



Testicular cancer



A lump in the testicle may be a worrisome sign and should be investigated by a medical doctor.

Testicular cancer is a frightening condition for men and their loved ones. Most often it is diagnosed in young men who are typically not expected to be faced with a diagnosis of cancer. It is actually the most common type of cancer found in young men in Canada. It is also one of the most curable cancers men can have. The testicles are the main male reproductive organs located in the scrotum. Testicular cancer occurs when cancer cells develop in one or both testicles. It is usually diagnosed after finding a lump or a growth in or around one of the testicles. It can also be diagnosed after noticing pain, a dull ache or heaviness in the scrotum. There are many factors that are considered when deciding treatment for your testicular cancer.

Risk factors

There are a number of known risk factors that can increase your chances of developing testicular cancer. If you had a testicle that was not completely descended into the scrotum at birth, if you have a personal history or a family history of testicular cancer, or if you have a history of infertility (difficulty getting a partner pregnant), these may increase your risk of testicular cancer. **Most of the time**, however, we do not know what caused the cancer to develop.

Diagnosis

There are common tests that all males who are diagnosed with testicular cancer go through. The first step is a physical exam by a physician to determine if any abnormalities can be felt. This is usually followed by an ultrasound (a machine that uses sound waves to look inside of the scrotum and testicles). If a suspicious area is identified, your physician will order further blood tests. These blood tests will include various tumour markers which are substances produced by some testicular tumours. A CT scan of your abdomen and pelvis with a chest x-ray or a CT scan of your chest is also required to determine the spread of the cancer. The next step is usually to remove the testicle through a small incision in your lower abdomen to confirm the diagnosis and establish the type of cancer you have.

Staging

Depending on the type of testicular cancer, the results of your blood tests and the results of your CT scans, you will then be assigned a stage of testicular cancer. The stage of the cancer is determined by the extent of the cancer. Stage I is found only in the testicle, Stage II is also in the lymph nodes of the abdomen, and Stage III has spread beyond the lymph nodes of the abdomen. Treatment will depend on these factors as well as your preference after hearing about the advantages and disadvantages of each form of therapy.

Treatment

The initial step in treatment is to remove the testicle. This is done through a small incision in the lower abdomen and is referred to as a radical orchiectomy.

Depending on the stage of your cancer, there are a number of treatment options available. For patients with Stage I cancer one of the options is surveillance which involves regular blood tests and CT scans. For higher stage cancer the treatment options may include **chemotherapy** (drugs that destroy cancer cells), **radiation** (high energy x-rays that kill cancer cells), or more **surgery**. There are side effects from these more aggressive treatments that are important to discuss with your physicians. The ultimate aim of treatment is to minimize the risks of testicular cancer recurrence and the side effects of treatment. The majority of men are cured and go back to living full and productive lives.

Many times, in men interested in having children in the future, your physician may recommend to have sperm “banked” for use at a later date. It is important to consider this early in the course of your treatment plan as various treatments can impact the number and quality of your sperm.

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Follow up

Regardless of the form of treatment you decide on, maintaining follow-up based on a schedule set out by your physician is important. Testicular cancer can recur after treatment and finding the cancer sooner, at a stage that is more easily treatable is the goal of these frequent follow-up visits. After you have been placed on a follow up schedule, you will see physicians on a regular basis with blood work, CT scans, and physical exams. It cannot be stressed enough how important it is to follow the planned visits closely, and if you need to miss an appointment or a CT scan, you will need to reschedule as soon as possible.

Conclusion

Testicular cancer is the most common form of cancer in young males. It is also one of the most highly curable cancers. There are many treatment options available that will depend on the characteristics of the tumor, staging investigations, and discussions with your physicians.

Notes:



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