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# Testicular Health & Cancer Awareness

**Testicular Self Examination**

**What are Testicles?**

**What is testicular cancer?**

**What are the risk factors in getting TC?**

**What are the signs and symptoms of TC?**

**What is testosterone?**



**ORCHID**   
FIGHTING MALE CANCER



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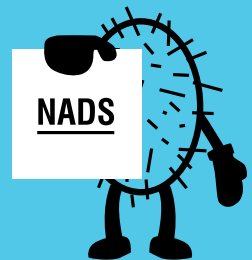
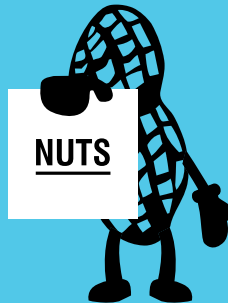
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# Testicular Health, Cancer and Awareness

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The Testicles aka: acorns, baby-makers, back wheels, baubles, bum balls, bum buddies, chestnuts, cods, conkers, cream crackers, doodads, figs, globes, goolies, hairy conkers, heirlooms, knackers, knob nuts, love apples, love nuts, love spuds, marble halls, meaty bites, nads, nobby halls, nuggets, nutmegs, nuts, plums, pounders, rocks, spunk spillers.



# The Testicles

**The testicles are two small oval shaped organs which can also be called the testes or gonads and are the male sex glands which hang down behind the penis, in the scrotum.**

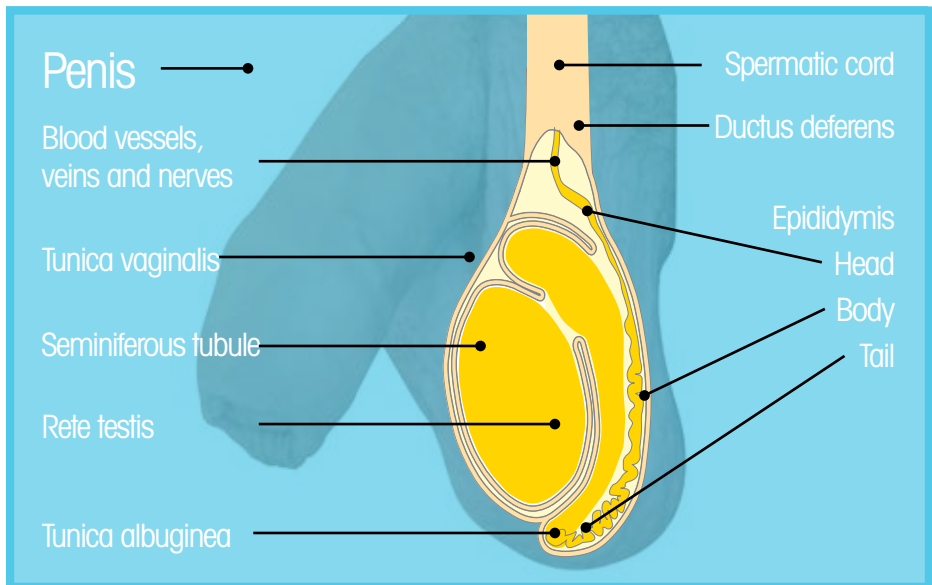
It's quite normal for one testicle to be slightly larger than the other, although the size and shape should be roughly the same. It can also be normal for one to hang a bit lower than the other. The testicles start growing in size at around the age of 11-12 and by early adulthood reach their final size.

They produce sperm and approximately 90% of testosterone, the male sex hormone and are located outside of the

body in the scrotum because sperm develop best at a temperature several degrees cooler than normal internal body temperature.

The testicles contain structures called seminiferous tubules which produce cells called germ cells. These in turn produce sperm. The sperm move into the epididymis (a tube running behind the testicle) where they mature. They get stored there for a few weeks and combine with fluids from other areas (the prostate and seminal vesicles) to form semen (sperm).

The Leydig cells distributed throughout the testicles are the body's main source of testosterone.



## What does testosterone do?

**Testosterone is the male sex hormone and is essential to the development of the reproductive organs and other male characteristics such as:**

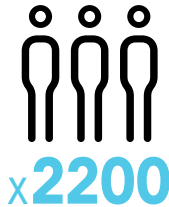
- 
- body and facial hair
  - sex drive (libido)
- 
- low voice
  - stamina
- 
- muscle development
  - mood and wellbeing
- 
- the ability to have an erection
- 

Without enough testosterone a man may lose his sex drive, suffer from fatigue, low mood and put on weight. Testosterone is commonly associated with aggression but in reality is a hormone that helps men deal with the stress and strain of everyday life.

Keeping fit and avoiding too much fatty fried food, sugar and caffeine all of which can reduce testosterone levels, can keep levels healthy.

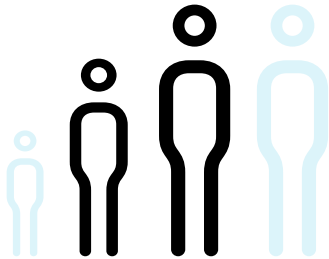
# What is Testicular Cancer?

Testicular cancer occurs when normal, healthy cells, which are carefully regulated by the body, begin to reproduce uncontrollably within an area of the body such as the testicles.



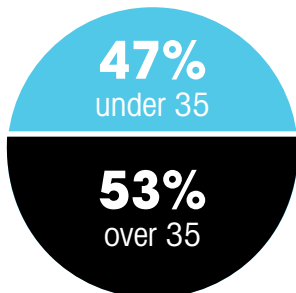
## 2,200 diagnosed

Over **2,200** men will be diagnosed with testicular cancer each year.



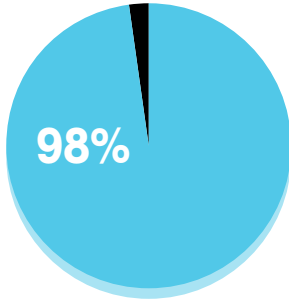
## Ages 15-45

It most commonly affects men between the ages of 15-45.



## 47% under 35

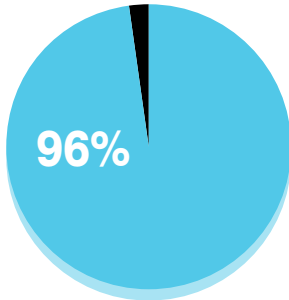
Around **47%** of men diagnosed will be **under the age of 35**.



## 98% cure rate

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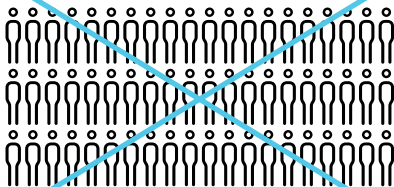
If caught early men can expect a cure rate of around 98%.



## 96% after 10 years

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If caught at any stage 96% of men will be alive 10 years after treatment.



## 60 deaths

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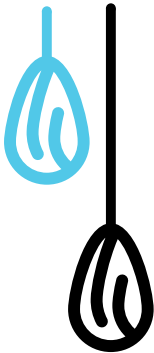
Around 60 young men will die of testicular cancer each year.

## Possible risk factors for testicular cancer

Unlike many cancers, there are few known strong risk factors for testicular cancer, and we cannot currently predict who is likely to get the disease (unlike the link between lung cancer and smoking). While most of these cancers occur in unsuspecting individuals, some risk factors can be traced in a minority of cases.

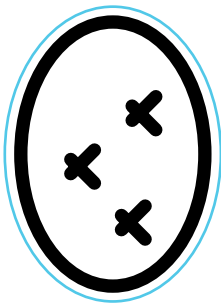
### These include:

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Men born with an **undescended testicle** (cryptorchidism) where the testicle fails to descend into the scrotum. The testicles of a male baby form in its abdomen while in the mother's womb and normally descend into the scrotum at birth or shortly afterwards. Around 10% of men diagnosed with testicular cancer will have a history of this. It can be corrected using a minor surgical technique during childhood (an operation called an orchidopexy) but the risk of developing testicular cancer still remains greater.

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**Pre-cancerous cells** found inside the testicle known as carcinoma in situ (CIS). They may be found when a man has a testicular biopsy for instance during investigations into infertility. Also referred to as intratubular germ cell neoplasia (IGCN). There is a 50% chance that these cells will develop into testicular cancer within 5 years.

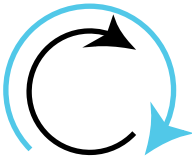
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Father  x4

Brother  x9

A **brother** or **father** affected by testicular cancer.



A **previous history** of testicular cancer. Like all cancers there is always a risk that it can return. However if testicular cancer does reoccur there is every chance that it can still be cured using further treatments such as chemotherapy.



A **sedentary (not very active) life style** may increase the risk. Regular exercise may reduce the risk as it does for many other types of cancer.



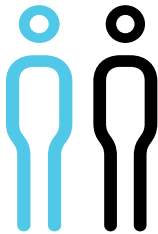
**Repeated trauma** to the testicles (rather than inevitable knocks or one blow) may increase the risk, although this is controversial.

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Recent studies have suggested that **men who smoke marijuana** regularly and develop testicular cancer are more likely to suffer from a more aggressive form of the disease

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**Caucasian men** have a higher risk of testicular cancer than men from other ethnic groups.

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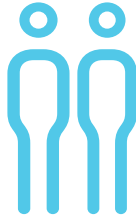
**Men with HIV** are more likely to develop testicular cancer.

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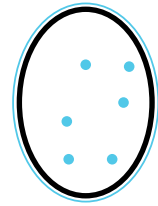
## Other possible factors



There is some evidence to suggest that men who are **taller than average** have a slightly increased risk of developing testicular cancer.



**Twins** have an increased risk of testicular cancer, especially if identical. But as testicular cancer is rare the risk remains low.



A build-up of calcium in the testicles called **microlithiasis**. Some research has suggested that in certain circumstances this condition can increase the risk of testicular cancer developing.

# Signs & Symptoms

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**97%**

A small pea sized lump can be felt in **97%** of cases and in approximately **80%** of cases this will be painless. A malignant testis may not feel unduly uncomfortable or painful whereas a testis inflamed by infection usually will.

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**29%**

Dragging sensation **29%**.

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**10%**

Recent history of trauma (**10%**), leading to examination and discovery of a lump.

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**Rare**

Breast swelling or tenderness (called gynaecomastia). This is rare but may be caused by hormones which are produced by some types of testicular cancer. Similar symptoms can be caused simply by body changes during puberty (growing pains).

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**Rare**

Back pain caused by enlarged lymph nodes in the back (see below).



# Lymph nodes



The human body is covered by a special type of drainage system called the lymphatic system. This system is responsible for transporting excess fluid from the organs and tissues of the body in a fluid called lymph. Lymph fluid will contain various types of cells and substances that are no longer needed. The lymph fluid will be transported through the lymphatic drainage system and pass through small nodules or nodes that act as filters which are responsible for filtering out these unwanted substances. Cancerous cells which break off from the an organ which has cancer can also travel along this route and become trapped at the lymph nodes where they can then accumulate and infiltrate a different area of the body.

# Testicular Self Examination (TSE)

Men should first get to know what is normal for them; the size, shape and structure of their testicles. TSE is the easiest way to identify any potential testicular problems and testicular cancer. It only takes a few minutes to perform and gives men a good excuse for feeling their balls (like they need one!). It is best performed monthly after a bath or shower when the scrotum will be warm, relaxed and pleasant to touch.



**Fig 1 The entire surface of both testes is felt carefully.**

Check each testicle separately using one or both of your hands (Figure 1).

Roll each testicle between the thumb and forefinger to check that the surface is free of lumps or bumps. Do not squeeze!



**Fig 2 The epididymis runs behind the testicles**

Get to know your balls; their size, texture, anatomy, magnificence. Identify the epididymis or sperm collecting tube, often mistaken for an abnormal lump that runs behind each testicle (Figure 2).

Encourage your partner to have a go as he or she may be more likely to identify a problem in the future and get you to do something about it.

## Men should:

Perform testicular self-examination on a regular basis, at least once a month.



If they find anything unusual such as a lump or swelling in their testicles they should get it checked by their GP. The likelihood is that it will not be testicular cancer but testicular cancer still needs to be ruled out. Do not delay getting checked out, as in rare circumstances some types of testicular cancer can progress quickly. If a GP is unsure of the exact cause of an abnormality they will usually request an ultrasound scan of the scrotum. The ultrasound scan and referral will usually be made on an urgent basis and the results should be available within a few weeks.

**Getting any abnormalities checked quickly rather than leaving things will lead to a greater chance of cure if testicular cancer is present and will also show what is causing the problem which if non-cancerous will lead to peace of mind.**

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