Testicular cancer can develop in 1 or both testicles in men and boys. The testicles are made up of several types of cells, each of which may develop into 1 or more types of cancer. Symptoms of testicular cancer include a lump or enlargement of either testicle, a feeling of heaviness in the scrotum, a dull ache in the lower abdomen or the groin, a collection of fluid in the scrotum, and an enlargement or tenderness of the breasts (caused by hormones produced by the cancer cells).

**Opportunities**

**Prevention** Most men with testicular cancer don’t have any risk factors that could have been avoided. An undescended testicle, or cryptorchidism, increases the risk of testicular cancer on that side and, to a lesser degree, in the opposite, normally positioned testicle as well. Surgically moving an undescended testicle into the scrotum while a child is young may help reduce that risk.

**Detection** Some men notice one or more of the symptoms listed above, but some testicular cancers don’t cause symptoms until they have spread. Men should be aware of testicular cancer and understand that any swelling, lump, or aching should be examined by a health care provider right away. A testicular exam can also be part of a routine physical. Some health care providers also recommend that all men examine their testicles monthly after puberty.

**Treatment** Significant advances have been made in the treatment of testicular cancer. There are 3 main methods of treatment – surgery, radiation therapy, and chemotherapy. Surgery involves removal of the testicle (or testicles) containing cancer. Radiation therapy is used after surgery for some forms of testicular cancer. Most testicular cancers are very sensitive to chemotherapy, which can cure many men with testicular cancer that has spread to other parts of the body.
Who is at risk?

**Age**  The average age at the time of diagnosis of testicular cancer is about 33, but this cancer can affect males of any age, including infants and elderly men.

**Cryptorchidism**  Males with undescended testicle(s) are several times more likely to get testicular cancer than those with normally descended testicles.

**Race**  White American men are more likely to get testicular cancer than men of other races.

Other risk factors

**Medical history**  If a man’s close family members have had this kind of cancer, he is at greater risk for developing it. Men who have had an undescended testicle or cancer in one testicle are at increased risk for developing cancer in the other testicle.

**HIV infection**  There is some evidence that men infected with HIV may have an increased risk of testicular cancer. This is especially true for men who have AIDS.

Quality-of-life issues

From the time of diagnosis, the quality of life for every cancer patient and survivor is affected in some way. They may be affected socially, psychologically, physically, and spiritually.

Concerns that patients and survivors most often express are fear of recurrence; chronic and/or acute pain; sexual problems; fatigue; guilt for delaying screening or treatment, or for doing things that may have caused the cancer; changes in physical appearance; depression; sleep difficulties; changes in what they are able to do after treatment; and the burden on finances and loved ones. Men with testicular cancer are also usually concerned about fertility, sexual function, body image, and social relationships.

Testicular cancer in the United States: 2018 estimates

- New cases: 9,310
- Deaths per year: 400
- 5-year relative survival rate for localized stage: 99%
- 5-year relative survival rate for all stages combined: 95%

Survival rates are reduced to 73% when cancer has spread to distant organs of the body, which emphasizes the need for early detection.

Bottom line

Testicular cancer is highly treatable, usually curable, and relatively uncommon. Since none of the known risk factors can be prevented, the best ways for a man to take care of his health are awareness of risks and symptoms, early detection, and prompt treatment.