

# Long-term results from testicular cancer treatment are positive, study shows

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A new study shows that by combining different chemotherapy drugs, testicular cancer remains highly treatable and often curable, even after first-line treatment fails. .

The recent study [published](#) in the prestigious *Journal of Clinical Oncology* was led by Professor Jack Gleeson, Associate Professor at Cancer Research at University College Cork (UCC) and the Medical Oncology Department at Cork University Hospital, and was conducted during his time at Memorial Sloan Kettering Cancer Center in New York.

Over 100 patients were followed up over almost 10 years to examine how truly effective this combination of treatment was. The study looked at the response rate from the [chemotherapy](#) combination and how long people survived. This study also examined the effectiveness of this combination for patients with what are called unfavorable risk factors. Reassuringly, this treatment combination was shown to be very effective with high response rates (nearly 80%). There was no significant drop off in survival in the longer term, and the regimen was almost equally effective in those with or without unfavorable risk factors.

The study confirms prior results and highlights the overall positive long-term outcomes with this chemotherapy combination for men with recurrent [testicular cancer](#).

Professor Gleeson encourages men, especially young men, to be proactive about their health. Men should routinely self-examine for unusual masses or [lumps](#) in their [testicles](#) and not be afraid to get any new lump checked out.

"Studies like this one show that chemotherapy combinations are effective in the treatment of testicular cancer. Detecting cancer early significantly increases the chances of successful treatment and recovery," he said.

**More information:** Jack P. Gleeson et al, Paclitaxel, Ifosfamide, and Cisplatin as Initial Salvage Chemotherapy for Germ Cell Tumors: Long-

Term Follow-Up and Outcomes for Favorable- and Unfavorable-Risk Disease, *Journal of Clinical Oncology* (2024). [DOI: 10.1200/JCO.23.02542](https://doi.org/10.1200/JCO.23.02542)

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