

Testicular Cancer

- Most common solid malignancy affecting males ages 15-35, but can affect males of any age.
- Affects about 1 in every 250 males in the US.
- Average age of diagnosis is about 33 years old.
- Risk is about 4-5 times higher for white men compared to Black or Asian men. Rates higher in the US and Europe.
- One of the most curable solid cancers with treatment, up to 95% of patients.
- Key is early detection, perform monthly self-exams as pictured above and annual physical exams with your physician.
- Most common symptom is a nodule and/or swelling of one testicle, with or without pain.
- Risk factors include history of an undescended testicle, family history of testicular cancer, and HIV infection.
- General ways to reduce cancer risk are not smoking, eating well, regular exercise and maintaining a healthy weight.
- Ultrasound of the testicles is first line testing, with high accuracy. Other testing can include blood tests for tumor markers, Cat scan, MRI, PET or bone scans.
- Surgery is first line treatment for testicular cancer. Losing one testicle does not affect a man's ability to get an erection and have sex. Most often, having one testicle does not affect testosterone levels either. Other treatments can include radiation therapy, chemotherapy .

HOW TO PERFORM A MONTHLY SELF EXAM.

Always perform monthly self-exams and ask your doctor for a testicular exam at your annual appointment, or sports physical.



One.

Cup one testicle at a time using both hands. This is best performed during or after a warm shower.



Two.

Examine by rolling the testicle between thumb and fingers. Use slight pressure.



Three.

Familiarize yourself with the spermatic cord and epididymis. The tube like structures connected on the back side of each testicle.



Four.

Feel for lumps, changes in size, or irregularities. It is normal for one testis to be slightly larger than the other.

Additional Resources available at American Cancer Society at

www.cancer.org