

Follow-up

After your course of BCG treatment, you will need to be reassessed to see how well it worked. Urine samples may be examined for the presence of cancer cells (urine cytology) and your bladder will be inspected visually with an instrument passed through the urethra (cystoscopy).

Further BCG treatments may be recommended. In some cases, additional treatments including surgery may be required for cancer control.

Call your doctor or nurse if:

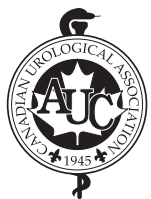
- Your urine is very bloody. It is normal to have a small amount of blood in the urine after your treatment but this should clear up within three days.
- You have chills and a fever over 38.5°C (101°F).
- You have prolonged nausea, vomiting or diarrhea.
- You have new joint pain lasting for more than three days after your BCG treatment.
- You develop a skin rash or a new cough.

Your BCG treatments are scheduled to begin on...

_____ (date)
at _____ (time)
at _____
_____ (location)
or

You will be contacted soon with the time, date and location of your BCG treatments.

18E-BCGE0610



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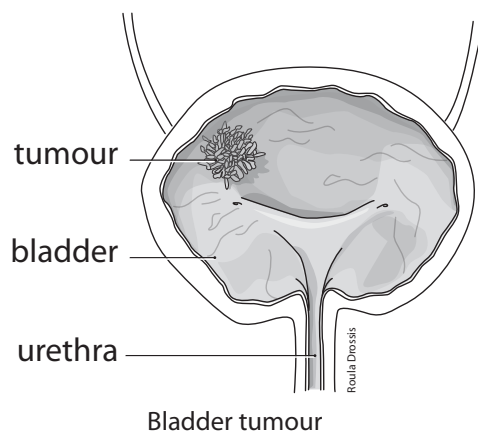
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BCG Treatment for Bladder Cancer



BCG treatments are used to reduce the risk of bladder tumour recurrence.

You have been found to have cancer of the bladder lining. It has been treated by cauterizing or scraping using an instrument passed through the urethra (the “urinary passage”). Even if all visible cancer has been removed, microscopic disease may remain from which new tumours can develop. Your doctor has recommended BCG treatments to eliminate possible remaining cancer cells and reduce the risk of recurrence.



BCG (Bacillus Calmette Guerin) is a bacterial vaccine originally developed for the prevention of tuberculosis. When placed in direct contact with bladder cancer, it stimulates a reaction that can kill cancer cells and prevent them from coming back. Experience in many thousands of men and women has shown it to be effective at controlling bladder cancer.

Generally, your urologist will recommend a course of BCG treatments once every week for six weeks, starting several weeks after surgery. The treatments will be administered at your hospital or clinic. Your doctor may advise additional treatments several months after your first round. Sometimes, these maintenance treatments may continue for several years.

Before your treatments

BCG works best when kept at full strength in the bladder. To prevent dilution of BCG by urine, you should limit your fluid consumption to no more than 250ml (1 cup) in the four hours before each treatment. Diuretic medications (“water pills”) increase urine production and have the same dilution effect. They should be taken two hours after your treatment rather than before.

Notify your doctor or nurse before your treatment if:

- You are pregnant
- Your immune system is suppressed by illness or medication, including steroids
- You have a bladder infection, often indicated by increased voiding frequency and urgency, burning with urination and cloudy, foul-smelling urine
- You have had a heart valve replacement
- You have recently seen blood in your urine

BCG treatment

Your doctor or a nurse will administer your BCG treatments. A narrow tube (catheter) is advanced through the urethra into the bladder. After draining any urine, a small volume of BCG solution is put into the bladder. The catheter is then removed. You will be advised when you can go home.

When difficulty is encountered during the insertion of the catheter, BCG treatment may be postponed for one week. The introduction of BCG into the bloodstream or body tissues can cause serious illness.

After your treatments

BCG must be kept in contact with the bladder lining for it to be effective. This may be improved by lying down on your front, back and each side for 15 minutes at a time over one hour. It is best to delay voiding for about two hours after each treatment.

When it comes time to void, this should be done sitting down to avoid splashing. BCG is a live vaccine that can cause harm if it comes into contact with other parts of the body. After emptying the bladder, the BCG must be neutralized. This is done by adding **household bleach** to the urine in the toilet.

For the first six hours after each treatment, pour 250 ml (1 cup) of bleach into the toilet after every void. Let the bleach sit in the toilet for 15 minutes to neutralize the BCG before flushing. Your washroom should be well ventilated since the mixture of urine and bleach can sometimes give off strong fumes. Wash your hands and genitals thoroughly after each void during the first six hours after treatment.

Contact with urine should be avoided for six hours after each BCG treatment. Any area of skin contact should be washed thoroughly with soap and water. Urine splashes should be wiped up with a strong disinfectant or bleach.

Sexual intercourse should be delayed for at least 24 hours after BCG treatment.

After each treatment, it is not unusual to have a headache, low-grade fever (less than 38.5°C or 101°F), poor appetite and low energy for up to three days. Acetaminophen (e.g. Tylenol™) often will help to alleviate these symptoms. More frequent and urgent urination with mild burning is common for a few days.