

Testicular Cancer

Cancer of the testes is uncommon. It mainly affects younger men and is most common in men aged between 25 and 44. However, it also sometimes affects men aged over 45 and young men and boys aged under 25. Most men diagnosed with testicular cancer will be cured.

The testes

Testicles form part of the male reproductive system. The testicles are two small oval shaped organs suspended below the penis in a pouch of skin called the scrotum. From the age of puberty, the testicles produce sperm which can fertilise ova (eggs) usually following sexual intercourse. Testicles also produce the male hormone called testosterone which is responsible for the male characteristics such as facial hair growth, a deep voice, muscle development and the ability to have an erection.

What is testicular cancer?

Cancer that develops in a testicle is called testicular cancer. Usually only one testicle is affected but in some cases, both testicles are affected.

Most testicular cancers start in the cells that make sperm, called germ cells.

There are two main types of testicular cancer:

- Seminomas — most common in men between 25 - 50 years of age.
- Non-seminoma - more common in younger men, usually in their 20s. Non-seminoma is made up of other types of testicular cancer that are generally all grouped together, including:
 - choriocarcinoma
 - embryonal carcinoma
 - teratoma
 - yolk sac tumour.

Sometimes a testicular cancer can be a mix of seminoma and non-seminoma or a combination of the different types of non-seminoma.

Causes

It is not known what causes testicular cancer. Certain factors put men at risk: having an undescended testicle at birth; having a father or brother who has had testicular cancer and previous cancer in one testis.

There are no associations (risk factors) with injuries or vasectomy. Sometimes trauma or sporting injuries may produce a lump in the testis and thereby draw attention to the presence of an underlying tumour. There is no evidence that testicular cancer is associated with marital status, sexual activity, hot baths or wearing tight clothes.

How a person can detect testicular cancer

A sensible approach for men and boys is to become familiar with the usual level of lumpiness of their testicles and to see their doctor if they notice a change. Men with a family history of testicular cancer (father or brother) or a personal history of absent or undescended testicles in particular should regularly check for lumps or swellings on the surface of the testicles. A good time to examine your testicles is after a warm bath or shower.

Symptoms

- swelling or lump in the testicle (usually painless)
- feeling of heaviness in the scrotum
- change in the size or shape of the testicle
- a feeling of unevenness
- pain or ache in the lower abdomen, testicle or scrotum
- enlargement or tenderness of the breast tissue
- back pain
- stomach aches.

Men who find such a change in their testicle should not assume they have cancer. Many conditions other than cancer cause changes in the testicle. Men should see their doctor if they are concerned about any of these symptoms.

Diagnosis

The doctor will initially examine the patient by feeling the testes and surrounding structures, then other investigations will be organised.

An ultrasound examination of the scrotum and its contents may be performed. This helps to distinguish between cancer and lumps due to other causes.

Blood tests will also be part of the investigations required when cancer is suspected. These tests measuring the levels of chemicals secreted by the testicular cancer can act as markers of the progress of the disease.

If cancer is probable then the doctor will arrange surgical removal of the testis (orchidectomy) and examination of the tissue under the microscope. This is the only way to confirm and determine the type of testicular cancer.

If cancer is diagnosed, a chest x-ray and/or a CT scan of the chest, abdomen and pelvis, will be carried out to determine the extent of cancer in the body.

Treatment

Removal of the affected testicle is the usual treatment, and in some cases this may be followed with chemotherapy or radiotherapy. Early diagnosis and treatment can cure most cases of testicular cancer. Advanced testicular cancer can also be cured with treatment.

Testicular cancer and the removal of one testicle usually does not alter sexual function. Because such large numbers of sperm are produced, the effect on fertility of removal of one of the testicles is minimal. For those men who require further treatment, fertility is likely to be affected, at least temporarily. These men should talk with their oncologist about sperm banking before they commence chemotherapy or radiation.

For more information call the Cancer Council Helpline on 13 11 20.

This information sheet contains general information, for specific information regarding your cancer diagnosis or treatment, it is always best to talk to your doctor or health care team.

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