

Let's Talk Balls

A young person's guide to testicular cancer



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What is testicular cancer?

KEY STAGE: 4/5

This lesson by Orchid is designed to raise awareness of testicular cancer; the most common cancer in men between the ages of 15-45. By outlining possible risk factors and signs and symptoms, and highlighting the importance of self-examination, the lesson aims to increase young people's understanding of testicular cancer and their confidence in seeking help and support if needed.

This lesson will be most effective when taught within a PSHE scheme of work addressing health and prevention.

Learning objective:

- To learn what testicular cancer is, its signs and symptoms, and what to do if a testicular issue is discovered.

Learning outcomes:

By the end of the lesson, students will be able to:

- ✓ explain what testicular cancer is
- ✓ describe the signs and symptoms of testicular cancer
- ✓ identify possible risk factors
- ✓ explain how to perform a testicular examination and what to do if a problem is suspected

Resources required:

- Box or envelope for anonymous questions
- Flipchart paper and pens
- **Resource 1: *Finding a lump*** [one per pair]
- **Resource 2: *What next?*** [one per pair]
- **Resource 3: *Results*** [one per pair]
- **Resource 4: *Sentence starters*** [Optional – for students who require additional support]

Climate for learning:

Make sure you have read the accompanying teacher guidance notes before teaching this lesson for guidance on establishing ground rules, the limits of confidentiality, communication and handling questions effectively.

If a student has been affected by testicular or any other cancers they may find this lesson distressing or upsetting. It is recommended that teachers discuss with the student whether they would like to participate or whether they would prefer an alternative activity.

Key words:

Cancer, testicles, orchidectomy, self-examination, symptoms.

Baseline assessment:

Baseline assessment activity

Negotiate or revisit ground rules for the lesson. Give students the opening to a text conversation between Ryder and Zane in Resource 1: Finding a lump and ask them to respond to the prompt questions surrounding the text chain:

- How might Ryder be feeling?
- Is it normal to have a lump? What might the lump be?
- What should Ryder do?
- What questions might Ryder have?

Take some class feedback, as this will give you an indication of students' current understanding, beliefs and attitudes relating to the topic.

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Introduction

Introduce the learning objective and outcomes. Explain that testicular cancer can be a sensitive and difficult issue to discuss, but that it is an important topic and awareness can save lives.

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Core activities:

Signs, symptoms and risk factors

As an ice-breaker activity, ask students to give you any slang names for testicles and create a whole class list. This is designed to lighten the atmosphere and help students feel comfortable in sharing their ideas throughout the rest of the lesson. Explain that regardless of what people call testicles, what they need to know about them stays the same.

Explain that they are going to watch the first part of a video, which introduces testicular cancer and explores some signs and symptoms, and risk factors, as well what a lump might be. Tell them that they will be asked to answer some questions following the video, so they need to pay attention to what is being said, even when the content is humorous. Play the video from the beginning until 7 minutes 40 seconds – you will return to watch the final part of the video later in the lesson.

<https://vimeo.com/284925555>

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**Core
activities:**

What next?



Once you have paused the video, hand out Resource 2: What next? which returns to the text conversation between Ryder and Zane. In pairs, ask students to use the information that they have just heard in the video, to respond to the questions surrounding the texts.

Take class feedback, ensuring the following key learning is addressed through the discussions:

- **Is Ryder too young to get cancer?**

Testicular cancer most commonly affects men between the ages of 15-45 and is statistically the most common cancer in men aged between 25-49 in the UK. Around 47% of men diagnosed will be under the age of 35.

- **How would a young person like Ryder know that something doesn't feel right in their testicles?**

Many boys do not know the correct anatomy of a testicle which can help them identify an abnormality. The body of the testicle is smooth and oval and the only structure which should be present is the epididymis or sperm collecting tube which runs behind the testicle and feels soft. A small pea sized lump can be felt in around 90% of cases and in over 80% of cases this will be painless. Other signs that might indicate a problem include: a dragging sensation, ache or pain, breast swelling or tenderness (this is rare but may be caused by hormones which are produced by some types of testicular cancer), back pain caused by enlarged lymph nodes in the back. However, it is important to stress to students that similar symptoms can be caused simply by body changes during puberty.

- **What might increase someone's risk of getting testicular cancer?**

Men born with an undescended testicle (where the testicle fails to descend into the scrotum) are at an increased risk; men who have a brother affected by testicular cancer are 9x more likely to develop it and those that have father affected by it or 4x more likely to develop it; men who have HIV are at an increased risk. Additional factors that may increase the risk include: repeated knocks or trauma to the scrotum; a non-active lifestyle; smoking marijuana regularly.

- **What else might Ryder's lump be?**

Most testicular problems are not cancer. Other conditions that are common in young men and have no direct link to testicular cancer developing include: hydrocele (an accumulation of fluid), epididymal cysts (small, fluid filled cysts), epididymo-orchitis (inflammation of the epididymis), varicocele (a collection of dilated veins in the scrotum). Visit <https://orchid-cancer.org.uk/testicular-cancer/> for further information.

**Core
activities:**

Seeking support

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Explain that if an abnormality has been detected then it will need to be assessed by a GP. Most GPs are able to identify a common problem by a brief examination. Although the likelihood of testicular cancer is rare, the abnormality still needs to be fully assessed to verify that it is not cancer. If a GP cannot identify the exact nature of the problem an ultrasound scan can be performed which is able to diagnose all testicular problems.

Divide the class into small groups and give each some flip chart paper and pens. Ask students to mind map any reasons they can think of as to why Ryder might not get his lump checked (e.g. he doesn't want anyone else looking at his testicles).

Take some feedback from the class.

Reasons might include: embarrassment, worried that it will turn out to be something bad and worried about the treatment he might need, worried what people will think if it does turn out to be something more serious, concerned about losing a testicle, unsure about what might happen next, worried about looking 'weak' or not being 'manly' enough, thinking it will just go away eventually, thinking he should be able to solve the problem himself, thinking it's not serious enough to be checked by a doctor.

Explain that although there might be many reasons why someone might delay getting checked by a GP, it is important that they keep in mind the benefits to doing so. Tell students that they are now going to watch what might happen during a screening, and how to perform self-examination at home – this information should help to address some of the barriers listed above. Then, play the video from 7 minutes 40 seconds until the end.

When the video ends, emphasise the importance of performing regular self-examination. It's quick and easy to do and best carried out after a hot bath or shower. Young people should get to know what is normal for them (e.g. one testicle may be slightly bigger or hang lower than the other) and have any abnormalities checked by a GP. They should roll each testicle between the thumb and forefinger to check that the surface is free of lumps or bumps and should remember that the body of the testicle is smooth and oval and the only structure which should be present is the epididymis or sperm collecting tube which runs behind the testicle and feels soft – this should not be confused with a lump.

Support: Carefully consider groupings to ensure that pupils can access appropriate support if needed.

Challenge: Ask students to come up with three counter arguments to the barriers that they think might be most significant.

Core activities:

Offering advice

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Ask students to return to the conversation between Ryder and Zane from Resource 2. In pairs, ask them to write a reply to Ryder from Zane, explaining what he should do next, based on everything they have just heard in the video and learnt in the lesson. They should address the following questions in their response:

- Who should Ryder tell?
- Where should he go to get checked out?
- What might he be worried about and how might he be encouraged to go despite his fears?
- What additional information could Zane give to Ryder to reassure him and make him feel more comfortable?

Ask some students to share their responses with the rest of the class, making sure that the following points are included:

- *Ryder could tell his parents, a responsible adult, a school nurse, or his GP. He can also access advice and guidance from Orchid.*
- *An abnormality on the testicle is unlikely to be testicular cancer, but should always be checked out by a medical professional.*
- *Helping Ryder overcome his worries might include explaining that it's a painless procedure, his information will be kept confidential, many men are screened and checked every day and it's nothing unusual for doctors and nurses, a brief moment of embarrassment might be lifesaving.*
- *If testicular cancer is caught early, it is likely to require less treatment and there is a 98% chance of a cure. If cancer is found and the removal of a testicle is needed, this will not affect someone's ability to have an erection or have children.*

Finally, hand out, display or read to students Resource 3: Results to show the end of Ryder and Zane's conversation following Ryder's check-up, emphasising that it was a simple and painless experience with a positive outcome.

Support: Provide any students who may need additional support in structuring their reply from Zane with **Resource 4: Sentence starters**.

Challenge: Ask students to script the opening to a conversation between Ryder and his GP, suggesting how Ryder might start a conversation about his concerns with them.

Plenary / Assessment for and of learning

Endpoint assessment and signposting support

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Ask students to write down their responses to the quick quiz below, recapping their key learning from the lesson.

1. Which is the most likely age to develop testicular cancer? 15-45
2. What is the most common symptom of testicular cancer? A small hard lump
3. When is the best time to check testicles? After a warm/hot bath or shower (*if time, you may wish to briefly recap self-examination again*)
4. How often should someone check their testicles? Regularly, e.g. once a month
5. What percentage of men will survive early detected testicular cancer? 98%

It is important to stress that testicular cancer is a rare cancer with around 2,300 men being diagnosed each year. Although there are several risk factors such as an undescended testicle and family history, these risks are small and overall in most cases of testicular cancer there is no clear cause; testicular cancer is rare and very treatable.

Ensure that the anonymous question box is checked at the end of this lesson. Any questions about the content should be followed up as soon as possible; in the following PSHE lesson if not before.

Finally, ensure that students know where they can seek help and advice both now and in the future. Students wishing to seek further guidance can:

- Speak to a tutor, head of year or other trusted member of staff in the school
- Contact their GP
- Contact Orchid: <https://orchid-cancer.org.uk/testicular-cancer/> (0808 802 0010)
- Visit trekstock: <https://www.trekstock.com/> (a resource for young people affected by cancer which provides counselling and support)

Extension activity:

Ask students to create their own awareness campaign about testicular cancer. Provide them with the following success criteria to indicate what they should include:

- ✓ Testicular cancer has been clearly explained using key terminology
- ✓ The signs and symptoms of testicular cancer are clearly explained
- ✓ At least two possible risk factors have been identified
- ✓ A clear explanation of how to perform testicular self-examination is included

Students might also want to include an example of someone being worried about having testicular cancer and what advice they could be given, and/or include celebrities who could be involved in their campaign.