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• Like and follow us on Social Media!

www.SeanKimerling.org
INTRODUCTION

This program has been designed to assist you in raising public awareness about Testicular Cancer. It is critical that your viewers understand that while Testicular Cancer is the MOST COMMON cancer among young men between the ages of 15 and 40, if detected and treated early, it has one of the highest cure rates of all cancers, with a survival rate over 95 percent.

This presentation and resource have been assembled by The Sean Kimerling Testicular Cancer Foundation, a registered 501(c)(3), non-profit organization. Their goal is to provide information about the need for regular self-examinations, the recognition of possible warning signs leading to early detection, and how to seek medical help without embarrassment or fear of stigmatization. In short, to save lives.

All of the presentations include: information about the Sean Kimerling Foundation, basic data about Testicular Cancer and who it targets (risk factors), protection advice including self-examination, critical next steps should something be discovered, and how audience members can support the cause.

The Foundation was established in memory of Sean Kimerling, a 1988 Magna Cum Laude graduate of Georgetown University, a two-time Emmy Award winning anchor of PIX11 sports and pre-game announcer for the New York Mets who died from Testicular Cancer on September 9, 2003, just 1 month after being diagnosed with this disease. He was only 37.

We hope you find this program helpful and we thank you in advance for your invaluable participation.
SPEAKERS BACKGROUND
WHAT IS TESTICULAR CANCER?

**Testicular cancer** is a disease in which cancer develops in one or both of a man's testicles.

While rare, it is the most common form of cancer in men between the ages of 15 and 40.

Cancer develops when cells begin to grow out of control. As these abnormal cells rapidly grow and develop, they invade and destroy healthy tissues and organs in the body.

It's important to remember that any man, regardless of age or race, can develop testicular cancer.
TESTICULAR CANCER STATISTICS

• **99% curable** if found and treated early
  • 95% survival rate

• Most common form of cancer in men ages 15 – 40
  • Most frequently diagnosed among 20-34
  • Median age at diagnosis = 33
  • About 6% of cases occur in children and young men
  • About 8% of cases occur in men older than 55

• Studies estimate about 9,560 new cases in the U.S. in 2019

• Studies estimate about 410 deaths in the U.S. in 2019

• The incidence rate has been increasing in the U.S. and several other countries over the last few decades
TYPES OF TESTICULAR CANCER

• Germ Cell Tumors
More than 90% of cancers of the testicle start in cells known as germ cells. These are the cells that make sperm
  • **Seminomas** - Tend to grow and spread more slowly than non-seminomas.
    a. Classical (or typical) Seminomas
    b. Spermatocytic Seminomas
  • **Non-seminomas** - These types of germ cell tumors usually occur in men between their late teens and early 30s
    a. Embryonal Carcinoma
    b. Yolk Sac Carcinoma
    c. Choriocarcinoma
    d. Teratoma

• Carcinoma in situ of the testicle
A non-invasive form of TC called **carcinoma in situ (CIS)** or **intratubular germ cell neoplasia**. In testicular CIS, the cells look abnormal under the microscope, but they have not yet spread outside the walls of the seminiferous tubules (where sperm cells are formed)

• Stromal Tumors
Starts in the supportive and hormone-producing tissues, or stroma, of the testicles
FACTS & FIGURES

RACE

- White: 6.3 per 100k
- American Indian Alaska Native: 4.2 per 100k
- Hispanic: 3.9 per 100k
- Asian Pacific Islander: 1.7 per 100k
- Black: 1.4 per 100k

*Surveillance Epidemiology and End Results (SEER) Fact Sheets/Cancer of the Testis
RISK FACTORS

- Cryptorchidism (An undescended/partially decended testicle)
- Family history of testicular cancer
- Abnormal development
- Klinefelter’s Syndrome
- HIV infection
- Carcinoma in situ of the testicle
- Having had testicular cancer before
- Being of a certain race/ethnicity (studies prove white men are about 4 to 5 times that of black and Asian-American men to develop TC – However, it is important to remember that ANY man, regardless of age or race, can develop TC.)

IMPORTANT: Most boys and men with testicular cancer don't have any of the known risk factors.
FACTS

• Definition: malignancy of the testes

• 9 new cases per 100,000 males annually

• > 90% are germ cell tumors

• 400 deaths/ 8000 new cases in 2005 in USA Caucasians 4x incidence of African-Americans Caucasians 2x incidence of Native Americans and Latino 1-2% bilateral

• Most common cancer in men between ages of 15-40

• > 95% 5 year survival rate
FACTS

• Cause of Testicular Cancer is unknown
• Cryptorchid testes has the strongest association with testes tumor development
• Classification: seminoma and non-seminomatous germ cell tumors
• Survival has improved dramatically because of advances in combination chemotherapy
PATHOLOGY

• Seminoma 35%
• Embryonal cell carcinoma 20%
• Teratoma 5%
• Choriocarcinoma <1%
• Mixed cell type 40% most common is teratocarcinoma, a combination of teratoma and embryonal cell carcinoma
TESTICULAR CANCER - SPREAD

- Typically spread in a stepwise fashion via lymphatics to retroperitoneal lymph nodes
- Exception is choriocarcinoma, which spreads via blood
- Metastatic disease in order of decreasing frequency: retroperitoneum, lung, liver, brain, bone, kidney, adrenal, intestinal tract
SIGNS OF TESTICULAR CANCER

- Testes mass or diffuse enlargement
- Mass is firm and usually non-tender
- Abdominal exam may reveal a bulky mass
- Assessment of lymph nodes should be made
- Occasional gynecomastia
- Differential diagnosis: epididymo-orchitis, hydrocele, spermatocele
SYMPTOMS

• Most common is painless enlargement of testes
• Testes heaviness
• Typical delay from recognition of an abnormality to treatment is 3-6 months, underscoring importance of patient awareness and self-exam
• 10% present with symptoms of metastases: back pain is most common and is due to retroperitoneal spread involving nerve roots; also cough due to lung mets, bone pain due to skeletal mets, lower extremity swelling due to venous obstruction, or nausea and vomiting due to mass pushing on GI tract

IMPORTANT: There have been several cases of men diagnosed with TC often having no symptoms at all.
If testicular cancer is suspected

- Order scrotal ultrasound
- Send off tumor markers: AFP, hCG, LDH
- Refer To Urologist Immediately!
TREATMENT OF TESTICULAR CANCER

- Inguinal orchiectomy by urologist
- Once pathology determined, staging via CT abdomen/chest
- Further treatment is dependent on pathology and may include surveillance, retroperitoneal lymph node dissection or chemotherapy
HOW TO PERFORM A SELF-EXAMINATION

1. It’s best to do a TSE during or right after a hot shower or bath. The scrotum (skin that covers the testicles) is most relaxed then, which makes it easier to examine the testicles.

2. Using both hands, examine one testicle at a time feeling for any lumps or abnormalities.

3. Place your thumbs over the top of your testicle, with the index and middle fingers behind, roll it between your fingers. When examining, feel for any lumps or bumps that may be as small as a piece of rice or a small, hard pea.

4. Look for any swelling in the skin of the scrotum or in the groin in front of the mirror. Although lumps or swelling may not be cancer, you should contact your doctor right away if you notice any changes in your testicle or have any pain in your groin for an accurate diagnosis.
PATIENT SUCCESS

• Dan Abrams, TV legal news personality*
• Tyler Austin, MLB player*
• Lance Armstrong, pro bicyclist
• Chad Bettis, MLB player
• Tom Green, comedian
• Scott Hamilton, pro figure skater & broadcaster
• John Kruk, MLB player
• Billy Mayfair, pro golfer
• Nate Solder, NFL player
• Taboo, Musician/Rapper/member Black Eyed Peas
• Nathan Adrian, 5 time Olympic Gold Medalist

* SKTCF partner

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TESTICULAR CANCER & SEX

If Found Early And Medically Treated
Will my patient Maintain his:

- Sex Drive?
- Sexual Capabilities?
- Ability to Marry and Have Families?
FREE INFORMATION

HELP us spread the word about this deadly but curable disease!

The Sean Kimerling Testicular Cancer Foundation distributes FREE self-examination shower cards to various schools, health fairs and medical facilities around the U.S.

ORDER YOUR FREE INFORMATION ABOUT TESTICULAR CANCER NOW!

E-mail us at natalie@seankimerling.org

www.SeanKimerling.org
RESOURCES – Shower Card

Testicular cancer is almost always curable if caught and treated early. It is fatal if untreated. It is fatal!

PERFORM A SELF EXAM
once a month. (This shower
is an ideal place to do it.)

Using both hands, explore one
testicle as a routine
looking for any
lumps or abnormalities.

Place your fingers on the top
of your testicle, with the index
and middle fingers lifted, roll it
between your fingers. When
exercising, look for any masses
or tumors that may be as small as
a piece of rice or a small, hard pea.

Look in the mirror to
and surface
in front of the mirror. ALTHOUGH
lumps or swelling may not be
cancer; you should consult your
doctor right away if you notice
any changes in your testicles or
any new lumps in your groin for an
accurate diagnosis.

Stop the test cancer in men under 40.

www.SeanKimerling.org
REMEMBER..

• Most Common Cancer for Young Men ages 15-40
• Spreads very quickly
• Only 4% of testicular tumors are found by doctors
• Is more than 99% curable if caught and treated early
• Majority of testicular tumors are found by men themselves

Inform your friends..you could save their life!

www.SeanKimerling.org
REMEMBERING SEAN KIMERLING

- Two-time Emmy Award winning anchor of WPIX sports
- Pre-game announcer for NY Mets baseball
- *Magna cum laude* graduate of Georgetown University
- Following 1-1/2 years of misdiagnoses, Sean died in 2003 at age 37, just 1 month after finally being diagnosed with Stage 4 TC

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THANKS FOR LISTENING.. PLEASE BE SURE TO SPREAD THE WORD!

BE A MAN – SELF EXAM!

At least ONCE a month

Check ‘Em!!

www.SeanKimerling.org
If he hears “you have testicular cancer”, he needs to hear “we caught it early”!

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