

# Important Answers

## Regarding Bladder Cancer

The American Cancer Society estimates that over 53,000 people in the United States will be diagnosed with bladder cancer this year. Cells that line the bladder walls are called urothelial transitional cells. Ninety percent of bladder cancers are urothelial cell carcinomas, or cancer that begins in the lining of the bladder.

This type of cancer is referred to as "superficial" bladder cancer, and it can recur after treatment is given to a patient. Should cancer spread from the urothelial cells into the inner lining of the bladder (invading the muscular cell), this is referred to as "invasive" bladder cancer.

### **Q: What is the bladder?**

**A:** Located in the lower abdomen, this organ serves as a receptacle for urine (the waste product produced when the kidneys filter blood). The bladder can be described as an elastic bag; it has a muscular wall that allows it to expand or contract as urine is stored or emptied, respectively. From the kidneys, urine passes into the bladder through tubes called ureters and out through another tube called the urethra.

### **RESOURCE SUPPORT**

For additional information about bladder cancer, the following resources are available:

#### **National Cancer Institute**

**Cancer Information Service (CIS)** 1-800-4-CANCER  
**Cancer.net** [www.cancer.net](http://www.cancer.net)

The Cancer Information Service (CIS) and Cancer.net are National Cancer Institute programs that provide a nationwide telephone service and web site for cancer patients, their families and friends.

#### **American Cancer Society**

1-800-ACS-2345 [www.cancer.org](http://www.cancer.org)

The American Cancer Society (ACS) is a voluntary organization with a national office in Atlanta, Georgia, and local facilities across the country. It supports research, patient education programs, and other services for family members. It also publishes and distributes free booklets on colon cancer and home care.

#### **Associated Pathology Medical Group, Inc. (APMG)**

[www.apmglab.com](http://www.apmglab.com)

APMG is the longest standing independent pathology practice in Silicon Valley. Our group consists of eight pathologists at two practice sites: Los Gatos and Santa Cruz, serving physicians throughout California. Our pathologists are outpatient and inpatient specialists that produce accurate, diagnostic reports within 24 hours in most instances. Abnormal cases are routinely peer-reviewed.



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# Bladder Cancer



One of the most important tools for better health –

Information.

Knowledge is power.



**Q: Am I at risk?**

**A:** Most cases of bladder cancer occur after the age of 55. Men are affected about four times as often as women, and the incidence rate is twice as high in whites than in African-Americans. Currently, the cause of bladder cancer is not fully understood, however, risk factors include exposure to carcinogens in the work place and smoking. Smokers develop bladder cancer two to three times more often than nonsmokers, and smoking is estimated to be responsible for about 47% of bladder cancer among men and for about 37% among women.

**Q: What are the symptoms?**

**A:** Common symptoms of bladder cancer can include:

- Blood in the urine
- Pain during urination
- Frequent urination

Because health problems other than bladder cancer may cause these symptoms, it is important to consult your physician or your urologist (a doctor who specializes in diseases of the urinary system), so that your illness can be properly diagnosed.

**Q: How is bladder cancer detected?**

**A:** Once you have identified the symptoms, your doctor may begin to determine the cause of your symptoms by performing a physical exam. The physical usually includes a rectal or vaginal exam,

so your doctor can check for tumors. Moreover, your doctor may send urine specimens to a diagnostic laboratory to check for blood, proteins, and cancer cells.

In addition, physicians may perform a procedure call cystoscopy. This procedure involves the use of an instrument to look directly into the bladder to examine the lining of the bladder wall.

**PATHOLOGY TESTING**

**Q: How is bladder cancer diagnosed?**

**A:** Your doctor may perform a cystoscopy procedure to diagnose bladder cancer. Using local or general anesthesia, the physician inserts a very thin, lighted tube (a "cystoscope") into the bladder through the urethra when examining the bladder wall. Additionally, the physician may remove samples of tissue through this tube.

The removal of tissue to look for cancer cells is called a biopsy. The bladder biopsy procedure is the main method to diagnose bladder cancer. The tissue removed using this procedure is then sent to a diagnostic laboratory for microscopic examination of potential bladder cancer cells. This microscopic evaluation is performed by a pathologist. If cancer cells are discovered, the pathologist can then assist your physician in determining the stage or extent of the disease process.

**TREATMENT OPTIONS**

**Q: Do I have a choice of treatment?**

**A:** Yes. There are several options for treating bladder cancer, which are dependent on a number of factors such as age, the stage of the disease (how much the cancer has spread into the bladder wall), the grade of cancer, general health, as well as any concerns you may have regarding the treatment process and potential side effects. Thus, it becomes important for you to discuss thoroughly the options with your doctor regarding an effective treatment plan specifically designed for you.

*This information is not intended to provide specific medical or professional advice. Your physician should provide definitive medical advice, as well as answers to your medical-related questions.*



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