

Intravesical BCG Treatment

Department of Urology

Patient Information

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What is Intravesical Immunotherapy?

Intravesical Immunotherapy is when a substance is placed into the bladder to stimulate an immune response.

Intravesical Immunotherapy is used as a treatment for nonmuscle invasive bladder cancer. This is cancer which is confined to the inner surface layer of the bladder.

Immunotherapy stimulates your body's immune system to destroy cancer cells within the bladder and reduces the risk of the tumour re-growing.

Intravesical Immnuotherapy uses a live vaccine called Bacillus Calmette-Guerin (BCG), which is also used to inoculate against Tuberculosis; when this is placed in the bladder it creates a local inflammatory reaction that kills cancer cells.

Treatment involves placing a small amount of fluid, containing a live vaccine, into your bladder through a fine-bore catheter, which is then removed. Treatments are normally given once a week for a number of consecutive weeks, normally six weeks.

Because a live vaccine is used, certain precautions need to be used to reduce the risk to yourself and family; please take time to read this information.

How effective is treatment?

This will depend on how aggressive (grade) and how deep (stage) the bladder cancer is.

Approximately seven out of ten people with aggressive (grade 3), non-muscle invasive bladder cancer and / or carcinoma in situ will respond to treatment.

Sometimes, even for those people who have had successful BCG treatment, the bladder cancer may return and require further removal and surgery.

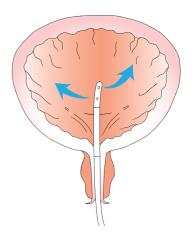
How is the treatment given?

The treatment cannot be given immediately after your operation, so we will arrange an appointment for you to discuss the results of any tissue analysis from the operation and make a plan for any further treatment, that may be necessary.

An appointment will be sent to you for the first treatment of BCG. You will receive the treatment as an outpatient at the Princess Royal Hospital by a trained nurse / practitioner in bladder instillations.

- Before the first treatment is given we will ask you questions about any previous illnesses, operations and about any medication you may be taking.
 It would be useful to bring a list of current medicines with you. Some medicines may interfere with the way BCG works.
- You will then be asked for your consent to the treatment.
- Please bring a urine specimen; we will test this to make sure there is no infection.
- If you have had rheumatic fever or artificial heart valve replacements, please let us know in advance, as we will need to give you antibiotics before the treatment.
- After making yourself comfortable on an examination couch, the genital area will be cleaned with some normal saline and a fine catheter is inserted into your bladder, via the urethra.

- The BCG treatment is then passed through the catheter into the bladder and we then remove the catheter.
- You will be asked not to pass urine for the next two hours.
- Once the catheter has been removed, you may go home.



Please make sure you know when your next treatment or appointment will be.

Do I need to do anything before treatment?

- Please do not drink any fluids for two four hours before treatment; this will reduce the amount of urine you make so that you can be comfortable and retain the treatment for the two hours.
- If you take diuretic medicines ('water tablets'), you should take them after treatment or at least six hours before your appointment.
- Do remember to bring a urine specimen with you. We will test to make sure there is no infection present. If we find infection we would have to postpone your treatment and prescribe you antibiotics. Infection makes complications arising from the procedure more likely.
- If you feel unwell, or are unable to come to the appointment, please let us know as soon as possible.

Are there special precautions after treatment?

- You should sit down when passing urine for the six hours after treatment. This reduces the risk of spillage onto skin or outside the toilet. We recommend that you wash around the genital area, with soap and water after each time you go to the toilet, during this period.
- Before flushing, add two cups of undiluted household bleach into the toilet, leave for 15 minutes and then flush. You should continue to do this for the six hours following treatment.
- Ensure that no one else uses the toilet before flushing.
- Make sure you wash your hands thoroughly each time.
- In order to protect your partner, you should abstain from sexual activity for 48 hours following treatment and use a condom during intercourse during the course of treatment and for six weeks after completion of treatment.
- Drink plenty of fluids (two three litres) for the first 24 hours following treatment.
 Avoid caffeine drinks e.g. coffee, coke etc.
 Use decaffeinated drinks, cranberry juice and barley waters.

Are there any side effects?

Approximately 9 out of 10 people having BCG treatment will develop some side effects; these usually begin within three – four hours after treatment and may last one-three days.

Most commonly, these include:

 Pain when passing urine and passing urine more frequently; this may feel like cystitis. Drinking plenty of fluids will help reduce these symptoms; avoiding caffeinated drinks may reduce the frequency in passing urine.

However, if they continue to last more than three days, then contact your G.P.

 'Flu-like' symptoms including fever; tiredness and aches. Taking regular paracetemol after treatment should help ease these feelings.

Again, if these symptoms last more than two-three days then contact your G.P.

It is important that you see a doctor or attend the Accident & Emergency department if you develop any of these symptoms:

- High temperature (above 39°C)
- Vomiting
- Joint pain
- Skin rash
- Cough

You must see a doctor immediately if you develop any of these symptoms:

- Shortness of breath
- Difficulty in breathing
- Facial swelling

These symptoms are rare and it is important that you seek advice.

If you do see a doctor, please let them know that you are receiving BCG treatment for bladder cancer.

At the end of treatment, arrangements will be made for you to have a further cystoscopy. This is normally six – eight weeks following completion of treatment. Please contact the hospital if you do not hear about this appointment.

It is important that we examine the bladder lining to assess how the treatment has worked. Part of this assessment may involve taking biopsies from the bladder lining.

Sometimes, we ask for urine specimens to see if there are cancer cells present in the urine.

Further BCG treatment may be necessary, this is called a maintenance course. If you are due to have maintenance BCG and have not received a date for treatment, please contact us.

The table below illustrates the BCG programme we use at Brighton & Sussex University Hospitals NHS Trust, starting with 6 treatments and then giving a further 2 courses of treatments at regular intervals afterwards.

In between these times, regular cystoscopies would also be arranged.

	Number of treatments
Initial Course	6
3 months later	3
6 months later	3

Initial BCG course

	Date	Time	Comments
1			
2			
3			
4			
5			
6			

Next Follow Up

Maintenance BCG Programme

3 months

	Date	Time	Comments
1			
2			
3			

Next Follow Up

Cystoscopy	Date

6 months

	Date	Time	Comments
1			
2			
3			

Next Follow Up

Cystoscopy	Date
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Useful telephone numbers

The Princess Royal Hospital

The Urology Nursing Team 01444 441881 Ext. 5457 Urology outpatient department 1st floor 01444 441881 Ext. 7752 Main outpatient department 01444 441881 Ext. 8302

Urology Consultants:

Mr Nawrocki's secretary	01444 441881 Ext. 5962
Mr Coker's secretary	01444 441881 Ext. 8043
Mr Symes' secretary	01444 441881 Ext. 7809
Mr Alanbuki's secretary	01444 441881 Ext. 7810
Mr Larner's secretary	01444 441881 Ext. 7808
Mr Zakikhani	01444 441881 Ext. 7809

Date:

Leaflet given to patient by:

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Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

