WHAT IS TESTICULAR CANCER?
Testicular cancer is the most common cancer among men ages 18 to 35. Still, it is fairly rare. About 8,800 men will be diagnosed with testicular cancer in the US this year. Men who were born with an undescended testicle are at higher risk. The good news is testicular cancer is also one of the most treatable cancers. When caught early, the cure rate is close to 100 percent. This is true for men with Stage 1 testicular cancer, where the cancer has not spread outside the testicle. For men with Stage 2 or 3 testicular cancer, the cure rate is still much higher than that of other cancers. A man’s risk of dying from testicular cancer is small. About 380 men will die of testicular cancer in the US this year.

Since only men have testicles, only men can get testicular cancer. Your testicles (also known as testis) are the two oval glands contained in a sac (scrotum) below the penis. They make sperm and the male sex hormone testosterone.

SIGNS OF TESTICULAR CANCER ARE:
• A lump or firmness within your testicle
• Swelling or enlargement of your testicle (with or without pain), or
• Pain, soreness or a dull ache in your testicle

Talk with your health care provider as soon as you notice any of these signs. Sadly, it is common for men to put off talking to their doctor. If it is cancer, the longer you delay, the more chance the cancer has to spread.

If you have symptoms, your doctor may do a physical exam, a blood test and an ultrasound. You may be referred to a urologist, a surgeon who treats testicular cancer. Unlike many other cancers, testicular cancer is not diagnosed by taking a biopsy (tissue sample). Doing a biopsy could cause the cancer to spread.

WHAT ARE THE STAGES OF TESTICULAR CANCER?
• Stage 1: Cancer is found only in the testicle
• Stage 2: Cancer has spread to the lymph nodes in the abdomen
• Stage 3: Cancer has spread beyond the lymph nodes in the abdomen. The cancer may have spread to parts of the body far from the testicles, such as the lungs and liver

HOW IS TESTICULAR CANCER TREATED?
Most often, the first treatment is surgery to remove the testicle. For stage 1 patients, this may be all that is needed to remove the cancer. They will then be followed closely with blood tests and scans. Stage 2 and 3 patients may need surgery to remove lymph nodes. They may also need chemotherapy, radiation therapy, or removal of tumors that have spread farther.

Most of the time, cancer is only found in one testicle, and the other testicle still works well. Removing one testicle will not make a man any “less of a man.” Removing one testicle should not cause erection problems (ED) or make a man
unable to father children. In most cases, the healthy testicle that is left should be able to make all the testosterone the body needs. Still, other treatments affect your sperm count and make it harder to have children. Your doctor may suggest that you bank your sperm before or soon after the testicle is removed or before advanced treatment starts.

WHO IS AT RISK?

Men who were born with an undescended testicle are more likely to get testicular cancer. Undescended testicle (also known as cryptorchidism) is when a boy’s testicle does not drop from the abdomen into the scrotum by birth. Testicular self-exam is important for these men. Cancer can occur in either the testicle that did not descend or the one that moved down by birth. Men whose father or brother had testicular cancer are also more likely to get it. They should do self-exam monthly, also.

HOW TO DO A TESTICULAR SELF-EXAM:

Boys can start doing monthly testicular self-exams during their teen years.

The best time to examine your testicles is right after a hot bath or shower. The scrotal skin is most relaxed at this time and the testicles can be felt more easily. The exam should be done while standing and only takes few minutes.

• Look for swelling in the scrotum.
• Gently feel the scrotal sac to find a testicle.
• Examine the testicles one at a time. Firmly and gently roll each testicle between the thumb and fingers of both hands to feel the whole surface.
• Note that it is normal for one testicle to be slightly larger than the other. It is also normal to feel a cord-like structure (the epididymis) on the top and back of each testicle.
• If you find a lump, swelling or other change, get it checked out right away. Changes are not always cancer. If it is cancer and you catch it early, you have the best chance for a cure.

WHAT IS THE CURE RATE?

The good news is that cure rates are almost 100 percent for stage 1 disease. With more advanced testicular cancer, more than 75 percent of patients are cured.

There is no known way to prevent testicular cancer. Young men should know what to look for and get any concerns checked out right away. That’s the best way to stop it from being a life-threatening problem.

RESOURCES

National Cancer Institute
1-800-4-CANCER

Testicular Cancer Treatment
In English: http://www.cancer.gov/cancertopics/pdq/treatment/testicular/Patient

In Spanish: http://www.cancer.gov/espanol/pdq/tratamiento/testiculo/Patient

National Library of Medicine

Urology Care Foundation
For more facts about testicular cancer and other urologic health problems, please visit the Urology Care Foundation’s website, UrologyHealth.org.

You may download this and print it yourself from UrologyHealth.org/TesticularCancerFS. For copies of other printed materials about urologic conditions, visit UrologyHealth.org/Order or call 800-828-7866.