Abstract 568: Bladder Cancer Patient Experiences: A Comparison of Urban and Rural Areas

Lydia E. Makaroff^{1,2}, Alex Filicevas¹, Patrick Hensley^{3,6}, Ashish M. Kamat^{1,4,5,6,7}

1. World Bladder Cancer Patient Coalition; 2. Fight Bladder Cancer (UK); 3. University of Kentucky (USA); 4. International Bladder Cancer Group; 7. MD Anderson Cancer Center (USA).



PURPOSE / OBJECTIVES

Few global studies exist detailing the lived experiences of bladder cancer patients. The objective was to collect the views and experiences of people with bladder cancer worldwide.

BACKGROUND

Bladder cancer patients encounter unique challenges and advantages in urban and rural environments, significantly influencing their path from diagnosis to treatment.

While numerous studies explore bladder cancer from clinical and therapeutic perspectives, there is a noticeable gap in research addressing patients' experiences based on geographical locale. This study aims to bridge this gap by offering a comparative analysis of urban versus rural experiences.

METHODS

The World Bladder Cancer Patient Coalition and IQVIA formulated an online survey, designed to capture the multifaceted experiences of bladder cancer patients.

Available in various languages, the survey was accessible from October 2021 to February 2022. Responses underwent systematic analysis, with parameters including gender, time since diagnosis, age, region, and disease stage, forming the sub-analytical categories.

Significant disparities emerge between urban and rural bladder cancer patients. Rural patients particularly face prolonged diagnosis times, less clear communication from healthcare providers, and experience greater challenges in accessing treatment.

These findings underscore the need for a re-evaluation of communication strategies and healthcare infrastructure, especially in rural areas.

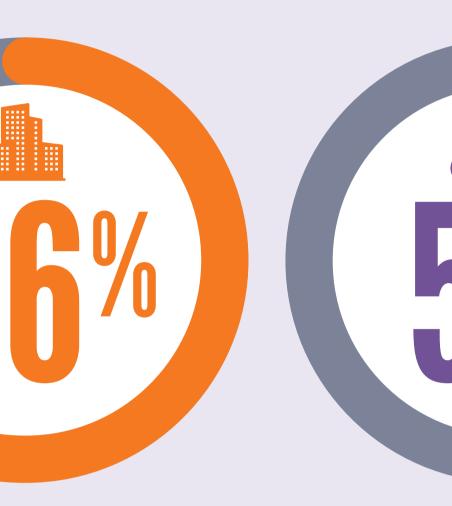


RESPONDENT CHARACTERISTICS Respondents came from a total of 45 countries The percentage of respondents by geographic area was: City or urban area including suburbs White the percentage of respondents by geographic area was: Small city or med / large town 33 % Breakdown of respondents by country 8, 191 Procedure of respondents by geographic area was: Name of the percentage of respondents by geographic area was: Initial bladder cancer diagnoses for survey respondents Initial bladder cancer diagnoses for survey respondents

RESULTS

We received a total of 1,198 responses from 45 countries. Key findings are summarized in the following graphs, highlighting the comparative experiences of urban and rural patients:

"Very clear" communication from doctor about testing



My wait ti diagnosis more tha months



"Very easy" for me to travel for treatment



Il" clear ication tor about

"Quite difficult" or "very difficult" for me to travel for treatment

doctor 5 or more

times before

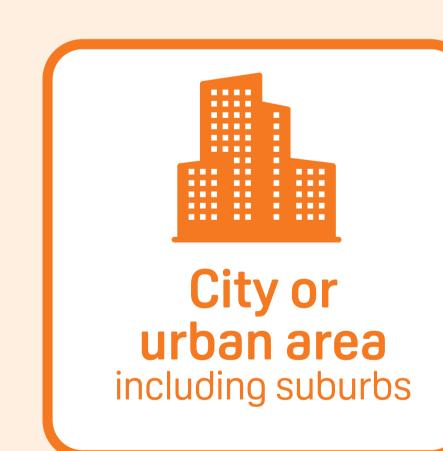
diagnosis





I had a radical cystectomy, and the doctor did not talk to me about treatments that would allow me to keep my



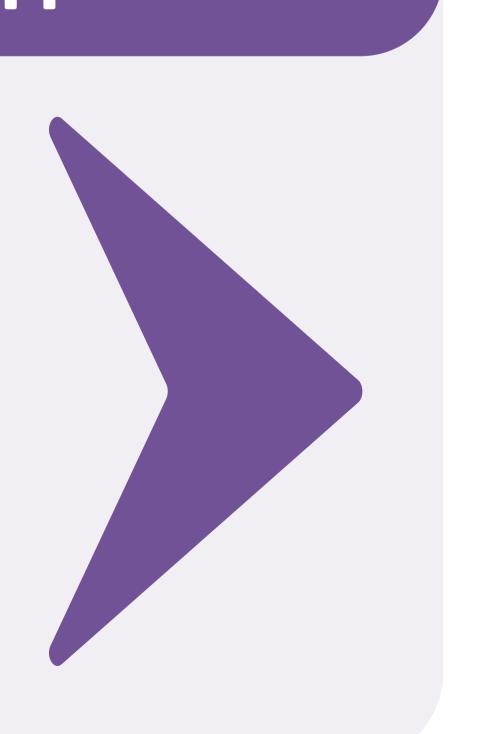




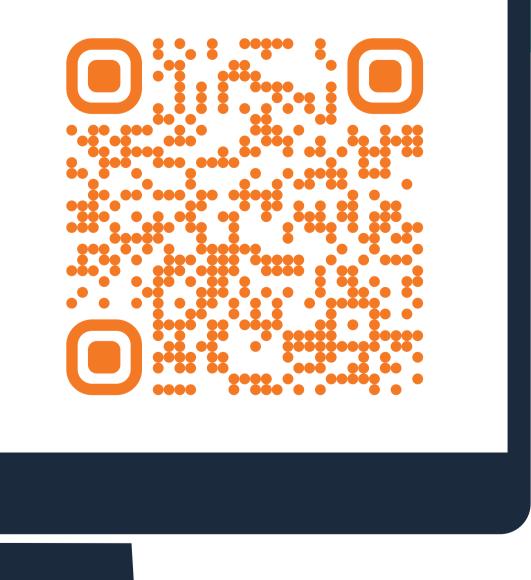
FUTURE DIRECTIONS FOR RESEARCH

This research serves as a stepping stone for further investigations aimed at fostering a more patient-centric approach to bladder cancer care.

Limitations to consider involve the inherent biases of online survey distribution and the possibility of certain regions being underrepresented.



Scan the QR code to download the full report.



Acknowledgements: We gratefully acknowledge the patients and organisations for contributing to the survey and/or for supporting the development of the full report (available at https://worldbladdercancer. org/patient-survey-report.pdf): Alessandro Boni, Tony Cornacchia, Melanie Costin, Ferg Devins, Dr. Makarand Khochikar, Dr. Rajeev Kumar, Dr. Mohammed Shahait, Dr. Ignacio Duran, David Guttman, Ekaterina larkova-Vizuroiu, Helen Lacy, Robert McConkey, Jack Moon, Lauren Pretorius, Anita Eik Roald (Norwegian Bladder or Kidney Cancer, The Netherlands), All.Can International, Association of Cancer Patients in Finland, European Association of Urology, European Association of Oncological Patient Organisations, Société Internationale d'Urologie, Urotoday.com, Marylou Bosco and Adam Taylor (IQVIA), and Emma Moore and Hatty O'Sullivan (formerly at IQVIA)

had non-muscle invasive

bladder cancer

had muscle-invasive

bladder cancer

had advanced /

metastatic bladder

cancer