



ROSWELL PARK COMPREHENSIVE CANCER CENTER

# TESTICULAR CANCER *Info Sheet*



The lifetime risk for

developing testicular cancer is **1 in 250**

The **5-year** relative survival rate for all men with testicular cancer is

**95%**

**TESTICULAR CANCER**  
CAN **ALMOST ALWAYS** BE CURED.

**1 MALE**  
IS DIAGNOSED



**EVERY HOUR**

## WHAT YOU SHOULD KNOW

The testicles (testes) are the two egg-shaped male sex glands, located in the scrotum, which produce sperm and the hormone testosterone.

Testicular cancer occurs when cells in one or both of the testicles grow erratically, becoming malignant.

Testicular cancer is most frequently diagnosed in young adults, ages 20 to 35. The median age at diagnosis is 33.

## CHECK YOURSELF

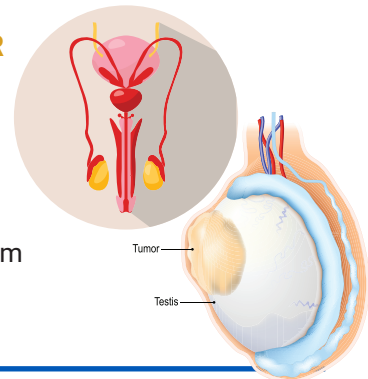
Most cases of testicular cancer are found by men themselves and 70% of these cancers are discovered at an early stage, before cancer has spread beyond the testicle. A self-exam is easy and takes only minutes. Follow these guidelines:

- ✓ Examine yourself while standing, during or after a shower, when your skin is warm and relaxed.
- ✓ Gently feel your scrotal sac to locate a testicle.
- ✓ Hold the testicle with one hand while firmly, but gently rolling your other hand's fingers over the testicle to examine the entire surface.
- ✓ Repeat procedure to check your other testicle.

Check your testicles regularly and report any lump, swelling or changes to your doctor right away.

## SYMPTOMS TO TELL YOUR DOCTOR

- ✓ A painless lump or swelling in a testicle
- ✓ A change in how a testicle feels
- ✓ A dull ache in your lower abdomen or groin
- ✓ Pain or discomfort in a testicle or the scrotum



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## HOW TO GET A DIAGNOSIS

After a physical exam and review of your health history, if testicular cancer is suspected, your doctor may suggest:

- **Ultrasound exam**, which uses sound waves to form a picture of body tissues.
- **Blood test** to measure the amounts of certain substances that may indicate the presence of a tumor, such as **alpha-fetoprotein (AFP)**, **beta-human chorionic gonadotropin (β-hCG)** and **lactate dehydrogenase (LHD)**.
- **Surgery** to remove the testicle through an incision in the groin.

## TREATMENT OPTIONS FOR TESTICULAR CANCER INCLUDE:

- Surgery
- Radiation
- Chemotherapy
- High-dose chemotherapy with stem cell transplant
- Clinical trials

## WHY ROSWELL PARK FOR TESTICULAR CANCER?

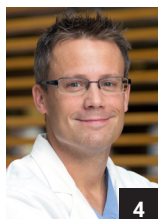
- **Urology team that focuses on cancer** and has high-volume surgical experience for testicular procedures and lymph node removal.
- **Onco-Fertility Program** to provide guidance and options for fertility preservation and continued sexual health.
- **Transplant & Cellular Therapy Center** that is designated a Blue Distinction Center for Transplants by BlueCross BlueShield for Roswell Park's high quality care. Some patients with testicular cancer may need stem cell transplant.

## WHAT'S A CLINICAL TRIAL?

Any new medical treatment undergoes years, even decades of study in both laboratory and clinical settings. Participating in a clinical study can be an important treatment option for many cancer patients who may be among the first to benefit from a new drug or therapy. Today's standard treatments were researched and proven by clinical trials done in the past.

About 50% of Roswell Park patients are eligible for a clinical study.

**Your participation is entirely your choice.**



## YOUNG ADULT CANCER PROGRAM



Our Young Adult Cancer Program focuses on the unique needs of young patients their 20s and 30s during treatment and beyond. We address issues such as fertility, health and life insurance, career matters and provide networking and social events.

**TESTICULAR CANCER IS THE MOST COMMON CANCER IN MALES 15-34 YEARS OLD.**

## MEET THE DOCTORS

### Urology

1. Khurshid Guru, MD
2. Eric Kauffman, MD
3. Qiang John Li, MD, PhD
4. Thomas Schwaab, MD, PhD

### Medicine

5. Gurkamal Chatta, MD
6. Ellis G. Levine, MD, FACP
7. Philip L. McCarthy, MD

### Radiation

8. Michael R. Kuettel, MD, PhD, MBA

### Nuclear Medicine

9. Dominick Lamonica, MD