Testicular Cancer Awareness and Screening Practices: A Systematic Review

Mohamad M. Saab, MSc, BSc, RN, Margaret Landers, PhD, MSc, BSc, RNT, RGN, and Josephine Hegarty, PhD, MSc, BSc, RNT, RGN

Purpose/Objectives: To critically appraise empirical evidence gathered from studies that (a) explored men’s knowledge, awareness, and attitudes toward testicular cancer (TC) and its screening; (b) addressed their testicular self-examination (TSE) practice; and/or (c) highlighted barriers and facilitators to this practice.

Data Sources: MEDLINE®, CINAHL®, and EMBASE®.

Data Synthesis: 25 articles met the inclusion criteria. Knowledge deficits regarding TC and its screening were seen. Participants who did not perform TSE often were uninformed about this practice. The majority of men perceived TC education as a positive step toward raising awareness about this malignancy.

Conclusions: Very few men were informed about TC and TSE. Future studies should include valid and reliable tools to assess TC knowledge and screening, address the means through which TC knowledge is delivered, explore the individual’s experience with TC screening, and focus on TC awareness and screening among minority groups.

Implications for Nursing: Although regular screening for TC is a controversial issue, nurses should encourage young men to seek medical attention in the event of discovering scrotal abnormalities.

Saab is a PhD candidate, Landers is a lecturer, and Hegarty is a professor, all in the Catherine McAuley School of Nursing and Midwifery at the University College of Cork in Ireland.

No financial relationships to disclose.

Saab, Landers, and Hegarty contributed to the conceptualization and design and manuscript preparation. Saab and Landers completed the data collection. Saab and Hegarty provided statistical support. Saab contributed to the analysis.

Saab can be reached at msaab@ucc.ie, with copy to editor at ONFEditor@ons.org.

Submitted March 2015. Accepted for publication June 7, 2015.

Key words: attitude; awareness; knowledge; practices; screening; testicular cancer

ONF, 43(1), E8–E23.

doi: 10.1188/16.ONF.E8-E23

Testicular cancer (TC) is a rare malignancy that constitutes 0.5% of all new cancer cases and 0.1% of all cancer deaths in the United States. About 1 in every 263 men will develop TC in their lifetime and 8,430 men will be diagnosed with TC in 2015 (National Cancer Institute, 2014a). Men aged 20–34 years are at the highest risk for TC, with a median age of 33 years at diagnosis. However, in the United States, TC has one of the highest cure rates, with a five-year survival rate of 95% (National Cancer Institute, 2014a).

TC screening in asymptomatic males continues to be a controversial issue because of a lack of empirical evidence that supports or discourages the practice (Law, 2004; National Cancer Institute, 2014b). The U.S. Preventive Services Task Force ([USPSTF], 2011) issued a statement against TC screening among asymptomatic males. This statement was based on a Cochrane review conducted by Ilic and Misso (2011) in which no evidence was found regarding the beneficial effect of TC screening on mortality. In addition, it was suggested that TC screening may cause unnecessary anxiety and increase the likelihood of having false-positive findings that would consequently expose men to invasive diagnostic tests. However, key cancer organizations, such as the American Cancer Society ([ACS], 2014c), recommend TC screening as a component of routine cancer-related physical examinations. In the United Kingdom, men are encouraged to be aware of the normal anatomy of their testes (Cancer Research UK, 2014) despite having no evidence to support weekly or monthly testicular self-examination (TSE). Similarly, the Irish Cancer Society (2014) offers infographic material to