

BLADDER CANCER

Bladder cancer is the sixth most common cancer in the United States. Although this is considered an aggressive cancer, early diagnosis and treatment can often lead to successful management of bladder cancer.

1. RISK FACTORS

- a. Smoking history (smokers develop bladder cancer at two to three times the rate of non-smokers)
- b. Chronic exposure to second hand smoke
- c. People who work with dyes, metal, paints, leather, textile and organic chemicals
- d. People who have chronic bladder infections

2. SYMPTOMS

- a. Blood in the urine (hematuria)
 - May be visible or microscopic
- b. Frequent urinary tract infections, for which the cause has not been found
- c. Frequent urination or burning with urination in the absence of an infection

It is important to remember that these symptoms do not on their own indicate or confirm the presence of bladder cancer. These are also common symptoms of other issues such as kidney stones or urinary tract infections. If you have these symptoms, a thorough and complete evaluation will be done, in order to exclude the possibility of bladder cancer.

3. DIAGNOSIS

- a. History
- b. Urine analysis
- c. Urine cytology (a special urine test that detects abnormal bladder cells)
- d. Cystoscopy (the most important diagnostic tool. It is an in-office procedure, in which a fiber-optic camera is inserted through the urethra into the bladder. The camera allows for direct visualization inside the bladder to look for any tumors, masses, or any other abnormalities)

4. TREATMENT

- a. TURBT Transurethral resection of the bladder (TURBT) is the usual treatment method for patients who, when examined with a cystoscope, are found to have abnormal growths in the bladder.
- b. Chemotherapy (locally instilled in bladder) after surgery
- b. Cystectomy Removal of the bladder if the cancer continues to recur or is very aggressive