

Chemotherapy for Early Testicular Cancer Non-Seminomatous Germ Cell Tumour

You have recently been diagnosed with 'early' testicular cancer.

This means it is likely the operation you had to remove your testicle (Orchidectomy) has cured the cancer; In addition, we could not see any spread of the cancer on your CT scan, which took pictures from your groin to the top of your lungs.

We know that around 50% of men the cancer will come back. The most common places for this to happen are in your lungs and the glands at the back of your abdomen. Bristol Testicular Cancer Service (BTCS) Team has assessed the risk of this happening to you and has recommended a short course of chemotherapy will make this risk much smaller.

Adjuvant Chemotherapy

Adjuvant Chemotherapy is drugs used to destroy cancer cells that may have spread around the body, but are too small to be seen on x-ray or CT scan.

For Non-Seminomatous Germ Cell Tumours we use one treatment of BEP.

BEP is made up of three chemotherapy drugs Bleomycin, Etoposide and Cisplatin. BEP can cause a series of side effects which are detailed in the Macmillan Information Sheet.

What will happen?

Tests

There is a potential risk of affecting your fertility, lungs and hearing. Prior to your chemotherapy, we will establish if you need to store your sperm and you will need to have two outpatient tests, a lung function test (to see how your breathing is) and a hearing test.

Chemotherapy

You will be admitted to the inpatient ward and stay for 2 nights/three days. The chemotherapy is given with lots of fluid as an intravenous drip (infusion) through a fine tube (cannula) in a vein in the back of the hand.

During your stay in hospital you will be asked to measure your urine and record it to see if your kidneys are working well. You will be given various tablets to help prevent some of the side effects.

After a week you will attend the chemotherapy day unit and have a top up of Bleomycin. This takes around 1-2 hours and will be repeated in the following week.

Once your treatment has been completed you will be seen 4-6 weeks after in the HNA Clinic.

Follow-up

When you have completed your treatment we will follow you up regularly in the outpatient clinic.

Chemotherapy for Early Testicular Cancer Non-Seminomatous Germ Cell Tumour

| MONTH | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|--|--|---|---|-----|---|----|---|-----|---|----|----|--------|
| YEAR 1 | HNA | | | TM | | ST | | TM | | | | TM |
| | TM | | | CXR | | | | CXR | | | | PE |
| | | | | PE | | | | PE | | | | CT/CXR |
| YEAR 2 | | | | TM | | | | TM | | | | TM |
| | | | | PE | | | | PE | | | | PE |
| | | | | | | | | | | | | CT/CXR |
| | | | | | | | | | | | | LE |
| YEAR 3 | | | | | | TM | | | | | | TM |
| | | | | | | PE | | | | | | PE |
| YEAR 4 | | | | | | TM | | | | | | TM |
| | | | | | | PE | | | | | | PE |
| YEAR 5 | | | | | | | | | | | | TM |
| | | | | | | | | | | | | CT/CXR |
| | | | | | | | | | | | | PE |
| | | | | | | | | | | | | LE |
| DIS-CHARGE | <p>On discharge, your GP will be given the following information:</p> <ul style="list-style-type: none"> • Details of your diagnosis • Treatment • Potential late effects • Signs and symptoms of recurrence <p>If you are worried about potential recurrence or a second testicular cancer, please contact the team who will be happy to see you.</p> | | | | | | | | | | | |
| TM | Tumour Markers (AFP, HCG, LDH) | | | | | | | | | | | |
| CXR | Chest X-ray | | | | | | | | | | | |
| PE | Physical examination (We encourage all testicular cancer patients to perform a monthly testicular self-examination) | | | | | | | | | | | |
| CT | CT scan of abdomen and pelvis | | | | | | | | | | | |
| LE | Blood test in Clinic: hormone profile, kidney function, liver function, full blood count, Lipids. At Your GP: Blood Pressure, Body Mass Index, Electrocardiogram. | | | | | | | | | | | |
| HNA | Holistic Needs Assessment Clinic | | | | | | | | | | | |
| ST | Survivorship Toolkit Day part of recovery package | | | | | | | | | | | |
| <p>If we find anything wrong with any of your tests we will contact you and ask you to come back to clinic for an earlier appointment. Regular attendance is very important!</p> | | | | | | | | | | | | |

ACHEMO-NSGCT03



This leaflet has been provided by the Bristol Testicular Cancer Service
www.uhbristol.nhs.uk/btcs
 Supporting men with Testicular Cancer in the South West



Funded by It's in the Bag Cancer Support
www.itsinthebag.org.uk