Bladder Cancer

Bladder cancer is the tenth most common type of cancer in the UK. Given its relative frequency, it is important to learn the symptoms so it can be treated early. This is our bitesize guide to the condition.

What is it?
The term ‘cancer’ describes the abnormal, uncontrollable growth of cells in the body, eventually forming masses called “tumours”. In bladder cancer, this happens in the lining of the bladder. The cancer can spread to the bladder muscles and to other parts of the body.

Who gets it?
Bladder cancer typically affects people ages 50 and older, and is three times more likely to affect men than women.

Why does it happen?
It is unclear why cells become cancerous. However, several factors are thought to put one at a greater risk of bladder cancer. These include:
- Smoking. One of the largest risk factors, as toxins and in cigarettes irritate and damage the bladder.
- Other chemicals, such as arylamines – found in cigarette smoke or some permanent hair dyes – can also increase bladder cancer risk
- Radiotherapy or chemotherapy
- Certain medical conditions, such as type 2 diabetes, Crohn’s disease, long-term UTIs, and long-term bladder stones
- Long-term use of a urinary catheter (a tube placed up your urethra).
- Early menopause (before the age of 45)

Diagnosing Bladder Cancer
The most common symptom of bladder cancer is blood in the urine. Other symptoms include pain or a burning sensation during urination, an increased need to urinate, and difficulty passing urine despite strong urges.

Since the symptoms of bladder cancer overlap with those of many other conditions, a few steps must be taken to reach the correct diagnosis. Firstly, the doctor will ask about your symptoms and medical history. They may take a urine test to check for bacteria or blood, and perform a physical examination.
If the results are unclear, you may be referred to a hospital specialist for further tests. These may include:

- **Blood tests** - To check how well your body is functioning
- **Imaging tests** - Ultrasounds, CT scans, and x-rays allow doctors to observe functions occurring inside your body
- **Cystoscopy** - A cystoscope (a thin instrument with a camera and light at one end) is inserted into the urethra to examine the bladder lining. If irritation or damage is suspected, a tissue sample will be taken and examined for signs of cancer

**Treating Bladder Cancer**

If you are diagnosed with bladder cancer, your doctor will be able to tell you how far it has spread and how likely it is to spread further. The type of treatment you receive will depend on the extent of the cancer and the risk it poses to you.

If the cancer is low risk and in its early stages, it can be removed under general anaesthetic during a cystoscopy. After surgery, a dose of medication (chemotherapy) will be administered to the bladder for an hour and then drained away by a catheter. You will need regular check-up cystoscopies to make sure your bladder is healing and the cancer has not returned. If the cancer is moderate to high risk, chemotherapy may be administered for four to seven weeks, and the bladder may have to be completely removed.

If the cancer has spread into the bladder’s muscles or into other parts of the body, options include surgery to remove the bladder, chemotherapy, and radiotherapy.

**4 Key Facts about Bladder Cancer**

1. Working with textiles, dyes, paints, plastics, and leather tanning can expose one to bladder cancer causing chemicals.
2. Other key symptoms of bladder cancer include pain in the back or below the belly button, swollen legs, weight loss, lumps in the abdomen or neck, and the yellowing of the whites of your eyes and skin.
3. Metastatic cancer is cancer that has spread to other parts of the body.
4. Most cases of early stage bladder cancer can be removed during a cystoscopy using a procedure known as a transurethral resection of a bladder tumour (TURBT).

If you think you may have bladder cancer, speak to your GP.

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