

Penile Cancer

Information for people with cancer

This information should not be used to diagnose yourself or in place of a doctor's care.

Penile cancer starts in the penis. The penis is an external sexual organ. It is part of the urinary system.

Penile cancer may also be called cancer of the penis.

Image of the penis:

visualsonline.cancer.gov/retrieve.cfm?imageid=9995&dpi=72&fileformat=jpg

Diagnosis and Staging

What are the signs and symptoms of penile cancer?

These are some of the symptoms of penile cancer:

- Sore or ulcer on the tip of your penis that does not heal.
- Lump in your groin (the area where the top of your legs join your body).
- Discharge from your penis. This may cause irritation and itching.
- Bleeding when you get an erection.

If you have any signs or symptoms that you are worried about, please talk to your family doctor or nurse practitioner.

How is penile cancer diagnosed?

Tests that may help diagnose penile cancer include:

- **Physical exam**
- **Biopsy:** This is when a doctor takes a sample of your tissue. A specialty doctor (pathologist) then examines the tissue for cancer.
- **Circumcision (foreskin is removed):** You may need this to remove the cancer or to biopsy the cancer.

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- **Chest x-ray:** to see if the cancer has spread.
- **CT (computed tomography) scan of your pelvis:** to see if the cancer has spread.

For more information on tests used to diagnose cancer, see our Screening and Diagnosis pathfinder: bccancer.libguides.com/pathfinder-screening

What are the types of penile cancer?

- 95% (95 out of 100) of penile cancers are squamous cell carcinomas. These cancers start in the squamous cells, which are in the skin of the penis and the head of the penis.
- Rare types of penile cancers include melanomas and sarcomas.

What are the stages of penile cancer?

Staging describes the cancer. Staging is based on how much cancer is in the body, where it was first diagnosed, if the cancer has spread and where it has spread to.

The stage of the cancer can help your health care team plan your treatment. It can also tell them how your cancer might respond to treatment and the chance that your cancer may come back (recur).

Penile cancer staging:

- **Stage 0:** Carcinoma in-situ. The cancer is only in the top layers of the skin of the penis.
- **Stage 1:** The cancer has spread to the connective tissue just under the skin of the penis. It has not spread to any lymph nodes or anywhere else in the body.
- **Stage 2:** The cancer has spread to one or more of these places:
 - Blood or lymph vessels.
 - Internal chambers of the penis.
 - Urethra (the tube that your pee comes out of).

Cancer has not spread to any lymph nodes or anywhere else in the body.

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- **Stage 3:** The cancer has spread to the urethra or prostate (the gland that produces a fluid which makes up a large portion of semen).
- **Stage 4:** The cancer has spread to any of the following:
 - Nearby structures, other than the urethra or prostate.
 - Lymph nodes in the groin (inguinal lymph nodes).
 - Lymph nodes in the pelvis (pelvic lymph nodes).
 - Other parts of your body such as the liver or lungs. This is called distant metastasis.

For more information on staging, see our About Cancer page:

bccancer.bc.ca/health-info/types-of-cancer/about-cancer

What are the grades of penile cancer?

The grade of the cancer describes how different the cancer cells look from normal cells and how fast the cancer cells are growing. A pathologist will give the cancer a grade after looking at the cells under a microscope.

Penile cancer can be grade 1, 2, 3 or 4. The lower the number, the lower the grade.

Low grade: cells are abnormal but look a lot like normal cells. Low grade cancers usually grow slowly and are less likely to spread.

High grade: cells are abnormal and do not look like normal cells. High grade cancers usually grow more quickly and are more likely to spread.

The grade of the cancer can help your health care team plan your treatment.

Treatment

What is the treatment for penile cancer?

Cancer treatment may be different for each person. It depends on your particular cancer. Your treatment may be different from what is listed here.

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Treatment for penile cancer depends on the stage of the cancer.

Treatment by Stage

Stage 0

- A doctor cuts out the cancer from the penis.
- In some cases, the cancer can be treated with laser therapy. A laser is used to kill the cancer.

Stage 1 and early Stage 2

- If the cancer is only in the foreskin, you will need a circumcision.
- If the cancer has spread further than the foreskin, you may need a partial penectomy (surgery to remove part of your penis).
- Radiation therapy may be an option to preserve your penis. This treatment uses high energy x-rays to kill or shrink the cancer.
- Brachytherapy (radioactive seeds are implanted near the cancer) may be another option to preserve your penis.

Stage 2 and early Stage 3

- Partial penectomy or radical penectomy (surgery to remove the whole penis).
- If you have a medical condition that makes it unsafe for you to have surgery, or you do not wish to have surgery, radiation therapy to the pelvis is another treatment option.

Stage 3 and Stage 4

- Some people may need exenterative surgery. This is a surgery that removes all organs from your pelvic cavity.
- If surgery is not possible, treatment includes palliative radiation therapy and/or systemic therapy (chemotherapy). These treatments are used to help control symptoms but will not cure the cancer.

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For more information about radiation therapy:

bccancer.bc.ca/our-services/treatments/radiation-therapy

For more information about systemic therapy:

[bccancer.bc.ca/our-services/treatments/systemic-therapy-\(chemotherapy\)](http://bccancer.bc.ca/our-services/treatments/systemic-therapy-(chemotherapy))

What is the follow-up after treatment?

- Follow-up testing and appointments are based on your type of cancer.
- Guidelines for follow-up after treatment are on our website: www.bccancer.bc.ca/health-professionals/clinical-resources/cancer-management-manual/genitourinary/miscellaneous-genitourinary-tumours#Penis
- These are guidelines written for your doctor, nurse practitioner or specialist. You can look at them to see what appointments and tests you might need after treatment.
- After treatment, you may return to the care of your family doctor or specialist for regular follow-up. If you do not have a family doctor, please talk to your BC Cancer health care team.
- For the first year after treatment, you may need to see your doctor once each month. In the second year after treatment, you should see your doctor every 3 months. In year 3, see your doctor every 6 months. In year 4 and 5 after treatment, see your doctor every 6 months.
- The BC Cancer Life after Cancer page has information on issues that cancer survivors may face: bccancer.bc.ca/lifeaftercancer

More Information

What causes penile cancer and who gets it?

Penile cancer is rare in Canada and the United States.

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These are the risk factors for this cancer. Not all of these risk factors may cause this cancer, but they may help the cancer start growing.

- Being between the ages of 50 and 70 years old.
- Not being circumcised.
- Not regularly cleaning under your foreskin (loose skin covering the head of an uncircumcised penis).
- Smoking, now or in the past.
- 30 or more sexual partners.
- You have had
 - A rash on your penis.
 - A sexually transmitted infection (STI) such as Human Papillomavirus (HPV) or genital warts.

Statistics

- B.C.: www.bccancer.bc.ca/health-info/disease-system-statistics/statistics-by-cancer-type
- Canada: www.cancer.ca/en/cancer-information/cancer-type/penile/statistics/?region=bc

Note: Available statistics do not have information about the inclusion of transgender and gender diverse participants. It is unknown how these statistics apply to transgender and gender diverse people. Patients are advised to speak with their primary care provider or specialists about their individual considerations and recommendations.

Can I help prevent penile cancer?

Here are some things you can do to lower your risk of penile cancer:

- **Wash regularly:** If you are uncircumcised, you should pull back your foreskin and wash regularly. This helps wash off the smegma (a substance made up of dead skin cells, bacteria and oil from your skin). Smegma can irritate the skin of your penis.

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- **Practice safe sex:** Use a condom every time you have vaginal, anal or oral sex.
- **Get regular sexual health screening:** Sexual health screening is important for people who are sexually active.
- **Get vaccinated against HPV (human papillomavirus):** It is best to get the HPV vaccine before becoming sexually active. However, people who are already sexually active may still benefit from the vaccine. There is more information on the Immunize BC website: immunizebc.ca/diseases-vaccinations/hpv
- **Stop smoking.** Do not smoke and try not to be around tobacco and cigarette smoke. Even if you have been using tobacco for many years, quitting will lower your risk of getting cancer. Support is available to help you quit smoking.
 - Visit the BC Cancer Tobacco and Cancer Prevention page: www.bccancer.bc.ca/health-info/prevention/tobacco

Is there screening for penile cancer?

There is no screening program for this type of cancer.

Where can I find more information?

- If you have questions about penile cancer, please talk to your health care team.
- Our librarians can help you find the information you need. Visit our Library page: bccancer.bc.ca/our-services/services/library
- BC Cancer Library Penile Cancer pathfinder: bccancer.libguides.com/pathfinder-penile
- Managing Your Symptoms: www.bccancer.bc.ca/health-info/coping-with-cancer/managing-symptoms-side-effects
- Emotional Support: www.bccancer.bc.ca/health-info/coping-with-cancer/emotional-support