

Testicular Cancer

Testicular cancer accounts for one percent of all cancers in men; however, it is the most commonly found cancer in white males between the ages of 20 to 34. Each year eight thousand men are diagnosed with testicular cancer, and three hundred and ninety die from the disease (www.cancer.gov). The overwhelming prevalence of testicular cancer in young men creates a concern for college students. Therefore, it is necessary for college males to take an active role in their health by performing monthly testicular self-examinations.

A monthly self-exam should be performed by all males, and this is especially true for men with increased risk factors for testicular cancer. A man with an undescended testicle, referred to medically as cryptorchidism, has an increased risk of testicular cancer. If the man has surgery to secure the testicle in his scrotum, the risk still remains elevated (www.webmd.com). Additionally, congenital abnormalities in testicular development, a family history, or a previous diagnosis of testicular cancer are risk factors related to the disease (www.cancer.gov). Finally, a man diagnosed with Klinefelter Syndrome is at a heightened risk of testicular cancer due to the adverse affect of multiple X chromosomes on the development of secondary male sexual characteristics, including testicle growth (www.webmd.com). All men, regardless of risk factors, should take responsibility for their health and should begin monthly testicular self-examinations.

Testicular cancer begins as a pea-sized lump in the testicle, which often goes unnoticed. For that reason, it is important for men to perform monthly testicular self-examinations. A self-exam is performed best in a warm shower, where the man can use both hands to examine each testicle. Placing his thumb in the front and his first two fingers behind the testicle, he should roll the testicle between the two fingers to feel for bumps or for lumps (www.malehealthcenter.com). Locating a painless lump or a swelling in the testicle during a self-exam is only one symptom of testicular cancer. Other symptoms include: pain or discomfort in the testicle or scrotum; dull ache in the lower back, abdomen, or groin; enlargement or change in feel of the testicle; heaviness in the scrotum; and a sudden collection of fluid in the scrotum. The presence of any symptom of testicular cancer is not necessarily indicative of the disease; however, a man should contact his doctor for further medical tests (www.cancer.gov).

Doctors employ a variety of tests to diagnosis testicular cancer. Initially, a blood test is performed to measure the level of tumor markers in the blood stream. A blood test can discover cancer before a physical exam or imaging. In addition to blood tests, an ultrasound is used to eliminate other potential causes of the symptoms, as well as to determine the presence and the size of an existing tumor. Finally, a biopsy can be performed to test for cancerous cells in the testicular tissue (www.cancer.gov). After the appropriate laboratory and diagnostic testing, three standard treatments exist to fight the cancer. Radial inguinal orchiectomy, an operation that removes the testicle from an incision in the groin, is the most common treatment for the cancer. Additionally, radiation therapy is used after the surgery to kill any remaining cancer cells in the affected area. Similar to radiation, chemotherapy eliminates any lasting cancer cells after a radial inguinal orchiectomy. Of the three treatment alternatives, radiation and chemotherapy may affect a man's sperm production and fertility, either temporarily or permanently (www.webmd.com).

In conclusion, testicular cancer is a serious disease affecting college men. With early diagnosis and proper treatment, the cure rate for testicular cancer is greater than ninety-five percent (www.cancer.gov). Such a high rate of cure illustrates the necessity for all men to perform monthly testicular self-examinations, as well as to educate themselves on the risk factors and on the symptoms of the disease. The best prevention of testicular cancer is accepting personal responsibility and performing monthly testicular self-exams.

Works Cited

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