

Although testicular tumors represent only 1% of all malignancies that affect the male population, but in the age group of 20-44 years reaching their share of 23%. They represent the most frequent tumor of the white population in that age group. Orchiectomy is critical both in diagnosis and in treatment of testicular tumors. It is almost impossible to examine the patient merely from the point of view of the consequences of radical orchiectomy, since only a small group of patients will experience only this surgery. Almost an integral part of the subsequent therapy is adjuvant radiotherapy and chemotherapy (which significantly affect the patient). Furthermore, the cancer itself has a negative effect on the organism. For these reasons, the quality of life of patients is seen not only in terms of radical orchiectomy, but also in terms of the quality of life of patients after orchiectomy. We have the quality of life of patients after orchiectomy look of a comprehensive approach to testicular tumors. We must consider the consequences of other therapeutic modalities.

The group of patients who survived testicular cancer (in English - testicular - cancer survivors TCS) are an interesting group to monitor the quality of life for several reasons. Treatment of testicular tumors is 90% successful and consequently have the same TCS predicted life expectancy as well as old men from the healthy population. TCS also have some specific issues on issues of fertility and sexual life because they are particularly sensitive to this issue.