

Testicular Cancer

What is testicular cancer?

Cancer develops when cells grow out of control. There are two main types of testicular tumors: seminoma and nonseminoma. Nonseminomas usually grow and spread more quickly than seminomas. Testicular cancer is easier to diagnose early than many cancers and it can often be cured.

Who gets testicular cancer?

Testicular cancer is rare and seldom deadly. There are only about 8,900 newly diagnosed cases annually, according to the American Cancer Society. However, most of these occur in young or middle-aged men, and it is the most common cancer among men ages 15 to 34. Usually this cancer can be treated successfully, resulting in only around 400 deaths per year. Testicular cancer rates have been increasing worldwide over the past few decades, but it is still uncommon.

About 7 percent of testicular cancer cases occur in young boys and teens and about 7 percent occur in men over 55. The incidence of testicular cancer is four to five times higher among white men than among African-American and Asian men. Black men, however, tend to have more advanced disease when they are diagnosed and as a result often have worse outcomes.

What are the risk factors for testicular cancer?

There are few known risk factors for developing testicular cancer, and most men and boys who get this cancer have none of them. The known risk factors include having an undescended or deformed testicle, calcium deposits in one or both testicles, being HIV-positive and having a family history of testicular cancer. Being tall also appears to be associated with a higher risk. Injury to the testicles does not appear to increase the risk of testicular cancer.

What are the symptoms of testicular cancer?

The testicles (also called the testes), part of the male reproductive system, make sperm and produce male hormones such as testosterone.

During its early stages, testicular cancer may not have any symptoms, or only vague symptoms such as a dull ache in the scrotum. It is usually discovered by feeling a lump in one of the testicles. However, some men do not develop symptoms until the later stages of cancer, when it is harder to treat. As testicular cancer progresses symptoms may include:

- A change in how one or both testicles feel
- Painless swelling or a lump in one testicle
- A dull ache or feeling of heaviness in the lower abdomen or the scrotum
- One testicle becoming larger than the other
- Pain in the back or abdomen
- Fluid build-up in the scrotum
- Trouble breathing or shortness of breath
- Weight loss
- Soreness in the breast area

How is testicular cancer diagnosed?

Early detection and treatment of cancer increases the likelihood of long-term survival. The process of diagnosis starts with a physical exam and health history, including how long symptoms have been present. The scrotum will be checked for lumps, pain or other abnormalities, and samples of blood and urine may be taken for testing. An ultrasound of the scrotum may be done to help determine if there are other causes for symptoms.

Other imaging tests, including X-rays, computed tomography (CT), positron emission tomography (PET) or MRI scans may be done to see how extensive the cancer is and if it has spread. If a mass is detected, a small tissue sample (a biopsy) may be removed to examine in the laboratory.

How is testicular cancer treated?

Treatment for testicular cancer depends on how advanced the cancer is when it is detected, how large tumors are and whether they have spread to nearby lymph nodes or other parts of the body. Most cases of testicular cancer can be treated successfully and cured.

Surgery: The most common treatment for testicular cancer is surgical removal of the testicle that contains the tumors and the attached spermatic cord (known as an orchiectomy). In more advanced cases, lymph nodes may be removed as well. Usually removal of one testicle does not lead to infertility, but sperm may be collected and frozen for future use prior to testicle removal.

Radiation: Radiation may be used to kill cancer cells that remain after surgery or to shrink tumors that cannot be surgically removed. It is often used in conjunction with other forms of treatment.

Chemotherapy: Traditional chemotherapy works by killing fast-growing cells, including cancer cells. It can also destroy rapidly dividing healthy cells, such as those in the gut or hair follicles, leading to side effects like nausea and hair loss.

Targeted therapy: Targeted drugs work against cancers with specific characteristics. For example, they may interfere with signaling pathways that regulate cell growth. Targeted treatment is often

better tolerated than chemotherapy, but cancer may develop resistance over time.

Immunotherapy: The newest type of treatment helps the immune system fight cancer. Because testicular cancer is uncommon and often curable with surgery, immune-based therapy has not been widely studied for this type of cancer.

For more information about testicular cancer, please visit our sister site [Cancer Health](#).

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