

#### TESTICULAR SELF-EXAMINATION Frequently-asked questions (FAQs) from The British Association of Urological Surgeons (BAUS)

The aim of the leaflet is to provide you with detailed information about how to perform regular testicular self-examination.

We have consulted specialist surgeons during its preparation, so it represents best practice in UK urology. You should use it in addition to any advice already given to you.

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## Introduction

It is generally accepted that monthly breast self-examination for women is an effective part of early breast cancer detection. For men, monthly selfexamination of the testicles, starting at puberty, is also an effective way of detecting testicular cancer early.

# When should I do self-examination?

It is best to carry out testicular self-examination after a warm bath or shower. Warmth relaxes your scrotum, making it easier to feel anything abnormal.



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### How should I do it?

- stand in front of a mirror
- check for any external swelling on the skin
- examine each testicle with both hands. Place your index and middle fingers under your testicle with your thumbs placed on top. Roll each testicle gently between your thumbs and fingers. You should not feel any pain when doing this. Do not be alarmed if your testicles are not exactly the same size. It is also normal for one testicle to hang lower than the other.
- find the epididymis, a soft tube-like structure behind the testicle that collects and carries sperm. If you are familiar with this structure, you will not mistake it for a suspicious lump. Cancerous lumps are usually found on the sides or on the front of the testicle. Lumps in the epididymis tend to be harmless cysts. These feel smooth, in contrast to cancers which feel firm and "craggy".

## What if I find an abnormality?

If you find a lump, ask to see your GP right away. The abnormality may not be cancer but could simply be an infection. If it is testicular cancer, survival rates are excellent if the cancer is identified early.

Free-floating lumps in the scrotum that are not attached to your testicle are not cancerous.

When in doubt, get it checked out by a health professional - if only for your peace of mind.

### **IMPORTANT – PLEASE NOTE**

Only a doctor can make a positive (or negative) diagnosis for you. If you find something unusual in your scrotum or your testicle feels abnormal, do not delay: see your GP or practice nurse as soon as possible

### What other abnormalities may be important?

- any new enlargement of a testicle
- significant loss of size in one of your testicles
- feeling of heaviness in your scrotum
- dull ache in your lower abdomen or groin
- sudden collection of fluid in your scrotum

- pain or discomfort in a testicle or in your scrotum
- enlargement or tenderness of your breasts

Anything out of the ordinary should be mentioned to your GP but the following are **not** usually signs of testicular cancer:

- a pimple, ingrown hair or rash on the skin of your scrotum
- a free-floating lump in your scrotum, not attached to anything
- a lump on your epididymis or tubes coming from the testicle that feels smooth, like an extra testicle
- pain or burning when you pass urine

## What sources have we used to prepare this leaflet?

This leaflet uses information from consensus panels and other evidencebased sources including:

- the Department of Health (England);
- the Cochrane Collaboration; and
- the National Institute for Health and Care Excellence (NICE).

#### It also follows style guidelines from:

- the Royal National Institute for Blind People (RNIB);
- the Information Standard;
- the Patient Information Forum; and
- the Plain English Campaign.

# DISCLAIMER

Whilst we have made every effort to give accurate information, there may still be errors or omissions in this leaflet. BAUS cannot accept responsibility for any loss from action taken (or not taken) as a result of this information.

**PLEASE NOTE:** the staff at BAUS are not medically trained, and are unable to answer questions about the information provided in this leaflet. If you have any questions, you should contact your Urologist, Specialist Nurse or GP in the first instance.