

About Bladder Cancer

A Quick Guide

Contents

This is a brief summary on 'About bladder cancer' from our website. You will find more detailed information on there. In this information there are sections on

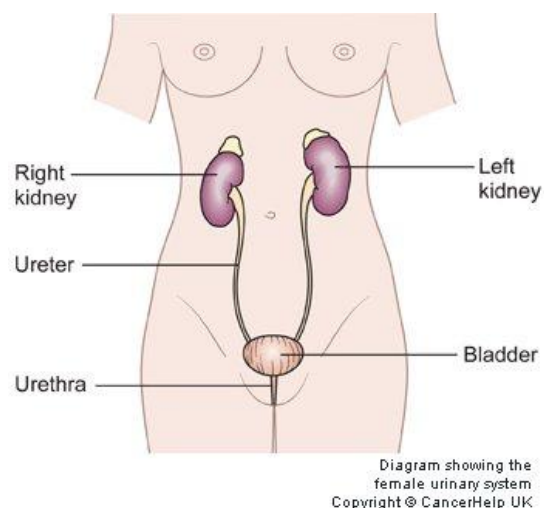
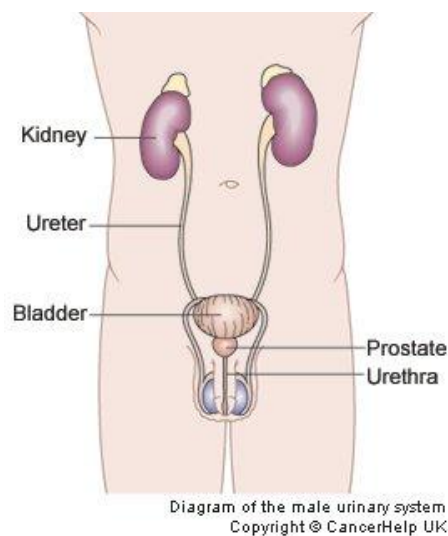
- The bladder
- Bladder cancer risks and causes
- Screening for bladder cancer
- Bladder cancer symptoms
- Types of bladder cancer
- Guidelines for seeing a bladder cancer specialist
- What to ask your doctor

You can view this information in a larger print on our website.

The bladder

The bladder is the organ that stores urine. Urine is made in the kidneys and passes to the bladder down two tubes called the ureters. The bladder is a stretchy bag made of muscle tissue. It can store about 500mls (or 3 cups of urine).

Below are diagrams of the female and male urinary systems.



The layers of the bladder

The bladder is made up of several layers. How your specialist treats your bladder cancer will depend on how far into these layers the cancer has grown. Bladder cancer starts in the innermost lining.

Bladder cancer risks and causes

Bladder cancer is more common in men than women. Bladder cancer usually takes a long time to develop and is most common in older people. It is rare in people under 40.

Main risk factors

The two main risk factors for bladder cancer are smoking and exposure to chemicals at work. Your risk if you smoke is up to 6 times higher than a non smoker. Chemicals in cigarette smoke get into the bloodstream and end up in the urine. This brings them into contact with the bladder. Chemicals used in some industries can also cause bladder cancer. Most have been banned in the UK for about 20 years, but you may have been exposed to them in the past.

Other risk factors

Parasitic bladder infections such as bilharzia increase the risk of bladder cancer in many developing countries. But this is not a major cause in the UK. Past cancer treatment with pelvic radiotherapy or chemotherapy drugs called cyclophosphamide and cisplatin also increases the risk.

Screening for bladder cancer

Screening means looking for early signs of a particular disease in 'healthy' people who do not have any symptoms. Before you can carry out screening for any type of cancer, doctors must have an accurate test to use. The test must be reliable in picking up cancers that are there. And it must not give false positive results in people who do not have cancer. At the moment there is no reliable screening test for bladder cancer.

If you think you are at higher than average risk for bladder cancer, talk to your doctor. You may be able to have regular checkups.

It is very important to see your doctor if you develop any bladder symptoms. This is the best way of finding bladder cancer in its earliest stages, when it is most treatable.

About Bladder Cancer – A Quick Guide

Bladder cancer symptoms

The most common symptom of bladder cancer is blood in the urine. Doctors call blood in the urine haematuria. The bleeding is not usually painful. The blood may not be there all the time. It can come and go. If you ever see blood in your urine, it is important to see your doctor.

Sometimes the amounts of blood are so small that you cannot see them. Even if it can't be seen, blood can be picked up in a urine test.

Other symptoms

There can be other symptoms of bladder cancer. These are:

- Needing to pass urine very often
- Needing to pass urine very suddenly
- Pain when passing urine

With these symptoms you are much more likely to have a urinary infection, not cancer. But it is important to tell your doctor about them straight away.

Types of bladder cancer

Transitional cell cancer

About 9 out of 10 (90%) bladder cancers in the UK are transitional cell cancers. Transitional cells line the bladder. There are two main types of transitional cell cancer. They behave in quite different ways. The two types are non muscle invasive (superficial) bladder cancer and invasive bladder cancer. It is important to know which one you have, because the treatment is quite different.

Non muscle invasive (superficial) bladder cancer

This is early cancer that has not grown beyond the bladder lining. It usually appears as small growths, like little mushrooms. Your surgeon can remove these and they may never come back. But some types of superficial bladder cancer are more likely to come back. These are called carcinoma in situ (CIS) and high grade T1 tumours. High grade T1 tumours are superficial cancers, but they can grow very quickly.

If you have one of these, you may need more treatment than for a lower risk bladder cancer. You will also need regular checkups to make sure your doctor picks the cancer up early, if it does come back.

Invasive bladder cancer

This is cancer that has grown into the muscle layer of the bladder, or beyond. It needs more intensive treatment than superficial cancer.

Other types of bladder cancer

About 8 out of every 100 (8%) bladder cancers in the UK are squamous cell cancers. They start in the flat cells that make up the lining of the bladder. Between 1 and 2 out of every 100 bladder cancers are adenocarcinoma (1 to 2%). This is a very rare type of bladder cancer that develops from cells that produce mucus.

Guidelines for seeing a bladder cancer specialist

The symptoms of bladder cancer can be very similar to symptoms of other less serious conditions. So it can be very difficult for GPs to decide who may have a suspected cancer and who has something much less serious. But there are particular symptoms that mean your GP should refer you to a specialist straight away. The National Institute for Health and Care Excellence (NICE) says that the following symptoms need referral to a specialist within 2 weeks

- Blood in your urine with no symptoms of urine infection
- Blood in your urine with other symptoms when urine infection is ruled out
- Urine infection that won't go away or keeps coming back, with blood in the urine, in anyone over 40
- Very small amounts of blood in the urine for no apparent reason, in anyone over 50
- A lump in your abdomen that your GP thinks could be related to your urinary system

If you have symptoms and you do not think your GP is taking them seriously enough, you could take this information along to your appointment. You may be able to decide together whether you need to see a specialist, and how soon.

What to ask your doctor about bladder cancer

- How will I know if I have bladder cancer?
- Am I more likely to get bladder cancer than anyone else?
- I used to smoke so does this mean I am more likely to get bladder cancer?
- Does my work mean I am more likely to get bladder cancer?
- I get a lot of urine infections so am I more at risk of bladder cancer?
- Am I more at risk of bladder cancer if someone else in my family has had it?

Notes

For more information, visit our website <http://www.cruk.org/cancerhelp>

You will find a wide range of detailed, up to date information for people affected by cancer, including a clinical trials database that you can search for trials in the UK. Our information is based on the best current scientific evidence and reviewed regularly by leading clinicians and experts in health and social care.

For answers to your questions about cancer call our Cancer Information Nurses on 0808 800 4040 9am till 5pm Monday to Friday.

Adapted from Cancer Research UK's Patient Information Website CancerHelp UK in November 2013. CancerHelp UK is not designed to provide medical advice or professional services and is intended to be for educational use only. The information provided through CancerHelp UK and our nurse team is not a substitute for professional care and should not be used for diagnosing or treating a health problem or disease. If you have, or suspect you may have, a health problem you should consult your doctor. Copyright Cancer Research UK 2013. Cancer Research UK is a registered charity in England and Wales (1089464), Scotland (SC041666) and in the Isle of Man (1103)

