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[Testicular Cancer - Follow-Up Care](#) [1]

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ON THIS PAGE: You will read about your medical care after cancer treatment is completed, and why this follow-up care is important. To see other pages, use the menu on the side of your screen.

Care for people diagnosed with cancer doesn't end when active treatment has finished. Your health care team will continue to check to make sure the cancer has not returned, manage any side effects, and monitor your overall health. This is called follow-up care.

This plan may include regular physical examinations and/or medical tests to monitor your recovery for the coming months and years. Men who had testicular cancer usually receive follow-up screening for at least 10 years after their treatment ends. However, even after this specific follow-up period ends, men should let any doctor treating them know that he has a history of testicular cancer. This includes the man's general or primary care doctor, who can then monitor for possible long-term side effects throughout the man's lifetime.

Learn more about the [importance of follow-up care](#) [3].

Watching for recurrence

One goal of follow-up care is to check for a recurrence. Cancer recurs because small areas of cancer cells may remain undetected in the body. Over time, these cells may increase in number until they show up on test results or cause signs or symptoms. During follow-up care, a doctor familiar with your medical history can give you personalized information about your risk of recurrence. Your doctor will also ask specific questions about your health. Some people may have blood tests or imaging tests as part of regular follow-up care, but testing recommendations depend on several factors including the type and stage of cancer originally diagnosed and the

types of treatment given.

Managing long-term side effects

Most people expect to experience side effects when receiving treatment. However, it is often surprising to survivors that some side effects may linger beyond the treatment period. These are called long-term side effects. In addition, other side effects called late effects may develop months or even years afterwards. Long-term and late effects can include both physical and emotional changes.

Talk with your doctor about your risk of developing such side effects based on the type of cancer, your individual treatment plan, and your overall health. If you had a treatment known to cause specific late effects, you may also have certain physical examinations, scans, or blood tests to help find and manage them.

Below are some of the long-term side effects that are possible after treatment for testicular cancer.

- **Lung problems.** Nine doses of bleomycin causes lung damage for about 5% of men and is fatal for less than 1% of men receiving the drug. Lung scarring is a possible long-term side effect. The risk factors for lung scarring are age (older than 70), cigarette smoking, previous lung injury, previous radiation therapy to the chest, impaired kidney function, or receiving additional doses. It is rare to have lung effects without these risk factors. Therefore, if a man has these risk factors and good-risk disease, 4 cycles of EP can be used instead of 3 cycles of BEP. If 4 cycles of chemotherapy are needed, ifosfamide can be used instead of bleomycin, but it is associated with more short-term side effects, such as infections. Bleomycin also makes the lungs more sensitive, and patients who need to receive extra oxygen during surgery may be at increased risk of developing lung damage related to the bleomycin.

Two particularly important issues are:

- Patients who smoke should [stop smoking](#) [4] for many health reasons, but in particular to reduce the risk of lung injury from bleomycin.
 - The doctor should examine the patient's lungs before each cycle of chemotherapy and stop giving bleomycin if lung injury is seen.
- **Kidney damage.** Cisplatin can cause kidney damage. However, it is a very important drug to treat testicular cancer. Also, cisplatin has fewer side effects than carboplatin, which has also been shown to be less effective. The best way to prevent this problem is for cisplatin

to be flushed out by giving the patient at least 1 liter of IV fluid before and after the drug is given. This reduces the risk of kidney damage. Research studies evaluating kidney function years after the doses have been given have shown low rates of long-term kidney damage and when it does occur, it is generally mild.

- **Heart and blood vessel problems.** A condition called Raynaud's phenomenon may be caused by bleomycin. This condition is associated with the blood vessels narrowing and the skin turning white, then blue, and then red when exposed to certain triggers, such as cold. This is especially common in the hands. Less than 10% of men develop Raynaud's phenomenon. However, more men developed this condition when vinblastine and bleomycin were combined. This regimen is almost never used now. Avoiding the triggers, such as preventing the fingers from becoming cold, is the main treatment.

Men who receive BEP chemotherapy may have higher cholesterol and blood pressure levels and an increased risk of heart disease and/or stroke. Radiation therapy has also been associated with an increased risk of heart disease. The increased risk is small and outweighed by the fact that it is necessary to treat the cancer. However, these side effects are more important when the doctor considers chemotherapy or radiation therapy to prevent the cancer from coming back for men with clinical stage I disease. A healthy diet, exercise, not smoking, and medications to lower cholesterol, control high blood pressure, or treat diabetes are ways to reduce the risk of heart disease and stroke.

- **Nerve damage.** Cisplatin can sometimes damage the nerves, causing feelings of numbness or "pins and needles." When this occurs, it most often starts during the chemotherapy and lessens and goes away with time. It may take months or even years to completely go away. Rarely, it can affect a person's functioning, such as being clumsy when buttoning shirt buttons.
- **Hearing problems.** Sometimes, men who received cisplatin may notice that they can no longer hear high-pitch sounds. This is more common with higher doses, and it is more likely for older men or men with previous hearing problems. It rarely affects young men but may be relevant for musicians or others who depend on having very fine hearing abilities. Another hearing-related side effect of cisplatin may be tinnitus, which is ringing in the ears.
- **Secondary cancers.** Men who receive chemotherapy and/or radiation therapy for testicular cancer have an increased risk of developing other cancers in the future. The thought of developing another cancer can be concerning and difficult to face for many men. However, if the testicular cancer has metastasized ([stage II or III](#) [5]), then the cancer is a fatal illness unless it is treated effectively. Chemotherapy and radiation therapy often play important roles in treating testicular cancer when the goal is to cure the disease. Thus, even though they pose some risk, chemotherapy and radiation therapy are

sometimes the best options for controlling cancer growth and lengthening your life. The issue of secondary cancers may be particularly important for men with stage I disease and early stage II disease that can be cured with surgery alone. In such cases, men may have a choice between surgery alone versus surgery plus chemotherapy or radiation therapy. Each man needs to talk with his doctor about the role of chemotherapy and radiation therapy in his treatment, including why it is recommended and what the risks and benefits are.

- **Fertility.** The issue of fertility in men with testicular cancer is a complex topic because patients with testicular cancer often have a lower sperm count before any treatment is given. A man who has fertility problems after treatment should talk with his doctor about these factors:

- Sperm count before chemotherapy
- Whether he received chemotherapy or radiation therapy
- How long ago the treatment was given
- Whether an experienced surgeon performed a nerve-sparing RPLND to preserve ejaculation

A low sperm count does not necessarily mean that a man will be infertile after treatment because most patients will develop very low to no sperm counts while receiving chemotherapy. However, the chance of fertility returning after treatment increases over time but is lower for men with no or low sperm counts before chemotherapy. It is also important to [ask about sperm banking before treatment](#) [6].

- **Low testosterone.** In addition to damage to the ability to make sperm, the cells that make testosterone may be damaged. If a man has a low testosterone level, then hormone replacement therapy can be used. As outlined in the [Treatment Options](#) [7] section, symptoms of a reduced testosterone level include decreased sex drive, inability to achieve a normal erection and orgasm, fatigue, hot flashes, depression, mood changes, muscle and bone loss, as well as metabolic syndrome. Metabolic syndrome is a set of conditions, such as obesity, high levels of blood cholesterol and high blood pressure that increases a person's risk of heart disease, stroke, and diabetes.

Keeping personal health records

You and your doctor should work together to develop a personalized follow-up care plan. Be sure to ask about any concerns you have about your future physical or emotional health. ASCO offers [forms to help create a treatment summary to keep track of the cancer treatment you received and develop a survivorship care plan](#) [8] once treatment is completed.

This is also a good time to decide who will lead your follow-up care. Some survivors continue to see their oncologist, while others transition back to the general care of their family doctor or another health care professional. This decision depends on several factors, including the type and stage of cancer, side effects, health insurance rules, and your personal preferences.

If a doctor who was not directly involved in your cancer care will lead your follow-up care, be sure to share your cancer treatment summary and survivorship care plan forms with him or her, as well as all future health care providers. Details about your cancer treatment are very valuable to the health care professionals who will care for you throughout your lifetime.

The [next section in this guide is Survivorship](#) [9] and it describes how to cope with challenges in everyday life after a cancer diagnosis. Or, use the menu on the side of your screen to choose another section to continue reading this guide.

Links

[1] <http://www.cancer.net/cancer-types/testicular-cancer/follow-care>

[2] <http://www.cancer.net/about-us>

[3] <http://www.cancer.net/node/29386>

[4] <http://www.cancer.net/node/25002>

[5] <http://www.cancer.net/node/19665>

[6] <http://www.cancer.net/node/29921>

[7] <http://www.cancer.net/node/19666>

[8] <http://www.cancer.net/node/25394>

[9] <http://www.cancer.net/node/34186>