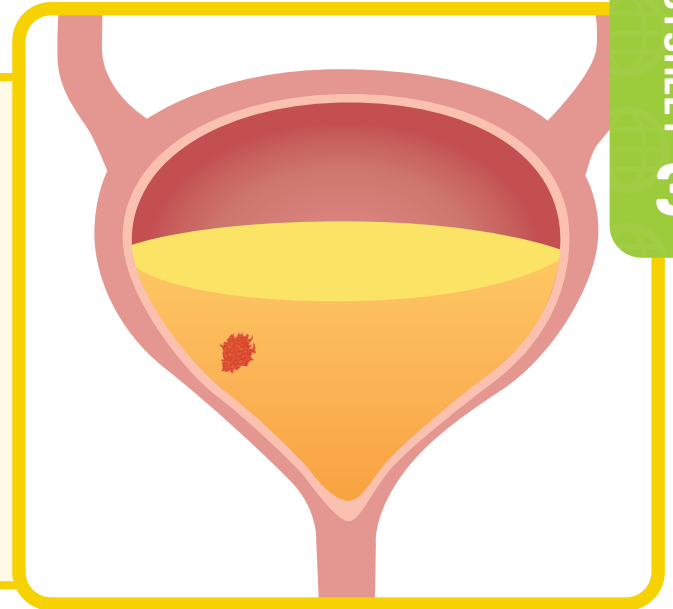


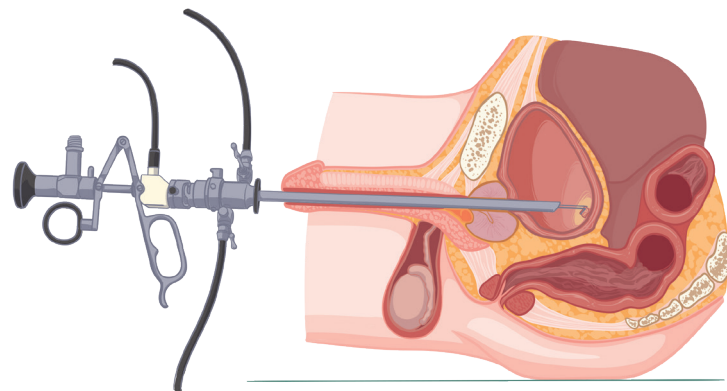
What is TURBT?

To investigate further when some abnormalities have been found and to make a full diagnosis, the urologist may suggest that the patient have a procedure to take a sample – a biopsy – of some of the abnormal cells, or even to remove any abnormal tissue or cancerous cells, if possible. **This is known as a TURBT, which stands for Transurethral Resection of Bladder Tumour.**



Why is TURBT important?

TURBT is crucial for diagnosing bladder tumours and determining whether they are cancerous or benign. It also plays a vital role in the treatment process by removing cancerous growths, helping to manage and treat bladder cancer more effectively.



How is TURBT performed?

During TURBT, a thin, flexible tube called a cystoscope is inserted through the urethra and into the bladder. This cystoscope has a light and camera, allowing the surgeon to visualize the inside of the bladder. The surgeon then uses a special tool attached to the cystoscope to remove or biopsy the tumour.

The TURBT Procedure



Preparation



Anaesthesia



Resection



Post procedure care



Preparation > Before the procedure, patients may undergo tests and receive instructions to prepare for surgery. This may include fasting and discussion of any medications. You will come into the hospital either the afternoon before or the morning of your surgery and will generally be able to leave within 48 hours. The clinic will have supplied you in advance with information on what to do beforehand and where to go.



Anaesthesia

TURBT is carried out either

under a general or spinal anesthetic. Your consultant or anaesthetist will discuss the options with you before the operation so that you can decide which is best for you.



Resection

Using the cystoscope, the surgeon

carefully removes or biopsies the tumour. This is done in small, controlled portions to minimize damage to healthy tissue.

After the tumour is removed, the surgeon may use heat or electricity to cauterize (burn) any sites of bleeding and reduce the risk of infection.



Post-procedure

After TURBT, an indwelling or foley catheter may be

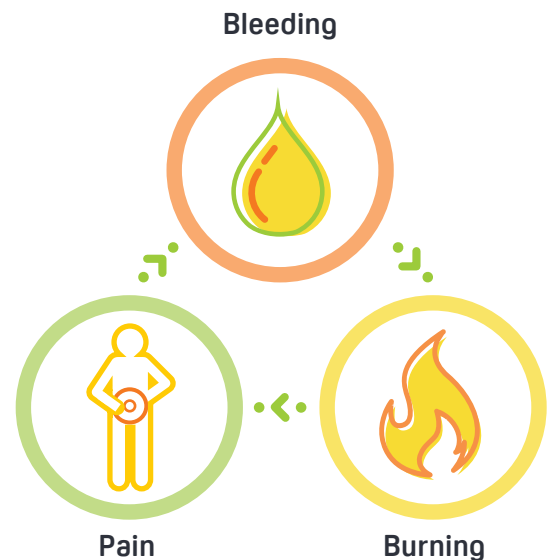
inserted into the bladder to help with urine drainage for a short period. Recovery typically allows for discharge within 48 hours, with detailed at-home care instructions provided upon discharge. Follow-up care is essential to monitor healing, discuss biopsy results, and plan any further treatment if necessary.

Are there side effects to a TURBT?

The most common side effects of the TURBT are bleeding, pain, and burning when urinating.

These may be irregular and can last for up to one month. In some circumstances, the urologist may choose to leave a fine plastic tube (catheter) in the patient's bladder for a day or two.

This helps to minimise problems occurring from bleeding, clot formation in the bladder or expansion of the bladder due to possible storage of excess urine or blood. Even if the tumour is small, a catheter may be inserted to rinse the bladder out if the bleeding persists.



Recovery and Aftercare



Hospital stay Most patients can expect a short hospital stay, typically one to two days, depending on the complexity of the procedure.



Postoperative care Patients may experience some discomfort, blood in the urine, or urinary urgency initially. Medications may be prescribed to manage pain and prevent infection.



Follow-up Regular follow-up appointments are essential to monitor recovery and address any concerns. This follow up is in the form of a bendy camera called a flexible cystoscopy periodically according to the stage/grade of your cancer. Additional treatments, such as chemotherapy or immunotherapy, may be recommended based on the pathology results.



Questions to ask your healthcare team

- What information will the TURBT results provide?



- What is the expected duration of the TURBT procedure?



- Are there additional treatments with TURBT?



- How should I prepare for TURBT?



- What is the anticipated recovery time following the TURBT?



- What symptoms should make me call my nurse or doctor right away?



- When can I expect to receive the pathology report results and what is the communication process for sharing them with me?



- Could you share your expertise and experiences with the TURBT procedure?



- Are there dietary or lifestyle modifications that I should consider during the recovery phase?



- Can you provide information on the success rates or outcomes associated with TURBT in cases similar to mine?



Notes



A large rectangular area with a yellow border, containing 25 horizontal dotted lines for writing notes.

The **World Bladder Cancer Patient Coalition** gratefully acknowledges the support of Astellas, AstraZeneca, Bristol Myers Squibb, Gilead, Ferring and Seagen. The content of this publication remains the sole responsibility of the World Bladder Cancer Patient Coalition.