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Ablative efficacy of sequential intravesical chemotherapy using gemcitabine and mitomycin-C for non invasive bladder carcinoma

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Introduction: To study ablative efficacy, safety recurrence risk of sequential gemcitabine and mitomycin C intravesical chemotherapy in superficial bladder carcinoma. Secondary objective was to study the effect on tumor recurrence.

Materials & Methods: Fifty six patients with non-muscle invasive bladder cancer who were at very high risk of anesthesia with intermediate/high risk tumor or BCG refractory or intolerant tumor were prospectively enrolled. After documenting the tumor size and site on cystoscopy, intravesical chemotherapy (2g gemcitabine in 50 ml saline for 1 hour followed by 40mg mitomycin C in 50 ml saline for another hour) was given weekly for six weeks. Documentation of the tumor size and site were done on cystoscopy. Close monthly follow up for 8 months was done by cystoscopy after completion of intravesical chemotherapy.

Results: Mean patient age was 60.4 yr. The tumor size varied from 0.5 cm to 2 cm (median 1.2 cm) with stage Ta/T1 and low/high grade. Sixteen patients completed the therapy and were evaluated for response. Two of them opted out due to irritative bladder symptoms. Forty six (82.1%) had complete response, 7 had partial response and one expired due to unrelated cause. This is a small study with short follow up (8 months). Further follow up is needed for tumour recurrence.

Conclusions: Chemoresection with sequential intravesical gemcitabine and mitomycin C therapy is a viable option for surgically inaccessible tumor in high risk patients.

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