

The Bladder Cancer Advocacy Network presents...

Tips From Patients, For Patients: Intravesical Immunotherapy with BCG (Bacille Calmette-Guerin)

Bacille Calmette-Guerin (BCG) is a weakened form of tuberculosis bacteria. Injecting BCG directly into the bladder – so that it stays in the bladder and doesn't enter the blood stream – is a common treatment for bladder cancer that has not invaded the muscle wall of the bladder. It works by encouraging the body's immune system to attack cancer cells. This treatment is often used for patients who have high grade tumors or who are at high risk of developing bladder cancer that will invade the bladder's muscle wall.

During BCG treatment, a liquid drug is sent through a catheter directly into the bladder (this is called instillation) and remains there for up to two hours. This procedure is done after the bladder has recovered from TURBT (trans-urethral resection of a bladder tumor). The use of intravesical immunotherapy depends on the stage (extent of the cancer, for instance, how far it has grown into the bladder wall); and also the grade (appearance) of cancer cells. In one cycle, the treatment is typically given once a week for six weeks. After one cycle, your doctor may recommend additional series of three weeks of BCG, referred to as "maintenance BCG."

BCAN surveyed bladder cancer patients to find out what they thought patients should know about three key areas related to intravesical therapy. These tips are their thoughts and advice.

What Questions Should Patients Ask Their Doctor About BCG Therapy?

1. *Why is this treatment a good option for me?*

- What is BCG and why do you recommend it for me? Are there any alternatives to this treatment that I should consider?
- What is the success rate for my age, tumor type and stage?
- When might I know that the treatment is working? What options do I have if it doesn't work?

2. *What's involved in having this treatment?*

- How many treatments will I have and how often? How long do I have to hold the drug in my bladder? What happens if I can't hold it? How strong a dose will I get? Can it be lowered if needed?
- Where will I get the treatment? Who will administer the treatments? If you are not available, who can I talk to if I have questions or need help?
- What are the side effects and how long do they last? Which ones signal a serious problem? What medications can I get to treat them?

3. *What is your experience with this treatment?*

- How many intravesical therapy procedures have you done and on how many patients?
- Do you treat a lot of bladder cancer patients?
- Where can I go to get a second opinion?

What are the Most Important Things Patients Should Know About BCG Therapy?

1. Preparing for the treatment...

- Your doctor might ask you not to eat or drink for a period of time before the treatment.
- Be prepared to provide a urine sample before the treatment. If this urine sample shows signs of infection, you will not be treated with BCG until the infection clears up.
- Your doctor will not give you BCG until your bladder has healed from removing the tumors during the TURBT. This reduces the risk of the BCG getting into your blood stream through a cut.
- Consider bringing a friend or family member if it would make you feel more comfortable.

2. During the treatment...

- The liquid drug is instilled through a catheter and into your bladder. This procedure is usually quick and relatively painless.
- You must hold the liquid BCG instillation in your bladder for 2 hours. Some doctors ask patients to lie down and rotate around so that the drug coats the entire bladder.
- Medications are available to help you relax during the treatment.

3. After the treatment...

- The treatment can cause side effects, such as fatigue, flu-like symptoms, the urge to urinate frequently, painful urination, or symptoms of a urinary tract infection. You may have blood or clots in your urine. Contact your doctor if your side effects are severe.
- You can ask your doctor about prescription or over-the-counter therapies, such as medications, creams, or heating pads that can help with side effects.
- Side effects are different in different patients. They are generally temporary, but may get worse after subsequent treatments. If your side effects become difficult to deal with, you may be able to get lower doses of BCG at your next treatments.
- Doctors recommend being careful to not splash and wash your hands when you urinate after treatment and release the BCG. Some doctors suggest putting bleach in the toilet.

What are your Top Tips for Coping with BCG Therapy?

1. Take care of yourself!

- Try to schedule the appointment at a time that's convenient for you. Some people prefer to schedule appointments early in the week so they can reach the doctor if they have problems; others prefer to schedule appointments on Fridays so they can rest over the weekend.
- You might want to bring music or books to distract you during the 2-hour holding period.
- Drink plenty of water and other non-caffeinated liquids after each treatment.

2. Plan ahead for what might help after the treatment.

- You might want to rest for the day after the treatment.
- Follow your doctor's instructions. Get instructions in writing so you can refer to them later.
- Call your medical team if you have questions or something seems wrong.

3. Be aware of what might happen next.

- You will still need regular cystoscopies to make sure the tumors have not recurred.
- After the initial cycle of BCG, your doctor might recommend maintenance cycles of BCG.

BCAN provides this information as a service. Publication of this information is not intended to take the place of medical care or the advice of your doctor. BCAN strongly suggests consulting your doctor or other health professional about the information presented.