NON-METASTATIC MUSCLE-INVASIVE BLADDER CANCER: Treatment Algorithm

STAGING
- CT abdomen/pelvis with IV contrast
- Chest imaging (X-ray or CT with IV contrast)
- Laboratory evaluation (CMP, CBC)
- Exam under anesthesia

ALTERNATIVES
- PET scan, if indicated (equivocal staging exams and/or biopsy not feasible)
- Bone scan, if indicated (elevated alkaline phosphatase and/or pain complaints)
- MRI imaging, if indicated (CT contrast imaging cannot be performed)

DIAGNOSIS: NON-METASTATIC MUSCLE INVASIVE BLADDER CANCER

MULTIDISCIPLINARY APPROACH
- Neoadjuvant chemotherapy
- Radical cystectomy
- Bladder preserving options

SURVEILANCE
- Cystoscopy every 3 months for 1 year, then 6-12 months
- CT abdomen/pelvis and CXR every 3-6 months for 2 years, then annually

PARTIAL CYSTECTOMY WITH PELVIC LYMPHADENECTOMY
- Neoadjuvant chemotherapy recommended

MAXIMAL TURBT

MULTIMODAL BLadder-Sparing Protocol
- Maximal TURBT
- Chemotherapy (cisplatin or 5-FU Mitomycin-C)
- XRT

SURVEILLANCE AFTER RADICAL CYSTECTOMY
- ypT2 or ypT2N0
  - CT abdomen/pelvis every 6-12 months for 2-3 years
  - Option for annual upper tract imaging with CT or ultrasound to year 5

- ypT2 or N+
  - Clinical trial
  - Labs per T2
  - CT abdomen/pelvis every 3-6 months for 3 years
  - Annual chest imaging

- pT2 or N+
  - Consider adjuvant chemotherapy
  - Follow-up as per <T2

Cisplatin Eligible

Patient unwilling or unfit for treatment

Palliative Care

Complete Chemotherapy/XRT

Persistant/Recurrent Invasive Disease

Complete Response

Persistant/Recurrent Invasive Disease

Mid-Treatment Restaging

Complete Response

Patient desires bladder preservation

Bladder Preserving Options

Cisplatin Eligible

Patient unwilling or unfit for treatment

Palliative Care

Cisplatin-Based Neoadjuvant Chemotherapy

Radical Cystectomy, Bilateral Pelvic Lymph-Node Dissection, and Urinary Diversion

yp> T2 or N+

Persistant/Recurrent Invasive Disease

Persistant/Recurrent Invasive Disease

Maximal TURBT

Partial Cystectomy with Pelvic Lymphadenectomy
- Neoadjuvant chemotherapy recommended

CBC= complete blood count; CMP= comprehensive metabolic panel; CXR= chest X-ray; p= pathologic stage; TURBT= trans-urethral resection of bladder tumor; XRT= external beam radiation therapy; yp= pathologic stage after neoadjuvant chemotherapy