

Testicular Cancer

Case Studies

A 21-year-old male noted pain in his right testicle while studying hard for his midterm college examinations. On self-examination, he noted a “grape sized” mass in the right testicle. This finding was corroborated by his healthcare provider. This young man had a history of delayed descent of his right testicle until the age of 1 year old.

Studies	Results
Routine laboratory studies	Within normal limits (WNL)
Ultrasound the testicle	Solid mass, right testicle associated with calcifications
HCG (human chorionic gonadotropin)	550mIU/mL (normal: <5)
CT scan of the abdomen	Enlarged retroperitoneal lymph nodes
CT scan of the chest	Multiple pulmonary nodules

Diagnostic Analysis

At semester break, this young man underwent right orchiectomy. Pathology was compatible with embryonal cell carcinoma. CT directed biopsy of the most prominent pulmonary nodule indicated embryonal cell carcinoma, compatible with metastatic testicular carcinoma. During a leave of absence from college, and after banking his sperm, this young man underwent aggressive chemotherapy. Repeat testing 12 weeks after chemotherapy showed complete resolution of the pulmonary nodules and enlarged retroperitoneal lymph nodes.

Critical Thinking Questions

1. What impact did an undescended testicle have on this young man’s risk for developing testicular cancer?
2. What might be the side effects of cytotoxic chemotherapy?
3. What was the purpose of preserving his sperm before chemotherapy?
4. Is this young man’s age typical for the development of testicular carcinoma?