

Dr. Nicholas Franco Discusses the Causes, Evaluation, and Treatment Options for Bladder Tumors and Bladder Cancer

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Naples, Florida Nov 8, 2024 ([IssueWire.com](https://www.issuewire.com)) - Bladder cancer remains one of the most prevalent forms of cancer among men in the United States, ranking as the fourth leading cause of cancer-related deaths. According to Dr. Nicholas Franco, a retired urologist with decades of experience, bladder cancer is responsible for more than 12k deaths annually, and early detection and proper management are crucial in reducing mortality rates.

Dr. Franco explains that bladder cancer was one of the first malignancies in which carcinogens were identified as a key factor in its development. "The most significant cause of bladder cancer today is cigarette smoking," says Dr. Franco. Smoking exposes the bladder to harmful chemicals that accumulate in the urine, irritating the bladder lining over time. In fact, smokers are up to three times more likely to develop bladder cancer compared to non-smokers.

In addition to smoking, Dr. Franco highlights that occupational exposure to arylamines, chemicals used in industries like dye manufacturing, rubber, and leather, was historically a significant risk factor for bladder cancer. "While regulations have reduced these exposures, the risk remains for individuals with prolonged contact with these chemicals," he adds.

Evaluation and Diagnosis of Bladder Tumors

Dr. Franco stresses that one of the most common signs of bladder cancer is the presence of blood in the urine, also known as hematuria. "Blood in the urine, whether visible to the naked eye (gross hematuria) or only detectable through lab tests (microscopic hematuria), is often the first indication of bladder cancer," he notes. "It's essential for individuals to seek medical evaluation immediately upon noticing blood in their urine, as it could be a sign of bladder cancer or other serious conditions."

When it comes to diagnosing bladder cancer, Dr. Franco explains that initial imaging studies like excretory urography (intravenous pyelography) are often used to assess the urinary tract. However, he emphasizes that these imaging studies alone are not enough. "Cystoscopy is the gold standard for diagnosing bladder cancer because it allows us to directly visualize the inside of the bladder," Dr. Franco states. This procedure involves using a small camera to examine the bladder lining for any abnormal growths or tumors.

Dr. Franco also notes that further evaluation may involve additional tests such as ultrasound, CT scans, or MRI scans to assess the kidneys, bladder, and surrounding tissues. "These imaging techniques, combined with cystoscopy, help us create a comprehensive picture of the patient's condition and guide treatment decisions," he explains.

Superficial Bladder Tumors

According to Dr. Franco, the majority of bladder cancers present as superficial tumors. These are tumors confined to the bladder's mucosal or submucosal layers without muscle invasion. "Superficial bladder tumors are categorized into different stages," Dr. Franco explains. "Ta tumors are papillary and confined to the bladder mucosa, T1 tumors extend into the lamina propria, and carcinoma in situ (CIS) presents as flat, non-papillary mucosal dysplasia."

Dr. Franco adds that the natural history of these superficial tumors varies. "Approximately 60% to 70% of superficial tumors tend to recur after treatment, and about 15% to 25% of them have the potential to progress into muscle-invasive disease," he explains. Therefore, it is crucial to identify which tumors are at a higher risk of recurrence or progression to guide treatment decisions.

Treatment Options for Bladder Cancer

When it comes to treating superficial bladder tumors, Dr. Nicholas Franco highlights that transurethral resection (TUR) is the standard first-line treatment. This minimally invasive procedure involves removing the tumor through the urethra. "TUR is highly effective for early-stage bladder tumors, but due to the high recurrence rate, additional treatments are often necessary," Dr. Franco states.

To reduce the risk of recurrence, Dr. Franco recommends intravesical therapies, which involve administering chemotherapy or immunotherapy directly into the bladder. "One of the most successful treatments for superficial bladder cancer is intravesical bacille Calmette-Guérin (BCG) therapy, an immunotherapy that activates the immune system to attack cancer cells," he explains. BCG therapy has shown significant efficacy in reducing recurrence and preventing progression, particularly in cases of

carcinoma in situ (CIS).

Dr. Franco explains that BCG is typically administered in a six-week course of weekly instillations, with an additional three-week course at three months for patients whose tumors do not respond initially. "For high-risk cancers, maintenance BCG therapy every six months is often recommended to limit recurrence and prevent progression," he adds. However, Dr. Franco cautions that BCG treatment can have side effects, which may limit its use for some patients.

For patients who do not respond to BCG or whose cancer progresses, Dr. Franco suggests that other therapies, such as intravesical interferon-alpha, may be beneficial. "In some cases, where bladder cancer becomes muscle-invasive or does not respond to intravesical therapies, cystectomy, bladder removal, may be necessary," he notes. Advances in surgical techniques, such as orthotopic bladder reconstruction, have improved the quality of life for patients who undergo cystectomy, allowing them to retain normal urinary function.

Conclusion

Dr. Nicholas Franco emphasizes that bladder cancer, especially in its superficial stages, presents unique challenges due to its high recurrence rate. However, with early detection and appropriate treatment strategies, many patients can achieve positive outcomes. "The key to success in managing bladder cancer lies in identifying the tumors at highest risk of recurrence or progression and applying the most effective treatment strategies, such as TUR, BCG therapy, and, in some cases, cystectomy," Dr. Franco concludes.

For individuals at risk of bladder cancer, particularly smokers and those with occupational exposure to carcinogens, regular medical evaluations and prompt attention to symptoms like hematuria are critical steps toward prevention and early intervention.

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