

Shared Decision-Making (SDM)

Process of communication by which patients and clinicians collaborate to make healthcare decisions. The process encourages patients to take a more active role in their care and treatment.

Bladder Cancer Testing

- **Cystoscopy:** Process that uses a hollow tube (cystoscope) inserted into the urethra to examine the lining of the bladder.
- **Urine Cytology:** Laboratory test that examines a urine sample under a microscope to detect abnormal cells.
- **Imaging:** Procedures such as CT scan, ultrasound, PET scan, or MRI.

Questions to Ask About Bladder Cancer Test Results

- What is the grade and stage?
- What is the risk of recurrence?
- What is the risk of progression?
- Is there anything I can do to lower my risk?

Bladder Cancer Grades

Low-grade bladder cancer: The cancer cells look more like normal cells and tend to grow slowly. These tumors are less likely to spread deeper into the bladder or to other parts of the body.

High-grade bladder cancer: The cancer cells look very different from normal cells and tend to grow more quickly. These tumors are more likely to spread deeper into the bladder and to other areas of the body.

Bladder Cancer Staging

Stage I: The cancer is growing in the inner lining layer of the bladder only.

Stage II: The cancer is growing into the inner or outer muscle layer of the bladder wall.

Stage III: The cancer is growing beyond the muscle layer and into fatty tissue that surrounds the bladder.

Stage IV: The cancer is growing outside of the pelvic region and has spread to distant sites, such as the lung, liver, or bones. When cancer has spread to other organs, it is considered metastatic cancer.

Bladder Cancer Risk Groups

Low-Risk Bladder Cancer: A small, early-stage bladder cancer that is low grade (slow-growing) and limited to one tumor.

Intermediate-Risk Bladder Cancer: Cancer that may include more than one tumor, or tumors that are slightly more aggressive or have grown a bit deeper into the bladder lining.

High-Risk Bladder Cancer: Cancer that is more aggressive, includes multiple tumors, has grown deeper into the bladder lining, or is linked with a flat, high-risk type of cancer called CIS (carcinoma in situ).

Bladder Cancer Treatment Considerations

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| <ul style="list-style-type: none">▪ Grade of bladder cancer▪ Stage of cancer▪ Risk category | <ul style="list-style-type: none">▪ Patient goals▪ Quality of life▪ Bladder preservation |
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Common Bladder Cancer Treatments

Bacillus Calmette–Guerin (BCG): Intravesical immunotherapy commonly used for treating early-stage bladder cancer. BCG is used to inhibit the cancer’s growth and to prevent recurrence.

Cystectomy: Surgery to remove the bladder.

Gemcitabine and Docetaxel (Gem/Doce) [Gemzar/Taxotere]: Intravesical bladder-sparing chemotherapy typically recommended to patients who do not respond well to BCG treatment

Enfortumab vedotin-ejfv (Padcev): Targeted antibody drug conjugate (ADC) used to treat locally advanced or metastatic urothelial cancer (bladder cancer) commonly used in combination with pembrolizumab.

Pembrolizumab (Keytruda): An immunotherapy drug FDA-approved for high-risk non-muscle invasive bladder cancer (NMIBC) and locally advanced/metastatic urothelial carcinoma.

Enfortumab Vedotin-ejfv (Padcev) + Pembrolizumab (Keytruda): FDA-approved combination therapy shown to be highly effective as first-line standard of care for locally advanced or metastatic urothelial cancer (bladder cancer).

Glossary Terms

Localized Bladder Cancer: Refers to cancer confined to the bladder and has not spread to other parts of the body. It can range from cancer that stays in the inner lining of the bladder to cancer that has grown into the bladder muscle.

Locally advanced bladder cancer: The cancer has grown outside of the bladder but has not spread to other parts of the body.

Immunotherapy: Type of therapy that harnesses one’s own immune system to help the body fight cancer, infection, and other diseases.

Metastatic cancer: When cancer has spread from its site of origin to another part of the body.

Standard of Care: An established guideline that is consensus among experts as the most appropriate and/or effective treatment for a specific type and stage of cancer.

Stoma: Surgical opening from the inside the body to the outside.



Elevate Bladder Cancer is brought to you by the Patient Empowerment Network. It is sponsored by Astellas Pharma Inc. and Pfizer Oncology, and through generous donations from people like you.