

Male genital self-examination

Any male 15 or older should practice monthly testicular self-exam. The test takes only a few minutes and is easy to do. Most lumps are not cancerous, but any lump should be immediately checked by a physician.

The best time to check yourself is in the shower or after a warm bath. Fingers glide over soapy skin making it easier to concentrate on the texture underneath. The heat causes the skin to relax making the exam easier.

Before you begin a genital self-examination, it is important to understand the words that describe the genital portion of your body. The top or head of your penis contains the urinary opening (urethra). The head may be covered with a foreskin if you are not circumcised. Moving down past the head is the shaft of your penis. The very bottom of the shaft is called the base. The base of the penis is the area where your pubic hair begins. The underside of the penis refers to the side you can't see when looking down. Underneath your penis is the scrotum, a sac enclosing the testicles, which hangs slightly away from your body.

Once undressed, hold your penis in your hand. Stand in front of the mirror and look for any swelling on the skin or the scrotum. Examine the head of the penis from the urinary opening down to where it extends out a little just above the shaft. If you are not circumcised, pull down the foreskin to examine the head. Look over the entire head of the penis in a clockwise motion. Carefully look for any bumps, sores, warts, or blisters on the skin. Sometimes the bumps or blisters may be red; at other times they may be light-colored. They may even look like pimples. Bumps and blisters sometimes develop into open sores. If you see anything that resembles a sore, blister, bump, or unusual drainage, see your physician.

Once you've examined the head of the penis, move down the shaft and look for the same signs or symptoms. Then go on to the base. At the base, try to separate your pubic hair with your fingers so you can get a good look at the skin underneath. After careful examination, move on to the underside of the penis. This area is often difficult to see, and sometimes gets overlooked. It is very important that you check this part of your body.

You may want to use a mirror to be sure that you've seen the entire underside. The mirror may also be helpful as you move on to the scrotum.

Handling each testicle gently, examine the scrotum for the same signs or symptoms. Also, be alert to any lump, swelling, or soreness in the testicle. Examine each testicle gently with both hands. The index and middle fingers should be placed underneath the testicle with the thumbs placed on top. Roll the testicle gently between the thumbs and fingers. One testicle may be slightly larger than the other. This is normal. The epididymis is a cord-like structure on the top and back of the testicles that stores and transports sperm. Do not confuse the epididymis with an abnormal lump. Feel for any abnormal, possibly even painless, lumps - about the size of a pea - on the front or side of the testicle.

1. Support the testicles in one hand and feel each with the other hand.
2. Gently roll each testicle between the thumb and the fingers. You'll feel a smooth, tubular structure (epididymis) that covers the front, back, and bottom of each testicle. Gently separate this tube from the testicle with your finger to examine the testicle itself.
3. Feel for any swelling or lumps.
4. If you detect swelling or lumps, see a physician without delay.

Be aware that the symptoms of some diseases are sometimes so mild that you might not notice them, or the symptoms might seem to disappear. However, you are still infected and could spread disease to other. Symptoms may not appear for weeks, even months after a sexual encounter. So if you're sexually active, be sure to see your physician and get an examination on a regular basis. Between physician check-ups, examine yourself periodically for early warning signs. If you suspect anything, don't wait. See your physician.

Testing for Prostate Cancer

Medical organizations are divided on the issue of screening for prostate cancer. The U.S. Preventive Services Task Force (USPSTF) advises against routine screening but urges "informed decision making," adding that patients who request screening should be given objective information about early detection and potential benefits and risks of treatment. The Centers for Disease Control and Prevention (CDC) supports the USPSTF recommendations. The ACS and the American Urological Association (AUA) recommend that men who have at least a 10-year life expectancy have a digital rectal examination and prostate-specific antigen test annually, starting at age 50, and that information be provided to patients regarding benefits and risks of intervention. They also recommend that screening start at a younger age for men of African descent and for men with a family history of prostate cancer; the AUA suggests that these high-risk groups begin testing at age 40.