

Bladder Cancer – QUESTIONS

Clinical Case Conference
UCSD Radiation Oncology
SA-CME

1. What percentage of bladder cancers are superficial at diagnosis?
 - A) 5%
 - B) 25%
 - C) 50%
 - D) 75%
2. Which of the following is a relative contraindication to bladder preservation?
 - A) Multifocal
 - B) Presence of extensive in situ disease
 - C) Hydronephrosis
 - D) Subtotal resection
 - E) All of the above
3. What is the MOST appropriate treatment of a 55-year-old patient with diffuse superficial transitional cell carcinoma of the bladder that has recurred after transurethral resection of the bladder tumor (TURBT) and intravesical BCG?
 - A) Radical cystectomy
 - B) Intravesical chemotherapy
 - C) Systemic chemotherapy
 - D) Radiation therapy and chemotherapy
4. A 65-year-old male with an 80 pack-year smoking history presents to his urologist with painless hematuria. A cystoscopy identifies a 2.5 cm mass that is biopsied in the office and demonstrates urothelial carcinoma. A staging workup including a CXR, CT of the abdomen and pelvis, and bone scan show no definite evidence of regional or distant metastasis. There is no hydronephrosis. The patient wishes to preserve his bladder and does not want a cystectomy. What is the MOST appropriate next step in the management of this patient?
 - A) Begin cisplatin-based chemoradiotherapy
 - B) Perform a maximal transurethral resection of the tumor
 - C) Begin cisplatin-based chemoradiotherapy followed by adjuvant chemotherapy
 - D) Begin neoadjuvant cisplatin-based chemotherapy followed by concurrent chemoradiotherapy
5. The BC2001 (James et. al., NEJM 2012) study was a phase III trial that randomized patients with muscle invasive bladder cancer between chemoradiotherapy versus radiotherapy alone. Which of the following is true about this trial:
 - A) Concurrent chemotherapy was cisplatin.
 - B) Concurrent chemotherapy was 5FU + MMC.
 - C) There was an overall survival benefit.
 - D) Cystectomy rate at 2 yrs was significantly lower in chemo-RT arm.