Testicular Cancer

Cancer of the testicle, the male reproductive organ responsible for making sperm, is common, especially among younger men. In developed nations, the chance of a man developing testicular cancer during his life is 1 in 300. The risk of dying from testicular cancer is very low because it can be treated and even cured when found early. Regular self-examination of the testicles is the best way for a man to detect testicular cancer as early as possible. Treatment and prognosis (chances of cure) depend on the type of cancer found in the testicle. The February 13, 2008, issue of JAMA includes an article about treating advanced testicular cancer.

RISK FACTORS
- White race
- Cryptorchidism (undescended testicle)
- Family history of testicular cancer
- Cancer in the other testicle

SIGNS AND SYMPTOMS
Testicular cancer is usually painless until it is advanced. Most often, a hard lump on the testicle is found either by self-examination or by physical examination in a doctor’s office. Some men complain of a heavy feeling in their groin. When testicular cancer has spread to other parts of the body (metastasis or metastatic disease), symptoms develop related to those locations, such as back pain, shortness of breath, or coughing.

DIAGNOSIS
- A complete physical examination and medical history look for possible spread of testicular cancer, as well as other medical problems that may affect the treatment plan.
- Complete blood count and blood chemistries including tests for serum alpha-fetoprotein, beta-human chorionic gonadotropin, and lactate dehydrogenase
- Chest x-ray (looking for metastatic disease)
- Ultrasound of the testicle
- Magnetic resonance imaging
- Computed tomography (CT) scan of the abdomen and pelvis

TREATMENTS
Testicular cancer is treatable and is now curable in many cases. Orchiectomy (surgery to remove the cancerous testicle) is the main treatment. More advanced surgical procedures, such as lymph node dissection, may be required if the cancer has spread to the lymph nodes. Radiation therapy, where specialized forms of radiation are directed to the testicular, groin, and pelvic areas, may be prescribed if there has been spread of the cancer. Chemotherapy (drug treatments for cancer) may also be used in combination with surgery in patients with advanced or metastatic testicular cancer.

FOR MORE INFORMATION
- American Cancer Society  
  www.cancer.org
- National Cancer Institute  
  www.cancer.gov
- Lance Armstrong Foundation  
  www.livestrong.org

INFORM YOURSELF
To find this and previous JAMA Patient Pages, go to the Patient Page link on JAMA’s Web site at www.jama.com. Many are available in English and Spanish.

Sources: American Cancer Society, National Cancer Institute

Janet M. Torpy, MD, Writer
Cassio Lynm, MA, Illustrator
Richard M. Glass, MD, Editor

The JAMA Patient Page is a public service of JAMA. The information and recommendations appearing on this page are appropriate in most instances, but they are not a substitute for medical diagnosis. For specific information concerning your personal medical condition, JAMA suggests that you consult your physician. This page may be photocopied noncommercially by physicians and other health care professionals to share with patients. To purchase bulk reprints, call 203/259-8724.