# Penile Cancer



## What is penile cancer?

Penile cancer is a very rare form of cancer and is only diagnosed in about 1 in every 100,000 men in the United States. It tends to be slow growing, so with early detection, the chances of complete recovery are excellent.

Cancer can develop anywhere on the shaft or body of the penis, but most cases occur on the foreskin or head (glans) and usually originate in the mucosal lining covering these parts or skin. About 95% of cases are squamous cell carcinoma, while melanoma and basal cell cancer are rare. Sarcomas may also develop rarely within the deeper tissues inside the penis.

## Who gets penile cancer?

Some risk factors for penile cancer include:

- Age over 60 years
- Men who are uncircumcised
- Poor genital hygiene
- Smoking
- Human papilloma virus (HPV) infection
- A history of genital warts
- Phimosis, which is an inability to retract the foreskin

Penile cancer almost never occurs in men who were circumcised as babies, and men circumcised in their teens also have some protection, because circumcision is thought to help guard against HPV infection. Circumcision in adulthood, however, does not appear to reduce the risk of penile cancer.

#### Symptoms associated with penile cancer

- Change in the skin or mucosal lining of the penis
- Wart-like growth or lesion that may or may not be painful
- Open sore that won't heal
- Reddish-colored rash
- Small, crusty bumps
- Flat bluish-brown growths

• Swelling at the end of the penis

- Persistent, smelly discharge under the foreskin
- Swollen lymph nodes in the groin if the cancer has spread

#### **Penile cancer diagnosis**

If a patient has symptoms that may signal penile cancer, the healthcare professional will ask questions about health, lifestyle, including smoking and drinking habits, and family medical history. The healthcare professional also will examine the patient's penis.

If the healthcare professional suspects penile cancer, one

or more of the following tests may be used to find out if the patient has cancer and if it has spread. These tests also may be used to find out if treatment is working.

• **Biopsy:** A biopsy usually is the first test performed to determine penile cancer. The type of procedure depends on the type of tissue or lesion.

• **Incisional biopsy:** A small part of abnormal tissue is removed. This procedure is used most often for lesions that

are larger, ulcerated, or that appear to have spread deep into the tissue.

• Excisional biopsy: The whole growth or lesion is removed. Usually, this type of biopsy is performed for small abnormal areas. If the lesion is on the foreskin, the healthcare professional may suggest circumcision.

### How is penile cancer diagnosed at the lab?

Tissue from a biopsy is sent to a pathology lab. There the tissue is prepared on glass slides and reviewed by a pathologist, a clinician who has specialized in the diagnosis of disease.

The pathologist looks for abnormal cellular changes under a microscope. He or she interprets the findings under the microscope in the context of the clinical information provided by the healthcare provider.

Penile cancer is a rare type of cancer in men, but it is highly curable if caught early.

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Some cases require additional special analysis to evaluate proteins, RNA and/or DNA.

The pathologist creates a pathology report with all the important findings, including critical information to help guide treatment and assess prognosis, which is sent back to the healthcare provider.

### The next step

The healthcare professional then will order tests to determine the stage of the penile cancer, to see how much it has grown, or if it has spread throughout the body.

The cancer can be cured if it is only present in the penis and has not spread to the nearby lymph nodes in the groin. It is much more difficult to cure once it has spread.

- **Stage 1:** This is early cancer that is only present on the surface of the glans and foreskin.
- **Stage 2:** The cancer has grown, but still has not spread beyond the penis.
- **Stage 3:** The cancer has spread to lymph nodes in the groin.
- **Stage 4:** The cancer has spread to lymph nodes and other areas of the body.

Determining the cancer stage helps the healthcare professional determine the best treatment.

### **Treatment and care**

Treatment will depend on factors such as age, disease stage, and health status. Whenever possible, healthcare professionals will choose a treatment that causes least damage to the penis, and minimal interference with sex life and urination. Most cases will require circumcision, and this may be the only treatment needed if the cancer just involves the foreskin. Turmors that are caught very early may respond to laser therapy and cryotherapy. However, when tumors are larger, surgery is needed to remove them. And if the tumor extends deeper into the penis, treatment may involve amputation of some, or all, of the penile shaft. Affected lymph nodes may also be surgically removed. Radiotherapy and chemotherapy may also be used in some cases.

Regular check-ups are important for the patient following cancer treatment. Other tests, such as a CT scan, chest X-ray, or ultrasound scan, may also be needed periodically to monitor for any condition changes, and check for spread of the cancer.

Because most cases of penile cancer begin on the skin, they are caught early. When cases are diagnosed early, they can be removed with little or no damage to the penis.

#### Learn more

www.cancer.org/cancer/penilecancer/detailedguide/ index

www.nlm.nih.gov/medlineplus/ency/article/001276. htm

www.webmd.com/cancer/tc/ncicdr0000438960general-information-about-penile-cancer

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