Depression

It is estimated that approximately 15% to 25 % of people dealing with cancer will also experience depression. Carers, relatives and friends may also suffer from depression. For anyone who thinks they maybe experiencing depression it is important to inform a health professional. There are a range of effective treatments.

Where to Go For Help

If you have any concerns then please discuss them with your doctor or other health professionals.

Additional support :

- ***Impotence Australia:*** (counselling for sexual and relationship issues): 1800 800 614 www.impotenceaustralia.com.au
- ***Cancer Council:*** 1800 650 960 www.cancercouncil.com.au
- ***Beyond Blue:*** (the national depression initiative) www.beyondblue.org.au
- ***Andrology Australia:*** (information about male sexual conditions) www.andologyaustralia.org

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The content of this document has been compiled by the following experts using available medical evidence and should be used as guide only. Treatment advice specific to your situation should be sought from your doctor.

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Joint Project:

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- Impotence Australia
- Cancer Council
- Sexual Health Australia

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Testicular Cancer & Sexuality

Testicular Cancer

Being told you have cancer can be a terrible shock; there is much new information to absorb and many decisions to be made about treatment.
As well as the emotional turmoil you may have to cope with physical changes resulting from treatments (surgery, chemotherapy, radiotherapy etc.) such as erectile dysfunction, incontinence, exhaustion, weight gain or loss, nausea and pain. Some of these changes will be short-lived whilst others may be permanent.
So it's little wonder a diagnosis of testicular cancer and subsequent treatment can play havoc with your sex life! And it's easy to see how intimacy issues might be overlooked. However, for many people, maintaining sexual intimacy is an essential part of their recovery process. Regardless of your sexual preference or relationship status it's important not to let testicular cancer define who you are. And it will help to remember intimacy means being physically and emotionally close – it doesn't have to result in intercourse.
This booklet is designed to help you manage the physical and emotional effects of testicular cancer on your life. Addressing these issues early will help you (and your partner if you have one) adjust more quickly. It's very likely cancer, and its treatment, will impact on your sex life but it doesn't mean it's over, although it's true that sex may well be different following treatment.
You might feel like you are on a roller coaster and you will need to allow for fluctuating emotions and desires in response to these changes. If you have a partner it may help to remind each other about all the qualities that bind you such as humor, intelligence etc. Also remember you are not alone; should you want help there are organizations, like the Cancer Council and Impotence Australia, which can provide information and support to you (and your partner) at any stage of your treatment and recovery.

Fertility

As testicular cancer generally affects young men in their reproductive years it's vital to discuss with your doctor potential impact of treatment on your fertility.
Removal of one testis should have no lasting effect on your ability to have an erection or enjoy intercourse and you should still be fertile. However radiotherapy and chemotherapy can temporarily or permanently lower the sperm-production of the remaining testis. Many men with testicular cancer have a low sperm count even before treatment.
Removal of both testicles can cause some temporary and permanent side effects including infertility.
Whether you are going to have one or two testicles removed you should address all fertility concerns BEFORE commencing treatment. It's highly recommended that men store sperm samples for storage and possible use at a later date.
The idea of starting a family may be the last thing you are thinking of, especially if you are a teenager, but it's important to remember decisions tend to be made based on your current situation but situations may change!

Communication

Remember you are facing a crisis and good communication is more important than ever. It will help to talk with your partner, if you have one, as well as to other cancer survivors and professionals such as doctors, sex therapists and counsellors.
The best time to discuss the effects of testicular cancer treatments on your sex life is before you begin treatment. If you have a partner it's a good idea to visit the doctor together to explore treatment options and to talk about what you might expect. It's important to find the time and a safe place to talk. Take turns in expressing feelings, starting with the small stuff. Explore how you both feel about the changes you will experience so that you can share your anxieties and discuss how you can support each other and where else you can find help.
Of course, if you were experiencing problems before treatment it's likely the cancer will expose cracks in the relationship. However many people in loving relationships find themselves forging even greater bonds of intimacy and acceptance as they deal with the challenge cancer brings

Changes in Sex Life

1.Body Image.

Following testicular cancer surgery some men may start to become pre-occupied with body concerns such as the appearance of their scrotum (dressed and undressed), worries about losing the other testicle to cancer or cancer re-appearing elsewhere in their body.
Some men may choose, for cosmetic or psychological reasons, to have a testicular prosthesis implanted during surgery or at a later stage of treatment. These prostheses have no physiological function but may make you feel more confident. Whether you decide to opt for a testicular prosthesis or not depends on you and it's important to let your doctor know how you feel.
It's not uncommon for some men to feel that testicular cancer and the possible loss of one or both testicles as a challenge to their sense of masculinity. Fears may include feeling like you can't be a man any more. Testicular surgery probably won't affect your sexual ability but you may not feel as desirable. This is a normal psychological response that responds well counselling.

2. Loss of Libido.

Removal of one testicle should have no lasting effect on your ability to have an erection or enjoy intercourse. Your libido should not be adversely affected by treatment but the stress and anxiety associated with having cancer may well temporarily dampen sexual desire. If you are experiencing a major change in your desire levels your doctor can check to see if it is testosterone related and treat you accordingly. If you are taking hormone therapy you will need to monitor the health of your prostate.
If you have had both testicles removed there is likely to be a dramatic reduction in testosterone production. This may leave you with little or no desire and subsequent difficulty in getting and maintaining erections. Fortunately both of these conditions are treatable.

3. Anxiety

It's not unusual for men to experience severe anxiety associated with diagnosis and treatment of testicular cancer. High anxiety levels may lead to erection difficulties that can then increase anxiety levels even more. This condition is called performance anxiety and can be treated easily by a sex therapist.
As well as worrying about fertility many men may be concerned about sexual performance and desirability following treatment. This is normal. Once you have the all-clear from your doctor you should be able to go back to your normal level of sexual activity including masturbation. When resuming intimate relations it might be helpful to temporarily ban sexual intercourse and focus on getting to know each other's bodies again through cuddling, kissing, touching etc. Take time to rebuild confidence and to adapt to changes before moving on to intercourse.

If you experience any other changes then inform your doctor.

Single Men

Many men have to face cancer without the support of an intimate partner and this can raise some challenges for example when and how to tell a partner about your cancer and any sexual concerns you may have.
It is important to establish a caring relationship before you reveal too much, but do not wait too long! It's best to be frank and let your partner know what to expect before becoming sexually intimate – including the effects of surgery as well as the prospects of ongoing cancer care.
Gay men may discover their partners have a special understanding of the implications of testicular cancer – not only may they connect with what you are experiencing as a man but they may also experience specific fears about their own vulnerability.
If you need help in working out how to disclose the remember help is as close as a phone call to Impotence Australia, the Cancer Council and other counsellors.

Checking for Testicular Cancer:

Men aged between 20-40 are most at risk. If you had undescended testes, where one or both testes do not lower into the scrotum but stay within the abdomen for the first year of life, your risk may be higher.
A hard lump in the testes, as well as swelling and tenderness in the scrotum or testes may be symptoms. (Remember it is quite normal for one testis , usually the left, to hang lower than the other or for one to be larger or smaller than its neighbour).

All men should check themselves on a regular basis for any changes.

- When you are relaxed, for example after a warm bath or shower, support your scrotum in your hands and become familiar with the feel, size and shape of each testis. They should feel firm with a smooth surface.
- Gently roll a testis between your thumb and fingers to check for any lumps, swellings or tenderness. Check the other one.
- Feel along the epididymis at the back of the testis for any lumps or swelling.

If you have ANY doubts consult your doctor.