After Testicular Cancer Treatment

Living as a Cancer Survivor

For many people, cancer treatment often raises questions about next steps as a survivor.

- Living As A Testicular Cancer Survivor
- Fertility and Hormone Concerns in Boys and Men With Testicular Cancer

Cancer Concerns After Treatment

Treatment may remove or destroy the cancer, but it's very common to have questions about cancer coming back or treatment no longer working.

- Second Cancers After Testicular Cancer

Living As A Testicular Cancer Survivor

For most men with testicular cancer, treatment can remove or destroy the cancer. The end of treatment can be both stressful and exciting. You may be relieved to finish treatment, but yet it’s hard not to worry about cancer coming back. These feelings are very common if you’ve had cancer. Life after cancer means returning to some familiar things and also making some new choices.
Follow-up care

After you’ve completed treatment, your doctors will still want to watch you closely. It’s very important to go to all of your follow-up appointments. During these visits, your doctors will examine you and ask questions about any problems you’re having. Lab tests and/or imaging tests¹ (such as chest x-rays and CT scans) will be done to look for signs of cancer or treatment side effects. Radiation treatment and some of the chemo drugs commonly used for testicular cancer have side effects. Some may last for a few weeks to months, but others can last the rest of your life. Talk to your doctor about long-term side effects you should watch for. This is also the time for you to talk to your cancer care team about any changes or problems you notice and any questions or concerns you have.

Follow-up care is extremely important after treatment of testicular cancer because even if it comes back, it’s still often curable. This is why finding it early is so important.

Your health care team will explain what tests you need and how often they should be done. If you had a non-seminoma, follow-up testing will include blood tests of tumor markers², such as alpha-fetoprotein (AFP), human chorionic gonadotropin (HCG), and lactate dehydrogenase (LDH). Tumor markers aren’t as helpful for patients with seminoma, so they aren’t always checked. Imaging tests (such as CT scans and chest X-rays) are also done to help find relapse as early as possible. As time goes on, these visits and tests will be done less often. Depending on the type of treatment you’ve had, you may also need follow-up for the possible complications of treatment.

Make a special effort to keep all appointments with your cancer care team and follow their instructions carefully. Report any new or recurring symptoms to your doctor right away. Most of the time, if the cancer comes back, it does so in the first 2 years. Still, there’s always an outside chance the cancer can come back later. There’s also a small chance that you’ll develop a new cancer in the other testicle, so report any changes in your remaining testicle to your doctor.

Ask your doctor for a survivorship care plan

Talk with your doctor about developing a survivorship care plan³ for you. This plan might include:

- A suggested schedule for follow-up exams and tests
- A schedule for other tests you might need in the future, such as early detection (screening) tests for other types of cancer, or tests to look for long-term health effects from your cancer or its treatment
• A list of possible late- or long-term side effects from your treatment, including what to watch for and when you should contact your doctor
• Diet and physical activity suggestions
• Reminders to keep your appointments with your primary care provider (PCP), who will monitor your general health care

Keeping health insurance and copies of your medical records

Even after treatment, it’s very important to keep health insurance. Tests and doctor visits cost a lot, and even though no one wants to think of their cancer coming back, this could happen.

At some point after your cancer treatment, you might find yourself seeing a new doctor who doesn’t know about your medical history. It’s important to keep copies of your medical records to give your new doctor the details of your diagnosis and treatment. Learn more in Keeping Copies of Important Medical Records.

Can I lower my risk of the testicular cancer progressing or coming back?

If you have (or have had) testicular cancer, you probably want to know if there are things you can do that might lower your risk of the cancer growing or coming back, such as exercising, eating a certain type of diet, or taking nutritional supplements. Unfortunately, it’s not yet clear if there are things you can do that will help.

Adopting healthy behaviors such as not smoking, eating well, getting regular physical activity, and staying at a healthy weight might help, but no one knows for sure. However, we do know that these types of changes can have positive effects on your health that can extend beyond your risk of testicular cancer or other cancers.

About dietary supplements

So far, no dietary supplements (including vitamins, minerals, and herbal products) have been shown to clearly help lower the risk of testicular cancer progressing or coming back. This doesn’t mean that no supplements will help, but it’s important to know that none have been proven to do so.

Dietary supplements are not regulated like medicines in the United States – they do not have to be proven effective (or even safe) before being sold, although there are limits
on what they’re allowed to claim they can do. If you’re thinking about taking any type of nutritional supplement, talk to your health care team. They can help you decide which ones you can use safely while avoiding those that might be harmful.

**If the cancer comes back**

If the cancer does recur at some point, your treatment options will depend on where the cancer is located, what treatments you’ve had before, and your health. For more information on how recurrent cancer is treated, see *Treatment Options for Testicular Cancer, by Type and Stage*[^10].

For more general information on recurrence, you may also want to see *Understanding Recurrence*[^11].

**Could I get a second cancer after treatment?**

Men who’ve had testicular cancer can still get other cancers. In fact, testicular cancer survivors are at higher risk for getting some other types of cancer. Learn more in *Second Cancers After Testicular Cancer*.

**Getting emotional support**

Some amount of feeling depressed, anxious, or worried is normal when cancer is a part of your life. Some people are affected more than others. But everyone can benefit from help and support from other people, whether friends and family, religious groups, support groups, professional counselors, or others. Learn more in *Life After Cancer*[^12].

**Hyperlinks**

Second Cancers After Testicular Cancer

Cancer survivors can be affected by a number of health problems, but often their greatest concern is facing cancer again. If a cancer comes back after treatment it’s called a recurrence. But some cancer survivors may develop a new, unrelated cancer later. This is called a second cancer.

Unfortunately, being treated for cancer doesn’t mean you can’t get cancer again. People who have had cancer can still get the same types of cancers that other people get. In fact, certain types of cancer and cancer treatments are linked to a higher risk of certain second cancers.

Common second cancers after testicular cancer

Survivors of testicular cancer can get any second cancer, but they have an increased risk of:
A second testicular cancer (this is different than the first cancer coming back)

- Rectal cancer
- Pancreas cancer
- Bladder cancer
- Kidney cancer
- Thyroid cancer
- Acute myeloid leukemia (AML)

The most common cancer seen in testicular cancer survivors is a second testicular cancer.

Compared with most men in the general population, testicular cancer survivors are up to twice as likely to develop a new cancer outside the testicle. The chance of a second cancer changes over time and depends on which treatments were used and how old the patient was when he was treated.

**If you had radiation therapy**

Treatment with radiation is linked to some second cancers after testicular cancer. The risk is highest for cancers in organs in or near the area that was treated (the radiation field) -- the abdomen (belly) and pelvis, and include:

- Bladder cancer
- Colon cancer
- Rectal cancer
- Pancreas cancer
- Stomach cancer
- Kidney cancer
- Prostate cancer

If the radiation field includes the chest, there's an increased risk of:

- Lung cancer
- Esophagus cancer
- Mesothelioma (cancer of the outer lining of the lung)
- Thyroid cancer

Radiation treatments also increase the risk of melanoma skin cancer and connective
tissue cancer (sarcoma)\textsuperscript{19}.

The risks of these cancers starts going up within 5 years and doubles after 10 years in those men who were treated with radiation alone. This risk remains high and doesn’t seem to go down with time. This is why long-term follow-up is so important. The risks are generally greater with higher radiation doses or if the patient got both chemotherapy and radiation.

In recent years, radiation therapy for testicular cancer has changed. Lower doses of radiation are used, and preventive radiation treatment to the chest has been stopped. Long-term follow-up studies are needed to see if these changes have lowered second cancer risks.

If you had chemotherapy

Chemotherapy is also linked to an increased risk of second cancers, but it’s slightly less than what’s seen after radiation. Treatment with chemo has been linked to increased risk for these cancers:

- Kidney
- Thyroid
- Soft tissue

There’s also an increased risk of leukemia\textsuperscript{20} and myelodysplastic syndrome (MDS)\textsuperscript{21} after chemotherapy for testicular cancer. Use of the chemo drug cisplatin is linked most often to leukemia and MDS, though high doses of etoposide (VP-16, Etopophos\textsuperscript{®}, or Vepesid\textsuperscript{®}) are sometimes also a factor. (The doses were higher in the past than those normally used today.) Radiation given with chemotherapy seems to increase risk even more. Leukemia and MDS are both uncommon cancers normally, so even though the risk of these cancers is higher than average, very few patients develop them from their treatment.

Follow-up after treatment

After completing treatment for testicular cancer, you should still see your doctor regularly. You may have tests for a number of years to look for signs the cancer has come back or spread. Experts don’t recommend any other testing to look for second cancers in people without symptoms. But let your doctor know about any new symptoms or problems, because they could be caused by the cancer coming back or by a new disease or second cancer.
Survivors can do regular testicular self-exams to look for cancer in the remaining testicle.

All patients should follow the American Cancer Society guidelines for the early detection of cancer\textsuperscript{22}, such as those for colorectal cancer.

The Children’s Oncology Group has guidelines for the follow-up of patients treated for cancer as a child, teen, or young adult, including screening for second cancers. These can be found at www.survivorshipguidelines.org\textsuperscript{23}.

All survivors of testicular cancer should not use tobacco and avoid tobacco smoke.\textsuperscript{24} Smoking increases the risk of many cancers.

To help maintain good health, survivors should also:

- Get to and stay at a healthy weight\textsuperscript{25}
- Adopt a physically active lifestyle\textsuperscript{26}
- Consume a healthy diet\textsuperscript{27}, with an focus on plant foods
- Limit alcohol\textsuperscript{28} use to no more than 2 drinks per day

These steps may help lower the risk of other cancers, too.

See Second Cancers in Adults\textsuperscript{29} for more information about causes of second cancers.

**Hyperlinks**

25. www.cancer.org/cancer/cancer-causes/diet-physical-activity/body-weight-and-
cancer-risk.html
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29. www.cancer.org/treatment/treatments-and-side-effects/physical-side-
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See all references for Testicular Cancer (www.cancer.org/cancer/testicular-
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