Detection of testicular cancer in men presenting with infertility
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Objectives: The increase in the incidence of testis cancer appears to coincide with signs of general decline in male reproductive health. It has been suggested that the development of testis cancer is etiologically and pathogenetically linked to other forms of gonadal dysfunction. Epidemiologic reports suggest that testicular cancer and impaired spermatogenesis may be biologically related. Infertility is one of the less common presenting features of testicular tumors. We sought to evaluate the histological and biochemical findings, and pregnancy outcome in patients presenting with infertility who were found to have incidentally discovered testicular tumors.

Design: Retrospective study

Materials and Methods: From 1983 to 1998, 7 patients with infertility were also diagnosed as having testicular cancer by a single examiner (AJT) at a tertiary care hospital. Of the seven patients presenting with primary or secondary infertility, two had orchialgia. Age, physical exam, histological findings, hormonal status, tumor markers, and pregnancy outcome results were recorded from the patients medical chart.

Results: The mean age was 30.7 years (range 25-34). All patients had testicular ultrasound evaluation, which demonstrated a hypoechoic or irregular intratesticular mass. The indications for the ultrasound were either testicular pain in 2 patients or a suspicious palpable mass in 5 patients. Two men had elevated serum FSH and LH levels, one of these had abnormally low serum testosterone level. Tumor markers were normal in all patients. In four patients the tumor was on the right side and in three, on the left. All tumors were considered pT1. The histological diagnoses were seminoma (n = 5), Leydig cell tumor (n = 1), and carcinoma in situ (n = 1). Of the 7 patients, 5 underwent adjuvant radiation therapy. Two patients had sperm cryopreserved. Follow up on fertility status was available in 6 cases. One patient has subsequently established pregnancy, and 5 did not achieve pregnancy after treatment for their cancer.

Conclusions: Patients presenting primarily with infertility may be at higher risk for testicular tumors. We suggest that men who present with infertility should be thoroughly investigated to rule out any other serious, concomitant disease along with their infertility.