

# Screening for Testicular Cancer: Recommendation Statement: United States Preventive Services Task Force

United States Preventive Services Task Force

## Citation

United States Preventive Services Task Force. *Screening for Testicular Cancer: Recommendation Statement: United States Preventive Services Task Force*. The Internet Journal of Urology. 2003 Volume 2 Number 1.

## Abstract

### Figure 3



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### Figure 2



US Department of Health and Human Services

## SUMMARY OF RECOMMENDATION

The U.S. Preventive Services Task Force (USPSTF) recommends against routine screening for testicular cancer

in asymptomatic adolescent and adult males. D Recommendation.

The USPSTF found no new evidence that screening with clinical examination or testicular self-examination is effective in reducing mortality from testicular cancer. Even in the absence of screening, the current treatment interventions provide very favorable health outcomes. Given the low prevalence of testicular cancer, limited accuracy of screening tests, and no evidence for the incremental benefits of screening, the USPSTF concluded that the harms of screening exceed any potential benefits.

## CLINICAL CONSIDERATIONS

- The low incidence of testicular cancer and favorable outcomes in the absence of screening make it unlikely that clinical testicular examinations would provide important health benefits. Clinical examination by a physician and self-examination are the potential screening options for testicular cancer. However, little evidence is available to assess the accuracy, yield or benefits of screening for testicular cancer.
- Although currently most testicular cancers are discovered by patients themselves or their partners, either unintentionally or by self-examination, there is no evidence that teaching young men how to examine themselves for testicular cancer would improve health outcomes, even among men at high risk, including men with a history of undescended testes or testicular atrophy.
- Clinicians should be aware of testicular cancer as a possible diagnosis when young men present to

them with suggestive signs and symptoms. There is some evidence that patients who present initially with symptoms of testicular cancer are frequently diagnosed as having epididymitis, testicular trauma, hydrocele, or other benign disorders. Efforts to promote prompt assessment and better evaluation of testicular problems may be more effective than widespread screening as a means of promoting early detection.

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**References**

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3. Screening for testicular cancer: update of the evidence for the U.S Preventive Services Task Force. Agency For Healthcare Research and Quality. 2004. Available at <http://www.preventiveservices.ahrq.gov>

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