

ASCO ANSWERS

BLADDER CANCER

WHAT IS BLADDER CANCER?

Bladder cancer begins when cells lining the bladder change and grow uncontrollably, forming a mass called a tumor. Bladder cancer is described as either non-muscle-invasive or muscle-invasive, depending on whether it has grown into or through the muscle of the bladder wall. Urothelial carcinoma is the most common type of bladder cancer.

WHAT IS THE FUNCTION OF THE BLADDER?

The bladder is an expandable, hollow organ in the pelvis that stores urine before it leaves the body.

The bladder is part of the urinary tract, which is also made up of the kidneys, ureters (tubes that carry urine from the kidney to the bladder), and urethra (tube through which urine leaves the body).

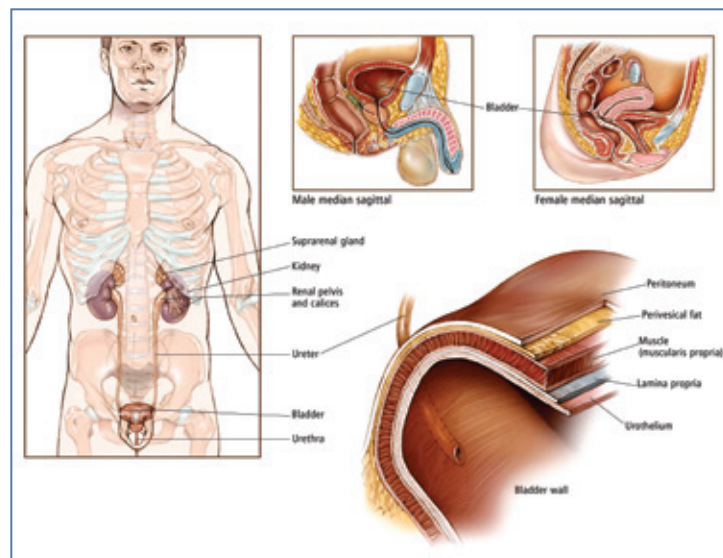


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Find additional cancer information at www.cancer.net.

WHAT DO STAGE AND GRADE MEAN?

The stage is a way of describing the cancer, such as where it is located, if or where it has spread, and whether it is affecting the functions of other organs in the body. There are five stages for bladder cancer: stage 0 (zero) and stages I through IV (one through four). The tumor may also be given a grade, which indicates how quickly the cancer may grow or spread. Details for these stages are available at www.cancer.net/bladder.

HOW IS BLADDER CANCER TREATED?

The treatment of bladder cancer depends on the type of tumor, whether the cancer has spread, and the person's overall health. Most people diagnosed with bladder cancer have non-muscle-invasive cancer, which may be removed with a laser or high-energy electricity. Treatment may be followed with chemotherapy or immunotherapy (treatment that uses the body's own immune system to fight cancer) given through a urinary catheter. For people with muscle-invasive cancer, treatment options may include surgery to remove the bladder (cystectomy), radiation therapy, immunotherapy, and chemotherapy. When the bladder must be removed to control the cancer, the surgeon will make a new way to pass urine out of the body (urinary diversion). Radiation therapy may be given after surgery to destroy any remaining tumor cells or to relieve pain, bleeding, or blockage caused by a tumor. Chemotherapy may also be given before or after surgery. When making treatment decisions, people may also consider a clinical trial; talk with your doctor about all treatment options. The side effects of bladder cancer treatment can often be prevented or managed with the help of your health care team.

HOW CAN I COPE WITH BLADDER CANCER?

Absorbing the news of a cancer diagnosis and communicating with your doctor are key parts of the coping process. Seeking support, becoming organized, and considering a second opinion are other steps. Take care of yourself during this time. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.

QUESTIONS TO ASK THE DOCTOR

Regular communication is important in making informed decisions about your health care. Consider asking the following questions of your doctors:

- What type of bladder cancer do I have?
- Can you explain my pathology report (laboratory test results) to me?
- What stage and grade is the bladder cancer?
- Would you explain my treatment options?
- What clinical trials are open to me?
- Which treatment, or combination of treatments, do you recommend? Why?
- Who is part of my treatment team, and what does each member do?
- What is the goal of each treatment?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- If I'm worried about managing the costs related to my cancer care, who can help me with these concerns?



Learn more about
bladder cancer

- What long-term side effects may be associated with my cancer treatment?
- Where can I find emotional support for me and my family?
- Whom do I call for questions or problems?

Additional questions to ask the doctor can be found at www.cancer.net/bladder.

Cancer.Net™

Doctor-Approved Patient Information from ASCO®

For more information, visit ASCO's patient website, www.cancer.net, or call 888-651-3038.

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TERMS TO KNOW

Benign:

A tumor that is not cancerous

Biopsy:

Removal of a tissue sample that is then examined under a microscope to check for cancer cells

Catheter:

A hollow, flexible tube that can be inserted through the urethra to drain fluid or deliver cancer treatment

Chemotherapy:

The use of drugs to destroy cancer cells

Cystoscopy:

Procedure in which a doctor places a cystoscope (a small, hollow viewing tube) through the urethra to look into the bladder

Lymph node:

A tiny, bean-shaped organ that fights infection

Malignant:

A tumor that is cancerous

Metastasis:

The spread of cancer from where the cancer began to another part of the body

Oncologist:

A doctor who specializes in treating people with cancer

Prognosis:

Chance of recovery

Radiation therapy:

The use of high-energy x-rays to destroy cancer cells

Tumor:

An abnormal growth of body tissue