



Mustafa Burak Hoşcan  
Başkent University, Faculty of Medicine, Department of Urology, Alanya Research and Practice Center, Alanya, Antalya, Türkiye

#### To the editor:

We appreciate the authors for their study that reports about the outcomes of testis sparing surgery. The study has clearly shown that testis sparing surgery is a treatment option in selected cases with the advantages of fertility preservation and avoiding the need for long-term hormone replacement therapy [1]. We would like to comment on some issues regarding the results of their study and draw further attention.

The improvement in diagnostic techniques, especially better ultrasonographic resolution, and its wide spread use in clinical practice, has led to an increase in detection of nonpalpable testicular masses and studies show that approximately 80% of nonpalpable masses are benign [2,3].

Currently, radical orchiectomy is the standard of care for the surgical management of testicular masses. European Association of Urology Guidelines on Testicular Cancer reports that although organ-sparing surgery is not indicated in the presence of non-tumoural contralateral testis, it can be attempted in special cases with all the necessary precautions [4]. Guidelines also reports that in synchronous bilateral testicular tumours, metachronous contralateral tumours, or in a tumour in a solitary testis with normal pre-operative testosterone levels, organ preserving surgery can be performed when the tumour volume is less than 30% of the testicular volume and surgical rules are respected [4].

Therefore, testis sparing surgery has been proposed as an alternative treatment in selected cases for especially small testicular masses, in order to spare as much healthy parenchyma as possible, thus allowing to reduce the risk of hormonal failure and to preserve fertility and avoiding the need for long-term hormone replacement therapy.

As the authors stated and confirmed by a very recent study [2] testis sparing surgery for the conservative management of small testicular masses is a safe and effective procedure, with promising oncological and functional results, and could be a valid alternative to radical orchiectomy in selected cases.

#### References

1. Özcan MF, Gök B, Arslan ME, Altinova S, Akbulut Z, Atmaca AF. Outcomes of testis sparing surgery. J Clin Anal Med 2013;4(5):360-2.
2. Gentile G, Brunocilla E, Franceschelli A, Schiavina R, Pultrone C, Borghesi M et al. Can testis-sparing surgery for small testicular masses be considered a valid alternative to radical orchiectomy? A prospective single-center study. Clin Genitourin Cancer 2013;11(4):522-6.
3. Carmignani L, Gadda F, Gazzano G, Nerva F, Mancini M, Ferruti M et al. High incidence of benign testicular neoplasm diagnosed by ultrasound. J Urol 2003;170:1783-6.
4. Albers P, Albrecht W, Algaba F, Bokemeyer C, Cohn-Cedermark G, Fizazi K, Horwich A, Laguna MP. Guidelines on Testicular Cancer. In: EAU; Milan 2013.

#### How to cite this article:

Hoscan MB. Testis Sparing Surgery. J Clin Anal Med 2015; DOI: 10.4328/JCAM.2081.