

Bladder Cancer

Bladder cancer is fairly uncommon, representing less than 2% of all cancers seen. It is more common in males than females (with a ratio of 3 to 1) and occurs mostly in the age group 60-70 years. The development of bladder cancer is often associated with smoking, while bilharzia and industrial agents like aniline dyes, naftalamine, rubber, leather and paints are also implicated. The most common presenting symptom is haematuria (blood in the urine).

To establish a diagnosis and to determine the extent of disease the following investigations are useful:

- Cystoscopy (the endoscopic examination of the bladder with biopsies of any visible masses or suspicious areas)
- CT scan of the abdomen and pelvis
- Chest X-ray
- Blood and/or urine analysis

Your doctor may require further investigations depending on your symptoms at presentation.

Treatment options

Treatment will depend on the nature and extent of the disease as well as on your general state of health.

In earlier cases limited surgical resection and/or chemical agents repeatedly instilled in the bladder are commonly used, with good results. In more advanced disease and/or in the situation where the above approach is no

longer controlling the disease, other treatments are considered. These include surgery (consisting of total or partial resection of the bladder), chemotherapy and/or radiation or a combination of all these modalities. In some cases additional chemotherapy and/or radiation is considered after initial surgery, depending on the risk factors for disease recurrence identified at the time of surgery or during the examination of the surgical specimen.

The foregoing information is quite generalized. The specifics of your disease and treatment should be discussed with your oncologist to establish the optimal treatment plan for you as an individual