What is penile cancer?

Cancer can start any place in the body. Penile cancer starts in or on the penis. It starts when cells in the penis 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. But it is still always named for the place where it starts. Cancer cells from the penis can sometimes travel to the lungs and grow there. So when penile cancer spreads to the lungs (or any other place), it’s still called penile cancer. It’s not called lung cancer unless it starts from cells in the lung. 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 penis.
The penis Ask your doctor to use this picture to show you where the cancer is.

The penis

The penis is the male sex organ. It carries semen and urine out of a man’s body. It’s made of many kinds of body tissues, such as skin, nerves, muscle, and blood vessels.

The scrotum is the sac of skin under the penis that holds the testicles. The testicles make male hormones and sperm.

Different kinds of penile cancer

There are a few kinds of penile cancer. Your doctor can tell you more about the kind
The most common kind is called squamous cell carcinoma. It starts in the skin cells of the penis. It most often starts on the foreskin or the glans (the tip of the penis).

**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 penile cancer?**

Some signs of penile cancer are a change in the skin on the penis, a growth or lump, a sore that doesn’t heal, and/or swelling.

If you have any symptoms, you should go to a doctor to get it checked. Men are often shy about seeing a doctor about a problem like this. Seeing a doctor right away is key. The doctor will ask you questions about your health and do a physical exam.

**Tests that may be done**

If signs are pointing to penile cancer, here are some of the tests you may need:

**Biopsy:** In a biopsy, the doctor takes 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. There are different ways to do a biopsy. Each has pros and cons.

**CT or CAT scan:** This test uses x-rays to make detailed pictures of the inside of your body. It can be used to see if the cancer has spread.

**MRI:** This test uses radio waves and strong magnets instead of x-rays to make detailed pictures. It can be used to get better pictures of a penile tumor. Medicine may be used to make the penis hard (erect) for this test. MRI can also be used to look for cancer in other parts of the body.

**Ultrasound:** This test uses sound waves to make pictures of the inside of the body. It can help show how deep a tumor has grown into the penis. It can also help show if the
cancer has spread to nearby lymph nodes. These are small sacs of immune system tissue to which cancer often spreads first.

**Grading penile cancer**

If cancer cells are found in the biopsy sample, they 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. Cancers with a higher grade (3) tend to grow faster. Ask the doctor to explain the grade of your cancer.

**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 penile cancer, the doctor will want to find out how far it has spread. This is called staging. 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 is based on how much the cancer has grown in the penis or into nearby structures. It also tells if the cancer has spread to other parts of your body. The grade of the cancer (see above) is also part of the stage.

Your cancer can be stage 0, 1, 2, 3, or 4. Stage 0, the earliest stage, is also called carcinoma in situ or CIS. The lower the number, the less the cancer has spread. A higher number, like stage 4, means the cancer has spread farther. 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?

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

● The type and stage of the cancer
● The chance that a type if 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 or long-term changes that come with it

Surgery

Surgery is the main treatment for most men with penile cancer. There are many kinds of surgery. The type used depends on where the cancer is and how big it is. Some types of surgery cut away the tumor from the skin of the penis. Other types remove part or all of the penis. Sometimes nearby lymph nodes are also removed to see if the cancer has spread to them.

Ask your doctor what type of surgery you will need. Each type has pros and cons. Find out if there will be changes in how you look, how you urinate, and/or your sex life.

Side effects of surgery

Any type of surgery can have risks and side effects. Ask the doctor what you can expect. If you have problems, let your doctors know. Doctors who treat men with penile cancer should be able to help you with any problems that happen.

Radiation treatments

Radiation uses high-energy rays (like x-rays) to kill cancer cells. If the tumor is small, this treatment may be used instead of surgery. It may also be used with surgery to treat
nearby lymph nodes, or to help treat symptoms from more advanced cancers.

Radiation can be aimed at the penis and/or lymph nodes from a machine outside the body. This is called **external beam radiation**.

It can also be given by putting a radioactive source into or right next to the tumor. This is called **brachytherapy**.

**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
- Burning when you urinate
- Swelling of the penis
- Scarring or damage that can cause problems urinating and getting erections

Most side effects get better after treatment ends. Some might last longer. Talk to your cancer care team about what you can expect during and after treatment.

**Local treatments**

Local treatments treat only the cancer spot on the penis, so the rest of the penis and nearby tissues are not affected. One of these treatments may be used for small cancers that haven’t spread beyond the skin:

- **Lasers** can be used to burn away the cancer cells.
- **Cryosurgery** uses a very cold liquid to freeze and kill the cancer cells.
- **Chemo** drugs (see below) may be put right onto the skin to kill the cancer cells.

**Chemo**

Chemo is the short word for chemotherapy. It’s the use of drugs to fight cancer.

Chemo may be put on the tumor as a cream to kill cancer cells. This may be called **topical chemo**. It’s often used for a few weeks.

Chemo may also be used to treat a big tumor or penile cancer that has spread. In this
case, the drugs are given through a needle into a vein (IV). They go into the blood and spread through the body. IV chemo is given in cycles or rounds. Each round of treatment is followed by a break. Most of the time, 2 or more chemo drugs are given. Treatment often lasts for many months.

**Side effects of chemo**

Chemo that's put on the penis makes the skin red, sore, and tender. Over time the skin heals.

IV 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, talk to your cancer care team so they can help.

**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 that might be right for you, start by asking your doctor if your clinic or hospital takes part in clinical trials. See [Clinical Trials](#) 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. They may be vitamins, herbs, diets, and other things. You may wonder about them.

Some of them 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?
• 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 it change the way my penis looks and how it works?
• Will I need other types of treatment, too?
• What will these treatments be like?
• 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?
• Will I be able to have children after treatment?
• Will I be able to enjoy sex after treatment?
• Is there a clinical trial that might be right for me?
• What about vitamins or diets that friends tell me about? How will I know if they’re safe?
• How soon do I need to start 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. For years after treatment ends, you will see your cancer doctor. At first, your visits may be every few months. Then, the longer you’re cancer-free, the less often the visits are needed.

Be sure to go to all of these follow-up visits. Your doctors will ask about symptoms, do physical exams, and may order tests to see if the cancer has come back.

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 doctor 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/](http://csn.cancer.org/)
3. [www.caringbridge.org/](http://www.caringbridge.org/)
4. [www.cancer.org](http://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.

**Brachytherapy** (BRAKE-ee-THAIR-uh-pee): Radiation treatment that’s given by putting a radioactive source right into or close to the tumor.

**Carcinoma** (CAR-sin-O-ma): A cancer that starts in the lining layer of organs. Most cancers are carcinomas.

**Chemotherapy** (KEY-mo-THAIR-uh-pee): Treatment with drugs that kill cancer cells. Often called chemo.

**Lymph nodes** (limf nodes): Also called lymph glands. Small, bean-shaped sacs of immune system tissue found all over the body along lymph vessels. They remove cell waste, germs, and other harmful substances from lymph fluid. They help fight infections and also have a role in fighting cancer. Cancers can spread through them.

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

**Radiation** (RAY-dee-A-shun) **therapy**: The use high-energy rays (like x-rays) to kill cancer cells.
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.

Last Revised: February 9, 2016

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