

Tests & investigations

for bladder cancer





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Call us
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SUPPORT & MORE
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HERE**
to help you in
your FIGHT

Matching you with a patient
with a similar diagnosis – get
one-on-one support from our

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Buddies**

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ABOUT THIS DIGITAL BOOKLET

The Fight Bladder Cancer Patient Information Booklets are a range of free information materials covering the entire bladder cancer pathway and are tailored to each individual circumstance. They offer a wealth of information and real patient experience and stories.

Other free support materials

In addition to our patient information booklets we offer a range of free materials to those affected by bladder cancer, including *Fight Magazine*, the only magazine of its type in the world, full of inspirational patient stories, medical research and clinical trial information. It is available in both print and digital editions.

We also have a **monthly newsletter** for patients that you can opt in to at:

fightbladdercancer.co.uk/contact-preferences

We hope you find this booklet, and the others in the series, useful. Please get in touch with us at **info@fightbladdercancer.co.uk** for more information about how we can support you.

We're here to help!

ENDORSED BY

The British Association
of Urological Surgeons

British Association of
Urological Nurses

British Uro-Oncology
Group



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MERCK

Please remember, no part of this digital publication may be reproduced or used without the written permission of the publisher, Fight Bladder Cancer.

This series of booklets has been prepared by a team of patients and medical professionals working together to give the best guidance for patients. The booklets have been produced in conjunction with the **British Association of Urological Nurses (BAUN)**, the professional organisation for specialist urology nurses in the UK, and are endorsed by the **British Uro-Oncology Group (BUG)** and the **British Association of Urological Surgeons (BAUS)**.

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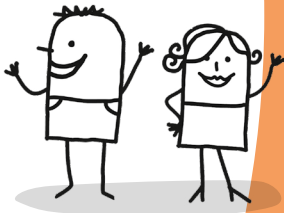
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Our **patient tips** come from **real bladder cancer patients** across the world!



Don't feel you need to read this booklet all in one go. It is designed in bite-sized chunks so you can take it in at your own pace.

Fight Bladder Cancer is a patient-led charity in the UK that exists to:

- **support anyone affected by bladder cancer**
- **raise awareness** of the disease in order to improve early diagnosis
- **campaign for and support research** into this disease
- **affect policy** at the highest level to bring about change

Fight Bladder Cancer has a worldwide reputation and is supported by top international healthcare professionals.

Hello

Are you – or is someone you know – being investigated to try to find the cause of urinary problems, such as blood in your wee?

You may have been told that a possible cause of your symptoms is cancer, but there are other possibilities, such as a urinary tract infection (UTI), urinary stones, cystitis or prostate problems.

This booklet gives an explanation of the tests you are likely to undergo and why they are important. It is written by people like you, who have been through the same tests and worries and know that you are likely to be looking for information and reassurance.

If you suspect that you may have bladder cancer, or another serious condition, you are likely to be experiencing a whirlwind of emotions. Whatever the outcome, it is important for you to remember that you are not alone. There are many people who can give you the support and information you need to get you through.

What is cancer?

Cancer is a genetic disease, the name given to a collection of related diseases that can start almost anywhere in the human body, which is made up of trillions of cells. Cells are the components from which our bodies are built. They divide and grow while they are needed, then stop growing and die when they are not. If something goes wrong in a cell, it continues to divide, making more abnormal cells which eventually form a lump, or tumour. A benign tumour will not spread beyond where it originally formed but a malignant tumour can grow into nearby tissue, and can travel around the body via the blood or the **lymphatic system**.

The lymphatic system is a network of organs and tissues that help the body to get rid of toxins, waste and other unwanted materials by circulating lymph, a fluid containing infection-fighting white blood cells.

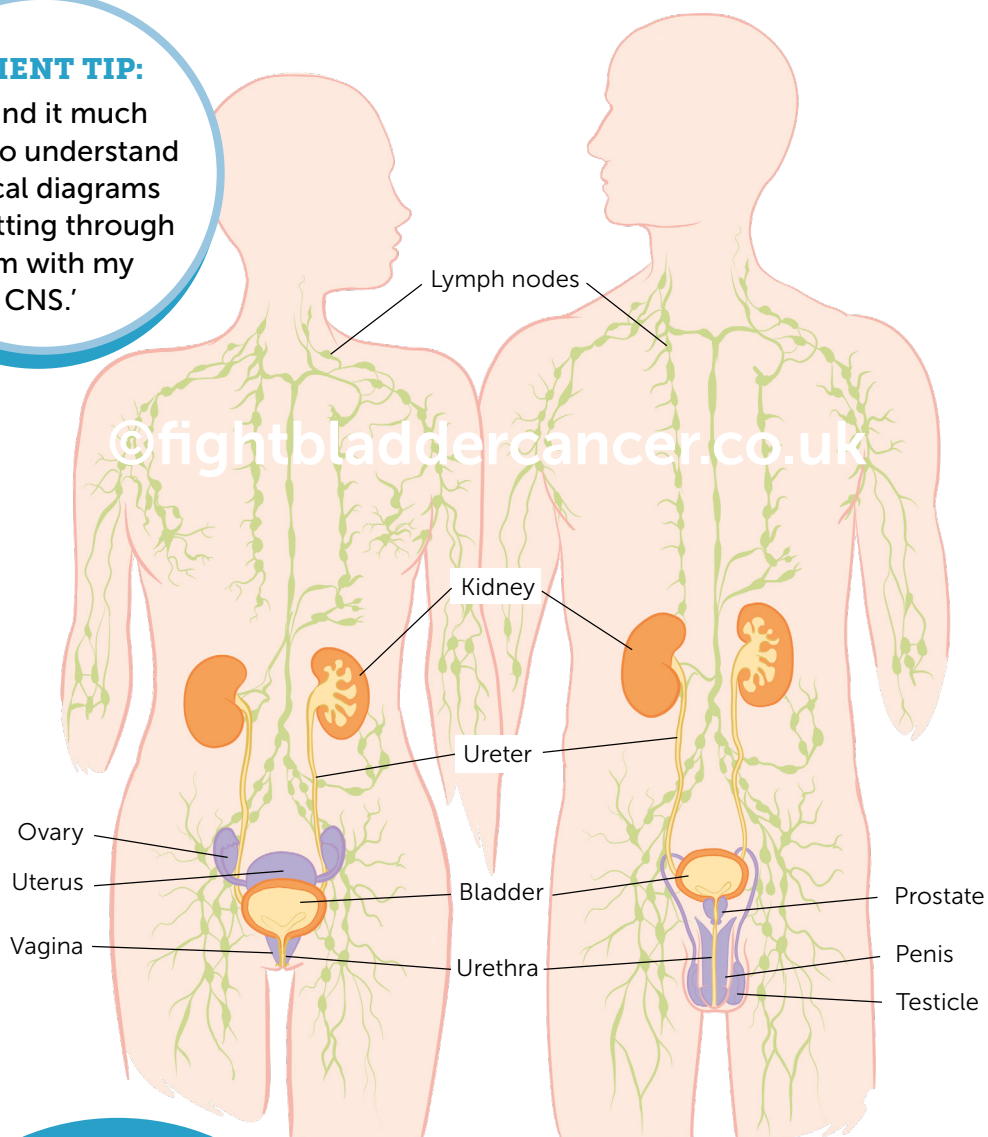


Cancer is only one possibility, so however how hard it may be, try not to jump to conclusions.

WAIT FOR YOUR DIAGNOSIS.

PATIENT TIP:

'I found it much easier to understand medical diagrams by chatting through them with my CNS.'



Remember that every person is different – physically and mentally – so what is right for one person may not be right for another. Investigate, ask questions, talk to people and listen to their viewpoints, then make the best decisions for you.

The urinary system

Urine is formed in the kidneys, which filter the blood, removing waste products and water. Urine then travels to the bladder from the kidneys, via tubes called the ureters, leaving the body through another tube called the urethra. A tumour in the bladder, or anywhere in the system, can disrupt the rest of the urinary system.

Reasons to visit your GP

As with most health issues, each person may experience a different set of symptoms. Therefore if you have any of the following problems, it is a good idea to talk with your GP and, hopefully, rule out bladder cancer as the cause. If the problem does turn out to be bladder cancer, early detection is likely to give you a far better outcome.

Blood in your wee

Noticing blood in the wee is a common symptom of people with bladder cancer, although it is not present for everyone. The medical name for this problem is haematuria. Blood may be clearly visible, or it might be non-visible (called non-visible haematuria). This can be detected with a dipstick test done at your GP surgery.

Most people go to their GP to discuss their symptoms and are referred to their local hospital, where a number of tests will be carried out to try to establish the cause of the problem. There is more detail on these tests in the following pages.

Fortunately, most people will find out that they do not have bladder cancer. However, you may be told that something has been found – such as a tumour – in which case more investigations will be necessary.



Other reasons to go

While most cases of bladder cancer are diagnosed when people see blood in their wee, a few cancers are found in people who do not experience this symptom. Other reasons to talk to your GP about potential bladder issues include:

- **urinary tract infections (UTIs)** that are frequent or that don't respond to antibiotics
- **needing to wee more frequently or with unusual urgency**
- **pain or difficulty when weeing**
- **continence issues**
- **unexplained weight loss**



STOP SMOKING



Whatever your diagnosis, it is crucial that you think about your smoking habits – perhaps even more so if you have, or suspect you have, cancer. If you are a smoker, do please STOP. There will be a best way for you, so talk to your CNS or your GP and ask for support and advice.

The NHS has a dedicated online stop smoking service which offers all kinds of help and advice at

- nhs.uk/live-well/quit-smoking/
- wales.nhs.uk/healthtopics/lifestyles/smoking
- nhsinform.scot/healthy-living/stopping-smoking
- stopsmokingni.info

The personal quit plan is specifically targeted to give you the combination of ideas that is most likely to be successful for you.

It includes the reasons why you should give up – especially the risks of developing cancer, heart and lung disease and the fact that smoking increases the risk of the cancer returning.¹ Most importantly, it also tells you about all the different methods you can use to help you stop; the support on offer; your local stop smoking services; Facebook, Twitter and YouTube support; FAQs; and stop smoking aids, including patches.

Hatch a plan,
get everyone on
your side and
STOP.

If you are not a smoker, or when you have given up, do try and keep away from smokers and smoky atmospheres.

¹sciencedirect.com/science/article/abs/pii/S0302283811007470

Initial tests for bladder cancer

Many of the symptoms of bladder cancer are the same as those experienced by people with a urinary tract infection (UTI). It is important to use several tests to rule out more straightforward conditions before diagnosing someone with bladder cancer. That is why there are a number of procedures used in the testing and assessment process. A full medical assessment is made as well as a full blood screen to assess kidney function.

The most common procedures used to test for bladder cancer are:

- **urine test** (at the same time as a medical assessment and blood screen)
- **ultrasound scan** of your kidneys, ureter and bladder
- **flexible cystoscopy**
- **CT or MRI scan**

Urine test

Urine checks on a sample of your wee are sometimes carried out by your GP at an early stage to help them decide if you need further investigations. There are various types of urine tests that your GP may perform.

The first is a dip test for non-visible blood in the urine. This is usually carried out in the surgery and will help the doctor to decide on further actions. If the urine shows a possible infection, the sample will be sent for analysis. If the analysis confirms an infection, the doctor will prescribe an antibiotic.



The second is a mid-stream specimen of urine (MSU). This sample is usually sent to the hospital laboratory for testing and will help establish whether there is an infection in the urine.

Thirdly, there is a test called urinary cytology, in which a urine sample is sent to a different laboratory for analysis. This test aims to establish if you have any cancer cells in your wee. The test is not 100% accurate (it can miss cancers or think that cancers are present when they are not) so not all doctors use this test. If they do and the test is positive or inconclusive, you are likely to be referred to a urologist for further tests.

Ultrasound scan

Some patients may be offered an ultrasound scan. An ultrasound scan is a good way of seeing into the internal organs of your body, and the radiologist who carries out the scan will be able to see if there are any signs of something abnormal in your bladder or kidneys.

This is the same scan that pregnant women have to check on their babies. It uses sound waves to create an image of your insides. It is a painless and quick outpatient procedure. The practitioner will spread some lubricating gel on your skin, which will feel cold.

PATIENT TIP:

'If I have to drink fluid before my scan, I avoid juice or cordial, it makes me need the toilet; water works best for me.'



They will then gently move a scanner head over your abdomen to display the pictures of your insides on the screen. You will feel some pressure and it may feel a little uncomfortable on a full bladder but it is over quickly.



It may be possible, after these initial investigations, to determine whether or not you have bladder cancer. However, some cases are more difficult to detect, in which case, even if there is an obvious growth in your bladder, further tests will be needed.

Cystoscopy

If a diagnosis has not been possible using urine tests or scans, you will be booked for a cystoscopy, which is the most important test for diagnosing bladder cancer.

A cystoscopy allows the urologist to look inside your bladder, and the images are shown on a large screen (although not all hospitals have this facility). You may be asked whether you would like to see the screen yourself. Many people find this positive but others would rather not look inside their own bladder, so don't be afraid to tell them that if that's how you feel.

Types of cystoscopy

There are two types of cystoscopy: **a flexible cystoscopy (or flexi)**, and **a rigid cystoscopy**.

- for an initial bladder inspection, it is most likely that the doctor or a urology clinical nurse specialist (CNS) will perform a flexible cystoscopy under a local anaesthetic using a thin, flexible instrument called a cystoscope
- a rigid cystoscope is generally used for treatments such as taking a tissue sample for examination in the pathology laboratory, or for removing cancer growths themselves from the lining of the bladder, a procedure known as a Transurethral Resection of Bladder Tumour (TURBT). It is almost always carried out under an anaesthetic, either a general or a regional (such as an epidural or spinal injection that numbs you from the waist down), and is described in another booklet in this series, *What is a TURBT?*

What to do before a flexible cystoscopy

Before any procedure, the medical team should explain to you exactly what they are going to do, any risk factors and the likely outcome. Before your appointment you will be sent information confirming which type of cystoscopy you will be having and the time, date and location of the procedure.

PATIENT TIP:

'Turn up with a full bladder for your flexi. They always ask me for a sample and I have ended up sitting there for ages drinking water in an attempt to go.'

A flexible cystoscopy is usually performed as an outpatient.



In some areas, referrals are made to a rapid access clinic for all urology patients so you may get an examination, urine analysis, ultrasound and flexi all in one clinic.

PATIENT TIP:

'I always have to give a wee sample in before my flexi. It can be hard to do it if you are only given something small to get it in, so I always take a sterile pot for samples that I pick up from my GP beforehand just in case.'

You should only be in hospital for an hour or so and should be able to drive yourself to and from the hospital, although you may prefer to arrange for someone to drive you. You will be asked to sign a consent form before the procedure.

You will also be given instructions on eating and drinking before the operation. If you are having a local anaesthetic, as is usual for a flexible cystoscopy, you can eat and drink normally on the day of the appointment. If you are having a general or spinal anaesthetic, you should not eat or drink for six hours before the operation.

Most medication can be taken as usual on the day of your appointment. Your hospital should tell you what's appropriate for you but if you are unsure, it is best to check in advance.

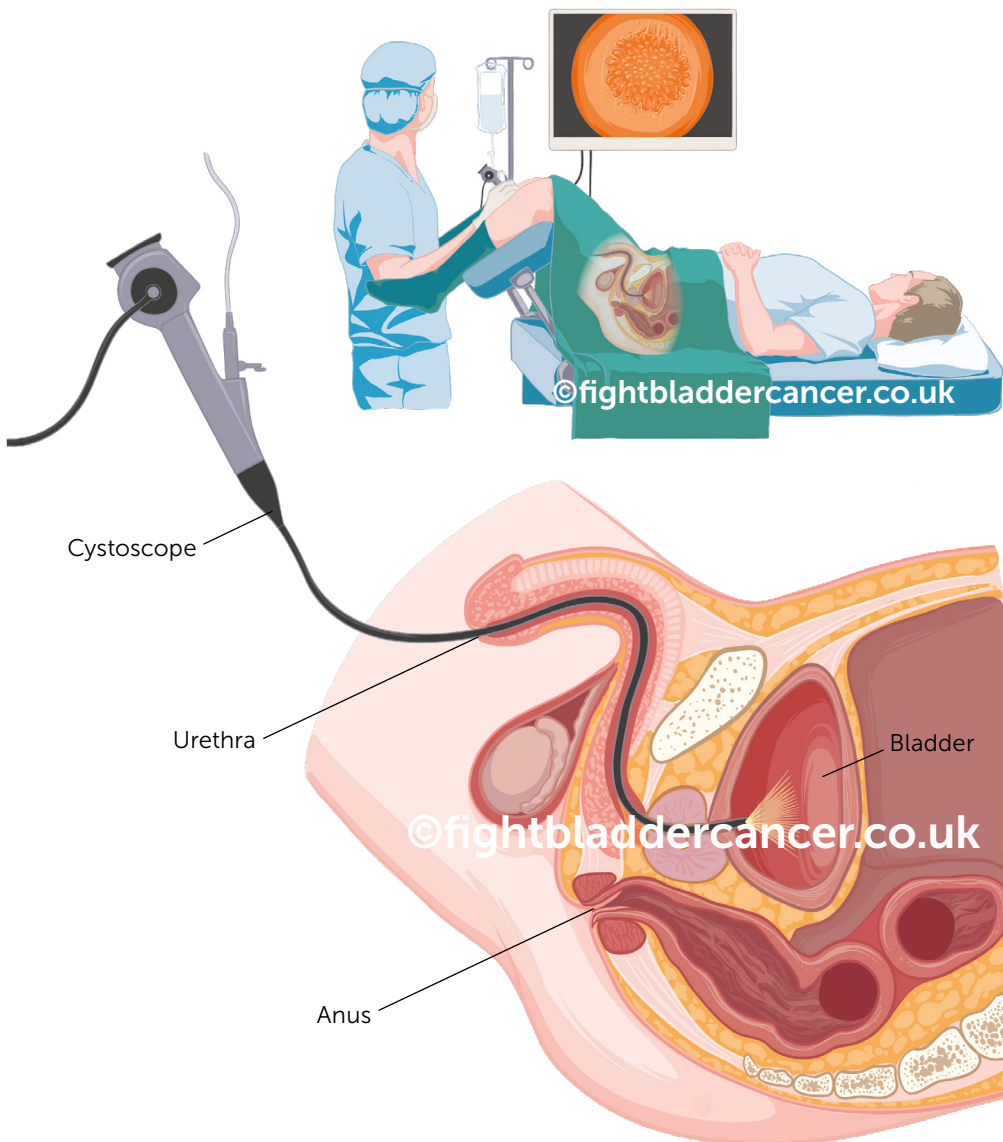
What actually happens?

You will have a urine test to ensure you don't have a UTI at the time and then be asked to put on a gown. The doctor or CNS performing the flexi will run through various checks and explain the procedure, including the risks and side-effects. This is the chance to ask any last-minute questions.

The flexible cystoscope is a thin fibre-optic tube with a light and a camera at one end. It is inserted into your urethra (the tube that carries your wee out of the body) and up into your bladder so that your urologist can examine the bladder lining.

The examination only takes about five to ten minutes in total.

Although many people find the thought of this embarrassing, it is a straightforward procedure.



Is a cystoscopy painful?

For a flexible cystoscopy, the doctor or CNS will use a local anaesthetic gel to numb your urethra. This will reduce any discomfort when the cystoscope is inserted into the urethra. The procedure may feel uncomfortable or you may feel the urge to wee.

PATIENT TIP:

‘Try not to worry too much about the procedure. My doctor was brilliant and reassuring. It was a lot easier and quicker than I anticipated.’

PATIENT TIP:

'Keep drinking after procedures; water preferably but I'm a bit fed up with water now so it's a nice decaf cuppa for me.'

After a flexible cystoscopy

A cystoscopy is a very safe procedure. Side-effects are normally slight, and serious complications are rare. When you are discharged from the hospital, you will be given a contact number to ring if you have any questions or problems.

It is quite normal to experience some side-effects for a few days after the procedure, such as:

- a burning sensation when you wee; this is quite normal and should stop within a few days – if it persists, then check with your GP in case of infection
- passing a small amount of blood in your wee – this is also nothing to worry about unless it is severe or persistent
- some muscle pain

Drinking plenty of water can ease the symptoms, and you may wish to take paracetamol for the first 24 hours to help you with any pain or discomfort. It is best to avoid caffeine and carbonated drinks.

Unusual side-effects

There is a small risk of developing a UTI after a cystoscopy, so you should see your GP if you experience any symptoms of infection, such as a high temperature, as these infections can be treated with antibiotics. Some people find they have difficulty weeing. This is uncommon in women but men with pre-existing problems are at a higher risk.

Very occasionally, you might experience some other side-effects.

Contact your GP or the hospital where you had the procedure immediately if:

- your wee is so bloody that you can't see through it
- you have persistent clots or tissue in your wee after the first few days
- you have severe pain when you wee
- your pain or bleeding lasts more than a few days
- you have a temperature of 38°C (100.4°F) or above
- you are unable to wee more than eight hours after the procedure
- your wee smells unpleasant
- you have nausea or vomiting
- you have pain in your lower back or side



The best advice is if you are worried about anything, just ask. Don't suffer in silence.

CT and MRI scans

Scans are becoming more common as diagnostic tools for bladder cancer.

CT scans

Increasingly, patients who present with blood in their wee are given a computerised axial tomography (CAT or CT) scan. These scans are a special type of x-ray that provide a detailed picture of the inside of your body, focusing on the bladder, ureter and kidneys. Most patients will have a CT urogram, which involves using a contrast dye, either ingested or given as an injection, to give a clear impression of what is going on. The contrast medium may make you feel rather hot but should not otherwise be a problem.

However, if your kidney function is impaired, the scan will be given without the contrast because it can be toxic to the kidneys; this is known as a KUB scan. You should also let your doctor know if you are allergic to iodine or seafood as these may also mean a CT urogram is not appropriate.

PATIENT TIP:

'The metallic taste from contrast dye fades quickly but remember to drink plenty of water afterwards to flush it out properly.'

MRI scans

A magnetic resonance imagination – or MRI – scan uses magnetic energy to build up a picture of the inside of your body. It is a painless procedure that is done as an outpatient appointment. You will change into a gown and you must be sure not to be wearing any metal. Make sure the doctor is aware if you have any implants.

During the scan, you lie in a tunnel in the scanner, so if you are feeling anxious about that, talk to the doctor in advance. The tunnel may seem quite small so people with claustrophobia find it uncomfortable. As the scanner is very noisy, you may be given earplugs or earphones – and you may even be offered a choice of music.

PATIENT TIP:

'The contrast dye given during a CT scan gives you a warm sensation as if you have wet yourself. I was assured that nobody actually has!'



PATIENT TIP:

'An MRI scan can be long. They may ask if you would like music playing, or you may be able to take your own to help relax you.'

PATIENT TIP:

'Remember not to jiggle around to your music as you will need to stay still.'

PATIENT TIP:

'Loose fitting clothes for scans may be ok, but remember to check for metal such as fasteners or underwires as on a bra. I also noticed that some labels have metallic threads.'

Contra-indications for CT and MRI scans

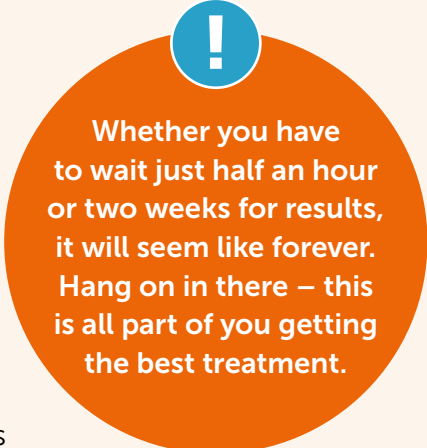
Both of these scans are painless and safe but there are some restrictions on who they are suitable for. For example, they are not always possible for people who have certain types of implants fitted, such as a pacemaker.

For all scans, you will need to let the hospital know if you have any allergies or kidney problems, or if you're taking diabetes medication, as special arrangements may need to be made. You should also let the hospital know if you are pregnant.

When will I know if I have bladder cancer?

The tests you have been through should be enough for your medical team to assess whether or not you have bladder cancer and they will give you the results of the investigations.

Sometimes, the problem will be obvious straight away and you will be given a diagnosis before you go home. Alternatively, it could be that you have to wait a few weeks for all the experts to review the results of your tests before they can let you know.



Whether you have to wait just half an hour or two weeks for results, it will seem like forever. Hang on in there – this is all part of you getting the best treatment.

If it is not cancer

If it is not cancer, you will be referred to the appropriate consultant or medical team to deal with your specific problem. If the tests you have had have ruled out cancer but not established the cause of your symptoms, then your doctor will decide what additional tests you will need.

If you do have bladder cancer

If you are diagnosed with cancer, there is nothing that can prepare you for that news and most people find they experience a whirlwind of emotions. Along with rising panic, you may be feeling overwhelmed, frightened and probably angry.



PATIENT TIP:

‘Find out who your clinical nurse specialist is, your CNS. This is the best point of contact for when you need information or guidance.’

As a newly diagnosed bladder cancer patient, you are embarking on a journey. **Right now, as you begin this journey, the most important thing you should know is: you are not alone.**

There are thousands of others living with this disease, and there are people and resources to help you find the information you need to help you make the best choices, and the support you need to get you through. In the first place, your clinical nurse specialist (CNS) will give you other books from this series, depending on your diagnosis.

What could come next?

If you do have bladder cancer, at this stage, the medical team will not have all the information they need to be able to decide which treatment is best for you.

In order to do this, they may take a sample of cells from your bladder – known as a biopsy – to examine in the pathology laboratory. This sample will be taken during a second cystoscopy, usually a rigid cystoscopy. Full details are in the next booklet in this series, *What is a TURBT?*

After all the various tests have been completed, you will be offered another appointment with your urologist, at which they will explain their findings and what they propose to do in terms of treatment. Your CNS will order the most appropriate booklet from this series, depending on the outcome of the tests.

National Cancer Registry & Analysis Service (NCRAS)

Information on cancer incidence, diagnosis and treatment is recorded by the UK government in order to assess and improve the quality of service, treatment and research.

Information recorded includes the name, address, age, sex and date of birth of patients; the type of cancer and how advanced it is; and the treatment received.

The NCRAS has the legal authority to collect this data without requesting consent. The data can only be released for specific medical purposes. To view your own data, or to opt out, you can write to the Director NCRAS, Public Health England, Wellington House, London SE1 8UG.

More information can be found at ncin.org.uk

Remember ...

Ask for information, help and support when you need it – from your GP, your CNS or from us here at Fight Bladder Cancer. **You are not alone.**



What do patients say?

We chatted with Paul Michaels about his experience of being tested for bladder cancer.



What did it feel like to be tested for bladder cancer?

My initial symptoms were back ache and blood in my wee. When I was sent for tests, I actually thought I was being tested for kidney stones – no one mentioned bladder cancer at the outset.

The tests themselves were relatively quick and just a bit uncomfortable.

How was Fight Bladder Cancer able to help?

When I first got my diagnosis, FBC was a great source of support and information. The website is full of helpful tips and documents to download. In addition, the people at the charity are very knowledgeable, supportive and have the experience to back up their advice.

Tell us why you like working with and volunteering for Fight Bladder Cancer

I volunteer because it is an enjoyable experience, both from the aspect of helping others in similar situations, and also gaining knowledge and support for my own well-being. It's a great charity run by great people.



How Fight Bladder Cancer can support YOU

Fight Bladder Cancer is a UK-based charity that was founded and is led by bladder cancer patients and their families, so we know exactly what you are going through. Depending on where you are in your cancer journey, you – and those closest to you – are likely to experience a range of emotions from panic and fear to confusion and anger – this is completely normal. The most important thing that you should know is **you are not alone**. We're here to support you and guide you to the people and resources you need.

Our four main principles are: **offer support, raise awareness, campaign for research and affect policy**. So as well as being involved internationally in the development of knowledge about bladder cancer and its treatment, we have a strong support network that includes:

- a **dedicated website** at fightbladdercancer.co.uk with a wealth of information about bladder cancer, its treatment and how people cope
- our **private online Facebook forum** at facebook.com/groups/BladderCancerUK
- our free **FIGHT magazine**, which has articles on all aspects of bladder cancer and is available in print or digital editions
- **Fight Club support groups** in many locations throughout the UK
- a **Bladder Buddy service** which will team you up with a patient or carer who has gone through similar experiences
- a **regular e-newsletter**
- a **public Facebook page** at facebook.com/BladderCancerUK
- a **Twitter feed** [@BladderCancerUK](https://twitter.com/BladderCancerUK)

PATIENT TIP:

'I jump on to the support forum when I'm low. Chances are that someone else is feeling or has felt the same and so I never feel stupid or alone.'



Fight Bladder Cancer Support – our private forum

On our private online members-only forum, patients, carers, families and professionals can discuss any worries or issues 24/7, find out about treatment options, or raise any other questions. Everyone is welcome.



PATIENT TIP:

'The great thing about the private forum is being able to post questions, no matter how silly or trivial they may seem, and get immediate answers from others in the same position.'

Join our private online forum at:
[facebook.com/groups/BladderCancerUK](https://www.facebook.com/groups/BladderCancerUK)

Can you help us in the fight against bladder cancer?

Supporting bladder cancer patients and their families is our primary objective. We are facing a growing demand for our services and urgently need more funds, so we rely on the generosity of friends like Paul to support our work.

Listen to what Paul said about FBC:

'I've loved getting involved with Fight Bladder Cancer and working closely with other patients. From running my own IT business I know that starting things up is tough. Repeated donations are the heartbeat of the charity which is why I give Fight Bladder Cancer a monthly donation. It helps them plan ahead and deliver their vision.'



Your donations matter

A donation from you would ensure that we can be here when it matters most, to help improve the lives of people affected by bladder cancer.

Ways that your donations can help:

- providing support and information to everyone who calls and emails
- setting up and running patient support groups (Fight Clubs) around the UK
- connecting patients through our Bladder Buddy scheme
- spreading awareness of bladder cancer and campaigning to improve early diagnosis

We rely on voluntary donations and with your support can make a difference to the lives of thousands of people every year. Whatever you choose to do – whether you want to make a one-off donation or set up a monthly gift, do some fundraising, volunteer or raise awareness – we **thank you** – from the bottom of our hearts.

Fundraising with transparency & credibility

- we are open, honest and transparent
- we will always comply with the law as it applies to charities and fundraising – we will be respectful of your rights and your privacy
- we will be fair and reasonable – treating all supporters and the public fairly – showing sensitivity and being adaptable
- we will be accountable and responsible – managing our resources wisely

We are committed to ensuring that we meet the requirements of the Fundraising Regulator and follow the Code of Fundraising Practice to ensure we meet the highest standards, so you can donate and fundraise for us with confidence and trust. You can read our fundraising promise at **fightbladdercancer.co.uk**

This is how you can make a donation to Fight Bladder Cancer ...

Online: The easiest way to donate is via the donation button on our website fightbladdercancer.co.uk/make-a-donation where we offer a secure platform to make donations.

By post: If you prefer, you can send a cheque (payable to Fight Bladder Cancer) to our office at **Fight Bladder Cancer, 51 High Street, Chinnor, Oxon OX39 4DJ.**

Call the office: If you'd rather speak to someone in the team about donating, fundraising or volunteering – then call us on **01844 351621.** We would really love to chat with you.



Registered with
**FUNDRAISING
REGULATOR**

Finally ...

The aim of these patient information booklets is to provide comprehensive but straightforward information to support you in your fight against bladder cancer.

We understand what you are going through and we know you will have other questions.

We are here to help.

REMEMBER, YOU CAN CONTACT US AT ANY TIME FOR SUPPORT

or to engage with us in fighting bladder cancer

via our website at

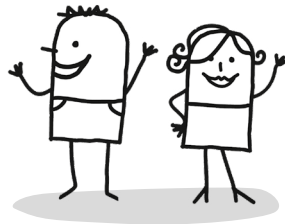
fightbladdercancer.co.uk

via our online forum at

[facebook.com/groups/BladderCancerUK](https://www.facebook.com/groups/BladderCancerUK)

by email at **info@fightbladdercancer.co.uk**

by phone on **01844 351621**





My useful information

Hospital number _____

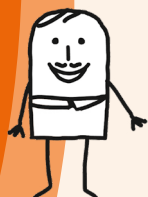
NHS number _____

GP _____

Consultant _____

CNS _____

Other MDT members _____



If you come across terms you don't understand, you will find a comprehensive glossary in our *FIGHT* magazines or online at

fightbladdercancer.co.uk/glossary

Everyone associated with the preparation and production of these booklets has made every effort to ensure that the information was correct at the time of going to press. However, the booklets are not intended as a substitute for professional medical advice. Anyone affected by bladder cancer, or any other medical problem, must seek the care and guidance of a suitably qualified doctor or medical team. Neither the publisher, nor contributors, nor anyone associated with them will take responsibility for any actions, medical or otherwise, taken as a result of information in this book, or for any errors or omissions.

This booklet is part of a series that covers all aspects of bladder cancer. The booklets are available free in print or digital format. You can order them via your clinical nurse specialist or direct from Fight Bladder Cancer at **fightbladdercancer.co.uk**

THE SERIES INCLUDES:

- Tests & investigations
- What is a TURBT?
- Low-risk & intermediate-risk, non-muscle-invasive bladder cancer
- High-risk, non-muscle-invasive bladder cancer
- Muscle-invasive bladder cancer
- Living with a stoma
- Living with a neobladder
- Advanced bladder cancer
- Surviving bladder cancer
- Diet & nutrition

ENDORSED BY

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British Uro-Oncology Group

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