

POSITION STATEMENT

Testicular cancer



Overview

The testicles are two egg-shaped glands found in men. They produce semen and sex hormones.

Testicular cancer is one of the more rare forms of cancer with an estimated incidence of approximately 6.8 in every 100,000 men.¹ Young men are more commonly affected by testicular cancer, with about half of the new diagnoses being made in men under the age of 33 years.² There are two different types of testicular cancer, non-seminoma, a cancer of the mature germ cells affecting mostly the 15-35 male year old age group and seminoma, cancer formed from immature germ cells, which generally affects the 25-55 male age group.

The outlook for men diagnosed with testicular cancer has improved dramatically since the 1970s when chemotherapy was introduced to treat the disease. Five-year relative survival is at least 92.8% for all age groups under 60 years.³

Testicular cancer represents 0.1% of all cancer deaths. Nationally in 2004 2005 there were 675 677 cases and 14 22 deaths related to testicular cancer.⁴

All testicular cancers can be treated if discovered early and the right treatment given. Treatment does not normally affect sexuality, masculinity or erectile function. Cancer of the testis is the most curable of all internal cancers.

The symptoms of testicular cancer

It commonly presents as a small hard lump, a swelling, a change in the consistency of the testicle or there may be a dull ache in the testicle or lower abdomen. In the majority of cases only one testicle is affected. Men, regardless of age, who find such an abnormality should not assume they have cancer. Many conditions other than cancer cause changes in the testicles.

How a person can detect testicular cancer

A sensible approach for men 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.

Treatment for testicular cancer

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 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.

Public health information

Based on the relatively few number of men dying from testicular cancer, a public education campaign about the disease is unlikely to reduce the mortality rate further.

The low death rate suggests that men are currently seeking medical attention when they notice an abnormality in their testicles and are being treated effectively resulting in a high survival rate for this disease.

A public campaign to encourage men to become more aware of abnormalities in their testicles is likely to lead to increased unnecessary medical examinations and investigations. Further to this, telling men to check their testicles regularly would be encouraging them to do an examination that has no evidence of benefit, and could have the potential to create an unnecessary level of anxiety and fear.

The present level of community awareness of testicular cancer appears to be at the right level and in proportion to current incidence and mortality rates.

References

1. Australian Institute of Health and Welfare (AIHW),2008. Australian Cancer Incidence & Mortality Books.
2. Australian Institute of Health and Welfare (AIHW) & Australasian Association of Cancer Registries (AACR) 2003. Cancer in Australia 2000. AIHW cat.no. CAN 18. AIHW (Cancer Series no. 23).
3. Australian Institute of Health and Welfare (AIHW) and Australasian Association of Cancer Registries (AACR) 2001. Cancer survival in Australia, 2001. Part 1: National summary statistics. AIHW cat. no. CAN 13. Canberra: Australian Institute of Health and Welfare (Cancer Series No. 18).
4. Australian Institute of Health and Welfare (AIHW),2008. Australian Cancer Incidence & Mortality Books.

Cancer Council Australia, GPO Box 4708, Sydney NSW 2001
Ph: (02) 8063 4100 Fax: (02) 8063 4101 Website: www.cancer.org.au