

What's Up in Urology Journal, Spring 2013?

Urology for People is a section in the *Urology Journal* for providing people with a summary of what is published in this journal and describing urological entities in a simple language.

Important Note. The findings in medical papers are usually not directly applicable in clinical practice and patients should consult their physicians before any utilization of the results of medical studies.

TESTIS CANCER

The testes are 2 egg-shaped organs located inside the scrotal sac. The testicular cancer had 3 distinct features: it predominantly involves young adults, has rapidly progressive nature, and responds very well to chemotherapy. The diagnosis of testis cancer in early stage has utmost importance. However, most patients do not visit a physician due to embarrassment. The common early symptom of testicular cancer is a painless mass inside the testis. Every solid mass in the testis is tumor unless otherwise noted. Although testicular cancer accounts for only 1% of cancers in men, it is the most common cancer in men in their 20s and 30s. Fortunately, it has become one of the most amenable of all cancers for cure. About 95% of all men diagnosed with testis cancer survive their disease. The testicular cancers have two main types: cancers which originate from testis germ cells (eg, seminoma) and cancers which originate from testis non-germ cells (eg, embryonal cell carcinoma and choriocarcinoma). Non-germ cell testicular tumors are more malignant than germ cell testicular tumors. The original treatment for

testicular cancer is removal of related testis by surgery. The surgical specimen is being sent for pathologic examination. Then, according to pathologic diagnosis and the extend of involvement of the body with tumor (tumor stage), necessary treatment is done. The main stem treatment for germ cell testicular tumor is radiotherapy, and the main stem treatment for non-germ cell testicular tumor is surgery for removal of involved lymph nodes and chemotherapy. Testicular cancers have excellent tumor markers. Tumor markers are substances produced by cancer cells and can be measured in the blood. The tumor markers for testicular cancer are: alpha fetoprotein (AFP), beta human chorionic gonadotropin (beta-hCG), and lactate dehydrogenase (LDH). Not all treatment modalities fit all patients; a physician will work with the patient to determine the most appropriate treatment option based upon patient's condition. Some men with testicular cancer need only surveillance (watchful waiting).

See page 873 for full-text article.