Intravesical Therapy

With intravesical (meaning "within the bladder") therapy, the drug is put directly into your bladder through a catheter (a thin tube that is placed through the urethra). The catheter only stays in for a few minutes. You hold the drug in your bladder for 1 to 2 hours and then urinate it out. In general, you receive 6 weekly treatments.

Intravesical Immunotherapy

Immunotherapy is a treatment that boosts the ability of your immune system to fight the cancer. Bacillus Calmette-Guerin (BCG) is the immunotherapy drug used for bladder cancer. BCG has also been used as a tuberculosis vaccine. Generally, BCG is chosen for patients with stage T1 cancer or carcinoma in situ (CIS). These patients have a higher risk of cancer returning and spreading than those with stage Ta cancer. BCG is inserted into the bladder through a catheter. The therapy triggers the immune system to attack bladder cancer cells. It is one of the most effective treatments for bladder cancer, especially CIS. It is not recommended if you have a weak immune system or certain symptoms. Four out of 100 people given BCG end up with the bacteria infecting their whole body. More common side effects can include:

- Needing to urinate often
- Painful urination
- Flu-like symptoms
- Fever or chills
- Joint pain

Intravesical Chemotherapy

Chemotherapy drugs kill cancer cells. With intravesical chemotherapy, these drugs are placed directly into the bladder, rather than in the bloodstream. As a result, many common side effects - like hair loss - can be avoided. Because the drugs only reach the bladder lining, this type of treatment is only recommended for noninvasive bladder cancers.

Mitomycin C is the most common chemotherapy drug used for intravesical therapy of bladder cancer. Common side effects include:

- Needing to urinate often
- Painful urination
- Flu-like symptoms
- Fever or chills
- Joint pain

Repeat Intravesical Therapy

Some patients may respond to repeat therapy if the cancer returns. However, if you have high-grade Ta or T1 cancer or CIS, or you tried BCG and it did not work, you may need something else to control the cancer. In this case, you should talk to your doctor about surgery to remove the bladder.

Maintenance Therapy

After the bladder is free of disease, your doctor may suggest more treatment with the same drugs to keep the tumor from coming back. This may happen at the first 3-month appointment after treatment. Maintenance therapy seems to be more helpful for people who have had BCG than for those who have had chemotherapy drugs.