



# Survive & Thrive

## A Shock Diagnosis Leads to Extraordinary Care

By Martin Walls

**A**t first Ramone M. didn't think anything of it. Besides, he had a lot on his mind in March 2010. An active and ambitious 40-year-old Argentinian native, he was spending most of his time running his busy, independent coffee shop in Utica, New York and trying to keep up with his three children.

So when he noticed that one of his testicles had begun, in his words, "to feel really strange" he just carried on, assuming it had swollen because he had inadvertently injured himself "down there."

"I didn't do anything about the swelling for 10 days," says Ramone, "but then I

was scheduled for my yearly physical, so I told my family doctor about it." Ramone's doctor suspected something, although more than a physical exam and a recounting of symptoms was needed for a diagnosis. "So he sent me straight away to get a sonogram."

### Very Upfront

"I guess the radiologist immediately suspected something," Ramone continues, "because three days later I was in Dr. Paul Kardjian's office at AMP Urology."

Ramone says Kardjian was very upfront with him about what was wrong. Although swelling of a testicle can have other causes, in this case it was a symptom of cancer. But along with this bad news came a glimmer of hope.

Compared with other cancers, testicular cancer is rare as well as unusual, in that it is the most common cancer of young men, those between the ages of 15 and 34. Nevertheless, an estimated 8,590 men in the US will be diagnosed with the disease in 2012.

However, if caught early, testicular cancer is one of the most survivable cancers. Of the estimated 360 deaths expected from testicular cancer in 2012, most will be because the disease was found in an advanced stage and had spread to other parts of the body. The overall five-year survival rate is 95%.

But cancer survival statistics always should be treated with caution. Estimates found on websites such as cancer.net are based

on data from thousands of cases. Each individual has his or her own set of odds and risks—and his or her own unique story.

### A Thousand Things

"Your mind goes through a thousand different things with the diagnosis," says Ramone, reminding us that no matter how curable a cancer is, it's always a shock to hear the doctor say those words.

"It was a bad news, good news thing," Ramone continues. "Dr. Kardjian told me that I could be completely cured, but he needed to remove the testicle along with the tumor."

In other words, Ramone's best chance of becoming cancer free was to have an "orchiectomy," in which a cancerous testicle is removed in an outpatient procedure. (An orchiectomy is sometimes performed in cases of prostate cancer, to slow the production of testosterone, which prostate cancer needs in order to grow.)

"Knowing I had to have an orchiectomy was hard to take as a man," admits Ramone. "However, Dr. Kardjian clearly explained to me that losing one testicle would not affect me sexually, and as I'd had a vasectomy a year before, I wasn't concerned about my fertility."

Appearance, however, was a concern, and like many men, Ramone opted to have a prosthetic testicle replace the one he lost. "It's a small bag filled with saline," he explains. "It felt a little odd at first because it's a little more rigid than a real testicle, but I'm more comfortable with it now."

### Absolutely Certain

Recovery from an orchiectomy is relatively quick. Ramone says he was back, busy as ever, at his coffee shop within the week. At about the same time, he had a follow-up CT scan to see if the cancer had spread (it appeared to have not). His lab results said his tumor was a grade 1, which means its cells were not much different in appearance to normal cells.

Despite the cancer's low grade, it was recommended that Ramone receive a short course—no more than six weeks—of chemotherapy, to make absolutely certain the cancer had disappeared.

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Ramone knew that this recommendation was coming. "I did research after my diagnosis and learned that you are 90% certain all cancer is gone after an orchiectomy, but to get to 99%, chemotherapy is needed."

But Ramone wanted options. "I was scared of chemotherapy," he admits, "despite having the support of my friends and family." So an oncologist suggested a pioneering alternative to chemotherapy—a surgical procedure to examine his lymph system and track down any lymph nodes that contained cancer cells, especially so-called "sentinel" nodes into which tumors drain first.

### Bill of Health

"That was major surgery. I was a few days in Memorial Sloan-Kettering Cancer Center in New York City and about a month in recovery," says Ramone, "and I have a long scar from it." But, importantly, he now has a completely clean bill of health.

After the lymph node surgery, Ramone says his oncologist called him in for regular blood work and CT scan follow-ups every three months. But these check ups are being scheduled at longer intervals these days. "I need a CT scan just once a year and blood work every four months," he says.

And, at 42, Ramone is back to his busy self once more. "I'm full-time at my job again, and I'm working out and riding my bike just like I used to before the cancer. Although I don't have much free time!"

There's no word, however, on whether Ramone will be entering the Tour de France, to emulate America's most famous testicular cancer survivor, Lance Armstrong. Armstrong began the Lance Armstrong Foundation (livestrong.com)—a cancer research and survivor advocacy organization—in 1997 after his bout with aggressive cancer. It has since raised more than \$470 million.

### Early Detection = Better Outcome

Because discovering testicular cancer early makes it easier to treat, it's a good idea for men to perform a testicular self-examination every month. According to the American Cancer Society, men with specific risk factors should definitely make self-examination a routine. Risk factors include an undescended testicle, previous testicular cancer, or a family member with a history of the disease.

### Here's how you do a testicular self-exam:

- Do it during or after a bath or shower, when the skin of the scrotum is relaxed.
- Check one testicle at a time. Hold each between your thumb and fingers and roll it gently.
- Learn what feels normal, so you'll be able to tell when something is different. Note that a normal testicle is not smooth. Its epididymis (where sperm is stored) feels like a small, soft bump.
- Talk to a doctor immediately if you feel an unusual or hard lump, or if a testicle is swollen or enlarged.
- Note that cancer may not be the only reason for swelling or a lump. They can be caused by hydroceles (fluid retention) and varicoceles (varicose veins).

### In the office:

Your doctor may perform a similar examination during a routine physical. If you report an abnormality, or if your doctor finds one, other tests may be called for. These include an ultrasound (sound wave) scan of your testes, an imaging test such as an X-ray or CT scan, and/or a blood test to check whether certain hormone or protein levels are high, an indicator of cancer.

If cancer is suspected in a testicle, it may be removed (an operation called an "orchiectomy") to perform a biopsy, the only sure way to diagnose cancer.