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Published on *fina.org* - Official FINA website (<https://www.fina.org>)

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## Nathan Adrian discusses his first three months with testicular cancer

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The National Cancer Institute estimated that 9,310 men in the U.S. would be diagnosed with testicular cancer in 2018. Nathan Adrian never thought he would be one of them. The University of California graduate known for his humble grace and massive frame (198 cm/6ft 6ins, 100 kg/220 pounds) had already made the U.S. rosters for the 2019 FINA World Championships in South Korea and the 2019 Pan American Games in Peru. In mid-September, he married Hallie Ivester, a former Stanford diver. The five-times Olympic champion was training to make his fourth Olympic team, for Tokyo 2020.

Then, one day in late winter, Adrian bumped into something at home. It was a random and forgettable moment. But his body responded oddly, and the next thing he knew, he was being scanned, tested, and diagnosed with testicular cancer.

In January, Adrian broke the news on social media, writing that he had “*already started treatment and the prognosis is good.*

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Since then, a lot has happened to the 30-year-old sprinter, but he hadn't discussed many details until we reached him by phone on March 13 at his home in Oakland, California.

He said he had returned to "full training mode" with Dave Durden, his coach since 2008, at Adrian's alma mater in Berkeley.

"This week and last week were the first weeks I felt like it was the right thing to do," the 2012 Olympic 100m freestyle gold medalist said.



But Adrian had also lost 10 to 15 pounds, missed two winter meets, and acknowledged that “*relative to where I was and*

*relative to where I need to be, I’m certainly behind.*”

Yet if his health remains good, he said he still plans to compete at Worlds in July, Pan Ams in August, and – ideally – Tokyo the following summer.



**“There was more pain than there should have been”**

How long had you known you had testicular cancer before you told the public on January 24, 2019, via Twitter?

*We knew in December, a tiny bit before Christmas. But the thing is, with this, you really don’t know anything until you get*

*very slow-growing cancer with a tiny chance of recurrence.' But it wasn't. My pathology was more aggressive, so we chose*

*to do the second surgery which got rid of some lymph nodes. A couple of those lymph nodes were positive [for cancer], so*

*it's really good we did that. If many-many more lymph nodes were involved, the assumption would be that it spread and I'd*

*probably need to do chemo. But right now, given all the information, doctors' recommendations, and a basic understanding*

*of probabilities and outcomes, the right thing to do is to be under surveillance every three months.*

Was your first symptom visual? Pain? Both?

*I just kind of hit myself awkwardly and there was more pain than there should have been. I can't remember exactly what*

*happened. I think I turned around a corner awkwardly at home and kind of grazed it or something. I thought, 'That's weird.'*

*did, so then it was like, 'Something's obviously wrong.'*

How quickly did you go to the doctor's office?

*I think it was three weeks from the first day that I felt something,*

After the initial tests, were you worried about getting the results?

*Yeah. I think any time a doctor's like, 'Get this checked out,' part of you is concerned no matter what. My test results came*

*back and, for testicular cancer, if there's a mass that's vascularised, in almost every case, that means you have cancer. So*

*you see the urologist and try to get the tumour removed as soon as possible.*

So the first surgery was to get rid of the tumour. The second surgery was to remove lymph nodes?

*Correct. The second one is called retroperitoneal lymph node dissection, but we did it laparoscopically so there's an L in*

*better.*

Testicular cancer has three stages of severity. What stage did you have?

*Stage two. After the tumour removal, I was clinically stage one because none of my lymph nodes were classified as*

*cancerous on a CT scan, but now we know better. I was pathologically a stage two.*

So was the second surgery just a precaution?

*It was, but we also knew that my pathology was one of the more aggressive ones. I think there was a 50-50 chance of*

*recurrence or something, and I was like, 'I don't really like that.' So to get rid of those lymph nodes cut that [risk] down*

*significantly.*

**“My coordination is awful”**

Are you currently doing any other treatment besides surveillance?

*No, surveillance is it, hopefully. If surveillance detects a recurrence, then we have to go in and do the traditional chemo.*

When were you able to swim again?

*I got in the water after the first surgery. But after the second surgery, I had to take time off to let my incisions heal. Then I*

Have you thought about when you might be able to race again?

*Hopefully in April. That can change, but that would be the hopeful time.*

It seems like every swimmer has a different relationship with the water. How would you characterise yours? And given what you know about your body now, do you think the relationship has changed?

My relationship with the water is one of learning, constantly trying to learn. In some ways, I'm kind of re-learning how to swim. I have five locations in my abdomen where doctors had to cut through muscle, fascia, all that stuff. My coordination is awful. My muscle firing patterns are not where they need to be. The connectivity from my kick to my arms isn't where it

*needs to be. That was a major asset for me before this, and now I have to work to get it back. From the outside, I might look*

*largely the same, but it feels very, very different.*

Can you go into greater detail about how it feels?

*My psoas has been tight since the day after surgery. It's one of your hip flexor muscles. My abs have this protective tone*

*because we just cut through them. When you injure yourself, your body naturally reacts by tightening it up. I'm still*

*swimming the normal sets, still trying to swim the rates of my team-mates, but that's what I'm having to fight. It's probably*

Which phase seems most difficult now? Starts? Turns?

*Turns, trying to be explosive – that's definitely where it took away the most. You have to transfer all the force through your*

*core and if half of it isn't working, you develop all sorts of weird compensation patterns. I don't think I've done a full-on*

*start yet. But even a running dive feels weird because I haven't run for a while, so it hurts. Then, keeping your core super-*

*super tight and super-super stable through that entire movement is not second nature to me anymore. Before, I wouldn't*

*think about it. Now I have to be much more cognisant about each and every movement to re-learn it – which is almost like*

*an opportunity. Over time, you can get stuck in your habits, or bad habits. Hopefully as we create new habits, we can make*

*better movement patterns.*

**“I love waking up every morning”**

Has your coach been perceptive to these changes or is he just letting you do what you need to do for now?

*He's doing a great job making allocations for me when and where I need to take them. Even today, in the water, Dave*

*[Durden] was talking to me about lengthening my stroke, making it a little bigger – and that's a direct result of what*

*surgery did. Your whole body's connected, so if my abs and the entire left side of my body are basically tied down, that lack*

*of flexibility makes its way all the way up to my shoulder. I'm definitely spending extra time stretching and doing yoga and*

*all that good stuff to try to regain flexibility and pliability.*

Do you feel mentally sharp?

*I am working this slowly because it's a 16-month process until I need to be really-really fast again. When you've only been in the water for four weeks because you had to treat cancer, you have to be fair to yourself. And I'm not going to sugar-coat this. I have found times when I'm emotionally very drained. I'll [react to] certain things that wouldn't normally bug me or things that I should have more emotional resilience for. It's just not there yet because I had a traumatic experience and I have to give myself time to heal. The great thing is that swimming, for me, IS healing. I love my job. I love waking up every morning. I love going to the pool, even if I have to be there at 5:40 to set up lane lines. That's what's so incredible; it is part of my healing process. But if I were to expect myself to get back to world-class times and world-class shape in four to six*

*can't have an adversarial relationship with water – because the water will always win.*

Before the diagnosis, what did you think would be your biggest challenge to make your fourth Olympic team, in Tokyo 2020?

At that point, we were 18 months out and I just had to make sure that I was getting in the best shape possible, then ramping up the emotional investment over that time. We were on a really good track. I was excited about where I was, especially coming off of my wedding. In late November, I went to Greensboro, North Carolina, and surprised myself. I had only been training for eight weeks after my wedding and was very happy with my times. [Note: Adrian won the 50m free in 21.94 seconds, 0.57 seconds off his personal best. He placed second in the 100 free in 48.59, and made the cut for the US Olympic Trials in both events.] Honestly, it was to stay healthy and have a good balance in my life.

**“Great! That’s what I want to hear!”**

Now you’re among a small circle of extraordinary athletes who have faced testicular cancer. Did the most famous one contact you?

*Lance Armstrong did text me. He was very nice to reach out and do that.*

What did he say?

*Just thinking about you, be strong, you’ll get through this.*

Also, two weeks before the 2008 US Olympic Swimming Trials, Eric Shanteau learned that he had testicular cancer. He made the tough decision to delay surgery until after Beijing. Four years later, you won Olympic gold together in the 4x100 medley relay in London. Have you two spoken?

*I spoke to Eric at length. He was very helpful. Hearing his experience – especially from someone who was the same level as*

*me [athletically] was REALLY important because there is not a whole lot you can find online about that. That's what I was*

*looking for. He also gave me peace of mind. He had one of his best seasons shortly after he had his orchiectomy [tumour*

*removal]. I was like, 'Great! That's what I want to hear!' But even beyond Eric, so much of the reason I went public with*

*this is that so many people get this diagnosis and they feel so incredibly alone. Most blogs and stories of others who have*

*gone through this end with either, 'Hey, I just had surgery and I'm all good' or 'I had chemo and now I'm all good,' and to*

*see that is important because it gives you an end point. Whereas when you're in the middle of it, you're watching the clock*

*yours up a few days because you have this thing growing inside you that is uncontrollable. It's a horrible feeling. Or you're*

*thinking about family-planning issues that arise if you ever have to do chemo. And, unfortunately, you have time to think*

*about all that. As fast as the medical system moved with me, the minute after I had the ultrasound I would have loved to*

*have dropped everything and said, 'Cut me open and get this thing out of me.'*

**“How important it is to recognise that you have limited time”**

Then, this February, Ethan Gogulski, a promising backstroker at Texas A&M, was diagnosed with testicular cancer.

*Right. I talked to him, actually. I was ahead of him by a couple months, so I kind of knew where he was at.*

What did you say to Ethan?

*Similar to what Eric had offered me, 'Hey if you have any questions, feel free to reach out.' Also, like Eric conveyed to me,*

*'I understand how much work you put into your season to get ready to swim fast. This just throws it off a little. There's still*

*time.' He's a freshman. 'You will have plenty of time to make sure to get really fast times and score at NCAAs.' Just keeping*

*everything in perspective.*

Last question: I don't know if you've thought about this, but what have you learned about yourself in the last couple of months?

*Oh, I'm still learning.*

Any new realisations at least?

*How important it is to recognise that you have limited time. Just a disclaimer, no doctor ever told me that the prognosis was*

*bad. Every one of them was very straightforward in saying you have anywhere from a 97-99% chance of a five-year survival*

*rate and, beyond that, most people don't have any side effects. I'm very thankful for that. But even so, you still have to sit*

*down, talk to a doctor, and as they're looking at you, hear them say, 'You have cancer.' That makes your mind go to all*

*sorts of crazy places. Now I have an understanding of how delicate life is – or a better understanding than I did six months*

*ago. And I feel blessed because many people don't have the opportunity to come to that understanding: that we definitely*

*with my mom, for instance, was really special to me. She and my dad came down [from Washington] and stayed at my*

*house. I cannot remember the last time we spent so much time together. It wasn't like we had to run around and do a million*

*different errands. It was like, no, we get to really enjoy each other's company – whether it was re-living memories or just*

*sitting on the same couch and reading a book together. That meant a lot to me.*

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