

NON-INVASIVE BLADDER CANCER RECURRENCE AFTER BLADDER CANCER RECURRENCE AFTER BLADDER-PRESERVING THERAPY FOR MUSCLE-INVASIVE BLADDER CANCER

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Introduction and Objective:

After bladder-preserving therapy for muscle-invasive bladder cancer, some proportion of patients develop non-invasive recurrence. However, biological behavior and treatment outcome of such recurrence have not been fully elucidated. In the present study, we analyzed non-invasive tumor recurrence after bladder-preserving therapy for invasive bladder cancer.

Patients and Methods:

Patients with muscle-invasive bladder cancer (T2-3N0M0) underwent bladder-preserving therapy consisted of intra-arterial chemotherapy with methotrexate and cisplatin and radiotherapy. Among 83 patients who underwent the treatment, bladders were preserved in 63 cases. During a follow-up period of 51 months, 18 patients (29%) developed intravesical recurrence: Non-invasive bladder cancer recurrence in 15 cases, invasive bladder cancer recurrence in 2 cases. One of the patients with non-invasive recurrence simultaneously developed lung metastasis. In the present study, analysis was performed on the 14 patients with non-invasive recurrence alone.

Results:

The median age of the patients at presentation was 68 years old. Ten patients were male and 4 were female. T stages of the original tumors were T2 in 9 cases and T3 in 5 cases. Histological grades were G2 in 1 case and G3 in 13 cases.

Non-invasive recurrences were developed at a median of 15 months after bladder-preserving therapy. T stages of the recurrent tumors were Tis in 2 cases, Ta in 4 cases and T1 in 6 cases. Histological grades were G2 in 8 cases and G3 in 2 cases. Treatments of the non-invasive recurrences were TURBT alone in 4 cases, TURBT followed by intravesical instillation of Bacillus Calmette-Guerin in 6 cases and cystectomy in 4 cases. Two of 10 cases who were treated by TURBT experienced additional non-invasive recurrence. Finally, 10 patients were alive without tumor and 4 died of other causes. Overall survival rates were not different between patients with non-invasive recurrence and 42 patients without any recurrence (86% and 84% at 5 years, respectively).

Conclusions:

Most of the recurrences after bladder-preserving therapy were non-invasive bladder cancer, which showed no impact on survival. Recurrent tumors were less aggressive than the original ones, and could effectively be managed by conservative treatment.