Your Diagnosis

After completing a thorough lab analysis of your recent biopsy, a specialized doctor called a pathologist reported a diagnosis of bladder cancer, or cancer that begins in the bladder. Bladder cancer occurs more than twice as often in men than women, and most frequently in Caucasians. The risk of developing the condition increases greatly with age, especially after the age of 55.

About the Condition

The bladder is a stretchable oval chamber in the lower abdomen that is part of the urinary tract, which also includes the kidneys, ureters and urethra. Its main purpose is to store urine. The kidneys remove extra water and wastes from the blood and convert them to urine. The ureters are narrow tubes that transport urine from the kidneys to the bladder. Urine is emptied out of the body from the bladder through the urethra.

Cancer occurs when cells in the bladder have lost the ability to develop and die in their normal manner. These abnormal cells form a growth, or tumor, which can be benign (non-cancerous) or malignant (cancerous). Benign tumors do not have the ability to spread to other sites in the body, or metastasize. Bladder cancer cells, however, have the potential to invade locally through the bladder wall or to metastasize. More than 90% of bladder cancers form from the lining of the bladder (urothelium) and are called urothelial cell carcinoma.

Exposure to cancer-causing agents (carcinogens) contributes to the growth of bladder cancer including cigarette smoke, which is estimated to cause about half of all cases. Other risk factors include working in certain industries and having chronic bladder infections, urinary stones or a family history of bladder cancer.

Your doctor may want to perform one or more tests to see if the cancer has spread, such as a CT scan, intravenous pyelogram, cystoscopy, biopsy, MRI scan, ultrasound, X-ray or bone scan.

Cancer that is confined within the bladder wall is the most manageable and curable. If malignant cells extend through the bladder wall into surrounding tissues, lymph nodes or other areas of the body, the treatment plan will be more complex and the cancer may not be curable. Many treatment options are available for patients with incurable bladder cancer to help minimize pain and improve quality of life. Talk with your doctor about your specific stage of cancer.

Treatment Options

Deciding on a treatment plan for your bladder cancer can be complex and depend upon a variety of factors, such as your age, general health condition, stage of cancer and personal preferences. Sometimes more than one type of therapy may be used.
The following treatment possibilities are available:

**Surgery** – Three main surgical procedures are used to treat bladder cancer: transurethral resection, partial cystectomy and radical cystectomy. Transurethral resection to remove the tumor is performed only for early stage cancers and involves the use of a camera (cystoscope) inserted through the urethra. In partial cystectomy, a portion of the bladder is removed. In cases where the cancer has invaded deeply into the bladder wall, a radical cystectomy may be performed, which removes the entire bladder and nearby lymph nodes. In rare cases, more extensive surgery may be required. During surgery it may be necessary to create a urostomy to allow urine to leave the body through the abdominal wall to be collected in a bag. However, newer surgical methods make it possible to create an internal pouch for urine collection in some cases.

**Radiation Therapy** – Another treatment method for bladder cancer is radiation therapy, which can be delivered externally or internally. In external beam radiation, a high energy X-ray machine is used to direct radiation at the tumor. Internal radiation therapy destroys cancer cells with small implants that are placed directly into the tumor. Radiation therapy can also help reduce symptoms in advanced bladder cancer.

**Chemotherapy** – Anti-cancer drugs, or chemotherapy, are often administered to treat bladder cancer. One particular method called intravesical chemotherapy is used to treat early stage bladder cancer. It involves placing chemotherapy drugs directly into the bladder via a catheter inserted in the urethra. Chemotherapy is often administered shortly before or after surgery.

**Biologic Therapy** – A newer treatment option called biologic therapy is used to enhance the immune system’s ability to destroy malignant cells. Intravesical biologic therapy delivers bacillus Calmette-Guerin (BCG) solution directly into the bladder through the urethra to treat early stage bladder cancer.

You may also consider participating in clinical trials. These investigative studies help doctors learn about new treatments and better ways to use established treatments. Talk with your doctor about the possibility of taking part in a clinical trial in your area.

**What You Can Do**

You can choose to take an active role in your health and well-being. Learn as much as you can about your condition and have a list of questions ready each time you meet with your doctor. Join a cancer support group, and talk with your family, friends, clergyperson or counselor as you feel comfortable. Also, be sure to get enough sleep every night.

In addition you should report any new symptoms promptly to your doctor, who will likely recommend periodic exams and testing to monitor your health since bladder cancer has a high recurrence rate.

**Additional Resources**

American Cancer Society, 800.227.2345, www.cancer.org
American Foundation for Urologic Disease, 800.828.7866, www.afud.org
National Cancer Institute, 800.422.6237, www.cancer.gov
Urology Channel, www.urologychannel.com

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