

Edith Cavell Hospital Department of Urology



Drug treatment into the bladder using BCG (Intravesical immunotherapy)

Your bladder

Your bladder is situated in the lower part of your abdomen. It is a structure rather like a small balloon that collects urine for temporary storage. Your bladder is either emptied from time to time when you feel the urge to pass water by urinating, or else is continually drained of urine via an indwelling catheter tube.

Why does my bladder require treatment?

Your body is made up of tiny "building blocks" called cells. Under normal circumstances, these cells will be reproducing to replace dead cells and repairing damage to others in a controlled way. Sometimes more cells are made than are dying and a lump can develop. This lump is called a tumour.

Tumours can be classified as benign or malignant. Benign tumours will not normally cause too much trouble but malignant (cancerous) tumours will continue to grow and cause trouble by affecting surrounding tissue if they are not treated.

You have a tumour referred to as bladder cancer. Your surgeon has decided that you require additional treatment to the lining of your bladder in the form of a drug. This is to ensure that any residual tumour left after your recent TURBT (see leaflet on TURBT) is "mopped up", rather like you would use weedkiller in your garden to treat the small weeds that you could not remove yourself.

What does this drug treatment involve?

The drug treatment into your bladder is called intravesical chemotherapy, and will be administered to you on the ward by the nurse looking after you.

The name of the drug that will be used to treat your bladder is called B.C.G (Bacillus Calmette Guerin). BCG is a live vaccine normally used to inoculate

against Tuberculosis. When it is put into the bladder, it causes an inflammatory reaction to occur there. This inflammation seems to destroy cancerous cells, although it is not yet clear exactly how it does this. BCG has been used very successfully world wide to treat and prevent the recurrence of superficial bladder cancer.

Is there anything I need to do before the treatment?

You should not drink too much fluid for 8 hours before the treatment, perhaps only one drink with your breakfast. If you drink as little as possible, the kidneys will produce less urine and thus prevent the dilution of BCG when it is in your bladder. It will also make it easier for you to retain the drug in your bladder for the necessary amount of time.

If you normally take water tablets (diuretics), take them after your BCG session rather than first thing in the morning.

How long does the treatment take?

You will be required to keep the drug in your bladder for two hours. The nurse will take a few minutes to install the BCG, and also will take a few minutes to remove the BCG and the catheter after this time. Depending upon your ability to pass urine unaided, you may require a replacement catheter inserted at the end of the procedure.

How is the treatment given?

The BCG, which is 50ml in fluid, is passed via your catheter into your bladder. Your catheter is then clamped to ensure that the BCG remains in your bladder. You will be asked or assisted to alternate your position every 30 minutes to ensure the BCG coats the entire lining of your bladder. It is best to commence laying on your front, to avoid undue discomfort should your bladder being to fill with urine towards the end of the treatment.

If you should feel at any time that you are not able to tolerate the treatment, or if you feel that you are passing urine, then you should call the nurse.

At the end of the treatment, the nurse will release the BCG from your bladder and will remove the catheter. Should there be any spillage onto your skin, you should shower or if you are unable to shower, you should wash the affected area with copious amounts of soap and water.

When you first pass urine into the toilet, you should sit rather than stand to avoid splashing, alternatively men could use a urinal. Do not flush the toilet, but tell one of the nurses so that they can put disinfectant into the toilet and a notice on the door asking other patients not to use it as it is a live vaccine.

What to do after the treatment.

Most of the BCG is passed out the first time you pass urine, but it is important to avoid the BCG contacting your skin. It is advisable to wash your hands and genitalia with soap and water each time after passing urine, for 24 hours after the treatment. If the solution does contact your skin, do not worry – it may cause a slight rash if not washed off, but if washed off immediately it should not bother you. If a rash develops, it can be treated with topical creams and it is worth mentioning to the nursing staff.

You will need to drink plenty of fluids over the next 24 hours to flush the remaining drug out of your bladder. If you are sexually active, you should practice protected intercourse by wearing a condom, or else abstain for 24 hours after the treatment.

Are there any possible side effects?

The treatment is generally well tolerated by patients, but there can be mild side effects from irritation of the bladder. These might include:

- Discomfort on passing urine
- Frequent passing of urine
- Some blood in the urine

To ease this, it is a good idea to increase your fluid intake to flush your bladder through, although you may want to reduce the amount you drink after 5pm so as not to disturb your sleep.

If you notice that your urine is smelly or cloudy, you should inform a nurse, as it is probable that you have a urine infection. You will be required to provide a urine sample and may be given some antibiotic tablets to take.

Other less common side effects are:

- Fever and chills
- Joint pain
- Nausea and vomiting
- Skin rash
- Fatigue
- Cough

If any of these symptoms should persist for more than 24 hours you should inform a nurse, or your GP if you are at home.

If you should be worried about any other points, or do not understand any of the information you have been given, please do not hesitate to talk to one of the nursing staff

Any questions?

This leaflet has been written by the nursing and medical staff who work in the Urology Unit.

If you have any questions, jot them down here and ask the nursing or medical staff for answers.

Urology Department , Ward 11 - Telephone (01733) 875311

Please do not hesitate to ask the nursing staff

If you have any further questions

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