

Follow up of Testicular Tumours for How Long it is Necessary?

Kalaitzis Christos*

Department of Urology, University of Thrace, 68100 Alexandroupolis, Greece

*Corresponding author: Kalaitzis Christos, Department of Urology, University of Thrace, 68100 Alexandroupolis, Greece, Tel: +30 6973314539; E-mail: chkalaitzis@hotmail.com

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Introduction

Most testis tumors are diagnosed in early stages. Following orchiectomy excellent cure rates are achieved. In metastatic disease a multidisciplinary therapeutic approach is required and offers acceptable survival rates. The European Urological Association (EUA) recommends a follow-up up to 10 years for patient with non-metastatic testicular tumors (stage I). For patients with metastatic seminomatous and non-seminomatous disease the recommendation is an intensive follow-up for the first 5 years after surgical therapy and chemotherapy and thereafter physical examination, measurement of tumor markers and chest X-ray and, if indicated, CT abdomen, pelvis and chest once pro year without, however, specifying for how long [1], perhaps lifelong. In patient reported in the article [2] follow-up was limited to 5 years and that was clearly too short. A metastatic disease is a systemic disease. Late relapses are possible. The probability is between 1.3% and 7% [3-5]. Late relapses of non-seminomatous tumours are more frequent [3]. However, single case reports and small series did not allow for reliable conclusions regarding duration of follow-up, incidence and management of late relapses. Late relapses

after cisplatin-based chemotherapy are mostly chemo refractory and the overall prognosis is poor. For that reason resectable tumors should be removed surgically.

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