If You Have Testicular Cancer

Jump to a topic

- What is testicular cancer?
- Different kinds of testicular cancer
- How does the doctor know I have testicular cancer?
- How serious is my cancer?
- What kind of treatment will I need?
- What will happen after treatment?

What is testicular cancer?

Cancer can start any place in the body. Testicular cancer starts in the testicles, which make hormones and sperm in men. It starts when cells in the testicles grow out of control and crowd out normal cells. This makes it hard for the body to work the way it should.

Cancer cells can spread to other parts of the body. Cancer cells in the testicles can sometimes travel to the lungs and grow there. When cancer cells do this, it’s called metastasis. To doctors, the cancer cells in the new place look just like the ones from the testicles.

Cancer is always named for the place where it starts. So when testicular cancer spreads to the lung (or any other place), it’s still called testicular cancer. It’s not called lung cancer unless it starts from cells in the lung.
The testicles

Ask your doctor to use this picture to show you where the cancer is.

Different kinds of testicular cancer

Testicles are made of many kinds of cells. Each kind can grow into cancer. Treatment depends on the type of testicular cancer, so you need to know which kind you have. Your doctor can tell you more about this.

Most testicular cancers start in the cells that make sperm. The 2 most common types of testicular cancer are:
• Seminomas. These tumors tend to grow and spread slower than most other testicular cancers.
• Non-seminomas. These tumors are often found in younger men in their late teens and early 30s.

Questions to ask the doctor

• Why do you think I have cancer?
• Is there a chance I don’t have cancer?
• Would you please write down the kind of cancer you think I might have?
• What will happen next?

How does the doctor know I have testicular cancer?

Testicular cancer is most often found because of the symptoms it causes. Symptoms can be:

• A lump or swelling in the testicle is the most common symptom
• Heaviness or aching in the lower belly or testicles
• Voice changes and facial and body hair growth in a very young boy (early puberty)

If you have signs of testicular cancer the doctor will ask you about your health and examine you. If signs are pointing to testicular cancer, more tests will be done. Here are some of the tests you may need:

Ultrasound: Sound waves are used to make pictures of the inside of your body. This is often the first test done. It helps show if a lump in the testicles is solid or fluid filled. If it’s solid, it’s more likely to be cancer.

Blood tests: Testicular cancer cells often make certain proteins that show up in the blood. Checking for them helps your doctor know which kind of testicular cancer you might have.

Chest x-ray: X-rays may be done to see if the cancer has spread to your lungs.

CT or CAT scan: Uses x-rays to make detailed pictures of your insides. This can show if the cancer has spread.
MRI scan: Uses radio waves and strong magnets instead of x-rays to make detailed pictures. This test may be used to see if the cancer has spread.

PET scan: Uses a special kind of sugar that can be seen inside your body with a special camera. If there’s cancer, this sugar shows up as “hot spots” where the cancer is found. This test can help show if the cancer has spread.

Biopsy

In a biopsy, the doctor takes out a small piece of tissue to check it for cancer cells. A biopsy is the only way to tell for sure if you have cancer. For many other kinds of cancer, a biopsy is done before surgery. But for testicular cancer, this could spread the cancer, so the biopsy is done during surgery to take out the cancer.

Grading testicular cancer

The cancer cells in the biopsy sample will be graded. This helps doctors predict how fast the cancer is likely to grow and spread. Cancer cells are graded based on how much they look like normal cells. Grades 1, 2, and 3 are used. Cells that look very different from normal cells are given a higher grade (3) and tend to grow faster. Ask the doctor to explain your cancer's grade. The grade helps the doctor decide which treatment is best for you.

Questions to ask the doctor

- What tests will I need to have?
- Who will do these tests?
- Where will they be done?
- Who can explain them to me?
- How and when will I get the results?
- Who will explain the results to me?
- What do I need to do next?

How serious is my cancer?

If you have testicular cancer, the doctor will want to find out how far it has spread. This is called staging. You may have heard other people say that their cancer was “stage 1” or “stage 2.” Your doctor will want to find out the stage of your cancer to help decide what type of treatment is best for you.
The stage describes the growth or spread of the cancer through the testicle. It also tells if the cancer has spread to other organs of your body that are close by or farther away.

Your cancer can be stage 0, 1, 2, 3, or 4. The lower the number, the less the cancer has spread. A higher number, like stage 4, means a more serious cancer that has spread beyond the testicles. Be sure to ask the doctor about the cancer stage and what it means for you.

Questions to ask the doctor

- Do you know the stage of the cancer?
- If not, how and when will you find out the stage of the cancer?
- Would you explain to me what the stage means in my case?
- Based on the stage of the cancer, how long do you think I’ll live?
- What will happen next?

What kind of treatment will I need?

There are many ways to treat testicular cancer. Surgery, radiation, chemotherapy, and high dose chemotherapy with stem cell transplant are the main types of treatment.

The treatment plan that’s best for you will depend on:

- The stage and grade of the cancer
- The chance that a type of treatment will cure the cancer or help in some way
- Your age
- Other health problems you have
- Your feelings about the treatment and the side effects that come with it

Surgery for testicular cancer

Surgery to take out the testicle is often the first treatment for testicular cancer. It’s used even when the cancer has spread. Nearby lymph nodes may also be taken out to see if there are cancer cells in them. There are many ways to do this surgery. Talk to your doctor about what will be done and what you can expect

Side effects of surgery
Any type of surgery can have risks and side effects. Be sure to ask the doctor what you can expect. If you have problems, let your doctors know. Doctors who treat testicular cancer should be able to help you with any problems that come up.

**Chemo**

Chemo is the short word for chemotherapy – the use of drugs to fight cancer. The drugs are given into a vein. These drugs go into your blood and spread through your body. They kill cells that are fast growing, cancer cells and good cells, like blood cells and hair. Chemo is given in cycles or rounds. Each round of treatment is followed by a break. Chemo cycles last about 3 to 4 weeks. Using 2 or more chemo drugs together often works better than using one drug alone. Treatment lasts for many months.

**Side effects of chemo**

Chemo can make you feel very tired, sick to your stomach, and cause your hair to fall out. But these problems go away after treatment ends.

There are ways to treat most chemo side effects. If you have side effects, be sure to talk to your cancer care team so they can help.

**Radiation treatments**

Radiation uses high-energy rays (like x-rays) to kill cancer cells. In testicular cancer, radiation is mainly used to kill cancer cells that have spread to lymph nodes. It can also be used to treat cancer that has spread to the brain or spinal cord.

For testicular cancer, a machine aims a beam of radiation at the testicle. This is called external beam radiation. A cover is put over the healthy testicle to help keep the radiation from harming it.

**Side effects of radiation treatments**

If your doctor suggests radiation treatment, talk about what side effects might happen. The most common side effects of radiation are:

- Skin changes where the radiation is given
- Feeling very tired (fatigue)

Most side effects get better after treatment ends. Some might last longer. Talk to your cancer care team about what you can expect.
High dose chemo and stem cell transplant

A stem cell transplant lets doctors use higher doses of chemo. In this treatment, a special machine takes the cells that make blood (called stem cells) out of the blood. Then very strong chemo is given. The stem cells are given back to the person after chemo. This is called a transplant, but it’s not surgery – the cells are put back into the blood through a vein.

Transplant is mostly used for testicular cancer that has come back (recurred) after regular chemo. It’s a very complex treatment with a lot of side effects. Ask your doctor if you will get this treatment and what to expect.

Clinical trials

Clinical trials are research studies that test new drugs or other treatments in people. They compare standard treatments with others that may be better.

If you’d like to learn more about clinical trials for you, start by asking your doctor if your clinic or hospital conducts clinical trials. See Clinical Trials\(^1\) to learn more.

Clinical trials are one way to get the newest cancer treatment. They’re the best way for doctors to find better ways to treat cancer. If your doctor can find one that’s studying the kind of cancer you have, it’s up to you whether to take part. And if you do sign up for a clinical trial, you can always stop at any time.

What about other treatments I hear about?

When you have cancer you might hear about other ways to treat the cancer or treat your symptoms. These may not always be standard medical treatments. These treatments may be vitamins, herbs, special diets, and other things. You may wonder about these treatments.

Some of these are known to help, but many have not been tested. Some have been shown not to help. A few have even been found to be harmful. Talk to your doctor about anything you’re thinking about using, whether it’s a vitamin, a diet, or anything else.

Questions to ask the doctor

- What treatment do you think is best for me?
- Has the cancer spread beyond my testicle?
- What is my cancer’s stage? What does this mean?
• Will I need to see other doctors?
• Will I need other tests before we can decide on treatment?
• What’s the goal of this treatment? Do you think it could cure the cancer?
• Will treatment include surgery? If so, who will do the surgery?
• What will the surgery be like?
• Will surgery be done to take out lymph nodes?
• Will I need other types of treatment, too?
• What’s the goal of these treatments?
• What side effects could I have from these treatments?
• What can I do about side effects that I might have?
• Is there a clinical trial that might be right for me?
• What about special vitamins or diets that friends tell me about? How will I know if they are safe?
• How soon do I need to start treatment?
• Will I be able to have kids after treatment?
• What should I do to be ready for treatment?
• Is there anything I can do to help the treatment work better?
• What’s the next step?

What will happen after treatment?

You’ll be glad when treatment is over. But it’s hard not to worry about cancer coming back. Even when cancer never comes back, people still worry about it. You’ll see your cancer doctor for many years after treatment ends. Be sure to go to all of these follow-up visits. You will have exams, blood tests, and maybe other tests to see if the cancer has come back.

At first, your visits may be every 2 to 6 months. Then, the longer you’re cancer-free, the less often the visits are needed. After 5 years, they may be done once or twice a year.

Having cancer and dealing with treatment can be hard, but it can also be a time to look at your life in new ways. You might be thinking about how to improve your health. Call us at 1-800-227-2345 or talk to your cancer care team to find out what you can do to feel better.

You can’t change the fact that you have cancer. What you can change is how you live the rest of your life – making healthy choices and feeling as good as you can.
For connecting and sharing during a cancer journey

Anyone with cancer, their caregivers, families, and friends, can benefit from help and support. The American Cancer Society offers the Cancer Survivors Network (CSN)\(^2\), a safe place to connect with others who share similar interests and experiences. We also partner with CaringBridge\(^3\), a free online tool that helps people dealing with illnesses like cancer stay in touch with their friends, family members, and support network by creating their own personal page where they share their journey and health updates.

Hyperlinks

2. csn.cancer.org/
3. www.caringbridge.org/
4. www.cancer.org

Words to know

**Biopsy** (BY-op-see): Taking out a small piece of tissue to see if there are cancer cells in it.

**Lymph nodes** (limf nodes): Small, bean-shaped sacs of immune system tissue found all over the body and connected by lymph vessels; also called lymph glands

**Metastasis** (muh-TAS-tuh-sis): Cancer cells that have spread from where they started to other places in the body.

**Sperm**: The male cell needed to join with a woman’s egg to make a baby.

**Seminoma** (SEH-mih-NOH-muh): A type of cancer that starts in the cells that make sperm.

**Scrotum**: The pouch of skin that holds the testicles.

**Testicles** (TESS-tick-ulls): The male reproductive glands inside the scrotum. The testicles make sperm and male hormones like testosterone.

How can I learn more?
We have a lot more information for you. You can find it online at www.cancer.org (www.cancer.org)\(^4\). Or, you can call our toll-free number at 1-800-227-2345 to talk to one of our cancer information specialists.

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