5 Bladder Cancer Treatment Options to Consider

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Bladder Cancer Treatment Options

When you're faced with a bladder cancer diagnosis – or any cancer diagnosis – undoubtedly one of the first questions you're going to ask your physician is, "What are my bladder cancer treatment options?"

There are several types of treatment for bladder cancer. Your bladder cancer treatment likely will include one of the treatments below – but it may also include several of the treatments.

To get a better understanding, this article will discuss five different bladder cancer treatment options.

Surgery for Bladder Cancer

There are several surgical options available for bladder cancer; the type of surgery will depend on how advanced your bladder cancer is.

Transurethral resection of bladder tumor (TURBT) is a surgical procedure that is performed to determine if a bladder tumor is cancerous, and to determine if the tumor has moved into the wall of the bladder. This type of surgery is the most common treatment for early-stage cancers as well as superficial tumors.

Cystectomy is a removal of the bladder. A partial cystectomy can be performed if the tumor has invaded the bladder wall, but is only in one place. A radical cystectomy involves full removal of the bladder. Men require removal of the prostate and seminal vesicles, and women require removal of the uterus, cervix, and a small portion of the vagina.

A radical cystectomy requires a reconstructive surgery for urination; there are several options available, depending on personal preferences, general health, and your surgeon's capabilities.

Intravesical Therapy for Bladder Cancer

For people with early stages of bladder cancer, intravesical therapy may be an option. It is ineffective for later stages of bladder cancer because when medications are given directly into the bladder, they do not reach cancers that are embedded deeper into the bladder wall, nor those that have spread to other organs. Intravesical therapy is often utilized after a TURBT.

Intravesical therapy involves placing drugs directly into the bladder via a catheter. Your physician may choose to prescribe immunotherapy or chemotherapy.

The most commonly used immunotherapy drug for intravesical therapy is Bacillus Calmette-Guerin therapy or BCG therapy. According to the American Cancer Society, "The body's immune system cells are attracted to the bladder and activated by BCG, which in turn affects the bladder cancer cells. Treatment is usually started a few

weeks after a TURBT and is given once a week for 6 weeks. Sometimes long-term maintenance BCG therapy is given."

The most commonly used chemotherapy drugs for intravesical therapy are mitomycin, valrubicin, docetaxel, thiotepa, and gemcitabine. These medications kill cancer cells that are growing. When chemotherapy is given via intravesical therapy, it has fewer side effects as they are given locally instead of systemically.

Chemotherapy for Bladder Cancer

There are various chemotherapy options available to treat bladder cancer. As previously discussed, intravesical therapy is available utilizing chemotherapy. Systemic chemotherapy is used for bladder cancer that is a bit more advanced.

Systemic chemotherapy involves ingesting a pill or having a medication injected via an IV or through an intramuscular (IM) shot. This allows the medication to enter the bloodstream, and the medication can treat cancers that may have spread further from the tumor.

Systemic chemotherapy may be used before surgery (neoadjuvant therapy) to shrink a tumor for easier removal, after surgery (adjuvant therapy) to kill remaining cancer cells, in conjunction with radiation, and as the main treatment for advanced bladder cancer.

There are many different types of chemotherapy available to treat bladder cancer.

Radiation Therapy for Bladder Cancer

Radiation therapy utilizes high-energy to kill cancer cells. Although there are various types of radiation, the most common type that is used to treat bladder cancer is external beam radiation therapy, which focuses radiation externally. The treatment lasts for only a few minutes, but likely will recur daily, five days per week, for several weeks.

This type of therapy is used in several instances:

- It may be used after a TURBT to treat early stages of bladder cancers.
- It may be selected as the main treatment for early stages of bladder cancers for those who are not surgical candidates.
- It may be an initial treatment for advanced cancers, before other treatments are initiated.
- It may be used to treat symptoms when cancer is advanced.

Immunotherapy for Bladder Cancer

There are various immunotherapy options available to treat bladder cancer. As previously discussed, intravesical therapy is available utilizing immunotherapy. There are also intravenous medications that are administered every two to three weeks that are called immune checkpoint inhibitors.

A normally functioning immune system uses 'checkpoints' so that it does not attack its own cells. These 'checkpoints' are 'molecules on immune cells that need to be turned on (or off) to start an immune response.' Unfortunately, cancer cells also use these cells so that they are not attacked by the immune system.

Atezolizumab, durvalumab, and avelumab act by targeting PD-L1, which is a protein on cells that prevent the immune system from attacking them. This improves immune response, thus shrinking tumors.

Nivolumab and pembrolizumab act by targeting PD-1, which also helps the immune system attack cancer cells.

Immune checkpoint inhibitors are typically used for people with advanced bladder cancer.

What Bladder Cancer Treatment Is Right for You?

While all of these treatment options for bladder cancer each have their own advantages, your doctor will discuss with you about which bladder cancer treatment they think is right for you.