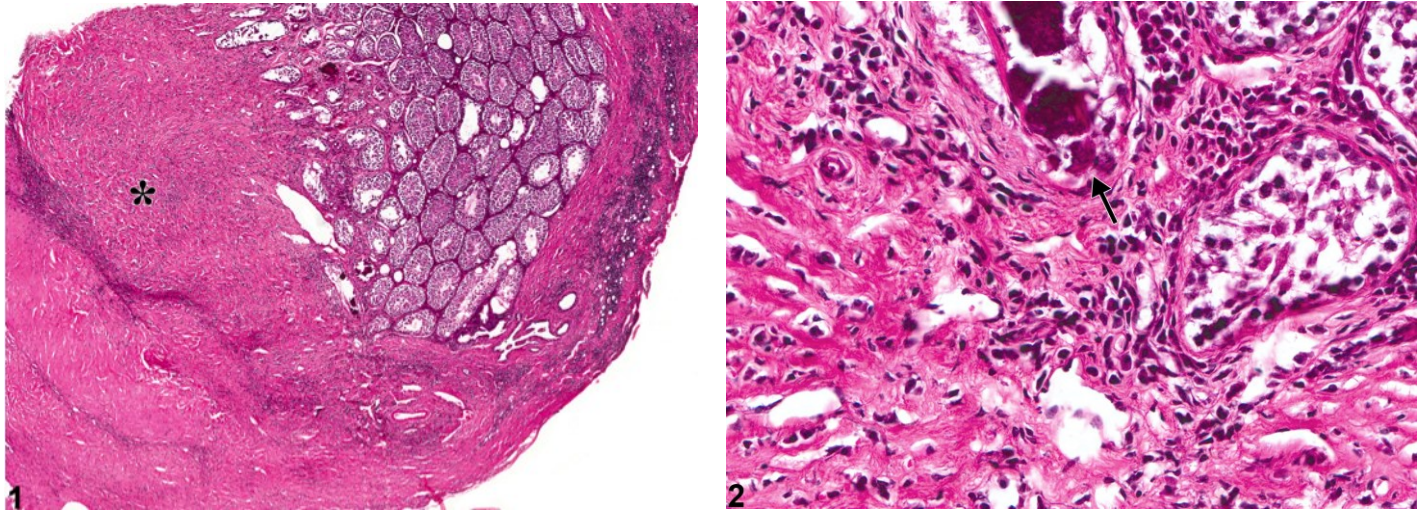


Figure Legend: **Figure 1** Testis - Fibrosis in a male Swiss CD-1 mouse from a chronic study. Fibrosis (asterisk) with extension into the tunica albuginea. **Figure 2** Testis - Fibrosis in a male Swiss CD-1 mouse from a chronic study. This higher magnification of Figure 1 also has dystrophic mineralization (arrow).

Comment: While modest amounts of fibrosis can be seen in chronic inflammation of the testis, the degree of fibrosis present in Figure 1 warrants an independent diagnosis. Fibrosis is usually associated with replacement of testicular parenchyma by fibroblasts and collagen following necrosis and inflammation. This can be focal, multifocal, or extensive (Figure 1, asterisk), with extension to the tunica albuginea. The fibrosis may be accompanied by mineralization (arrow) and inflammation (Figure 2). Distribution can be unilateral or bilateral. Testicular fibrosis is induced in rats by chronic cocaine or cadmium administration.

Recommendation: Fibrosis should be diagnosed and graded if it represents a primary lesion and when warranted by extent and severity and should be discussed in the pathology narrative if the incidence and/or severity appears to be related to chemical administration. If present in both testes, it should be diagnosed as bilateral.



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References:

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