



# BLADDER CANCER

**February 19, 2025**



**World Bladder  
Cancer Patient  
COALITION**

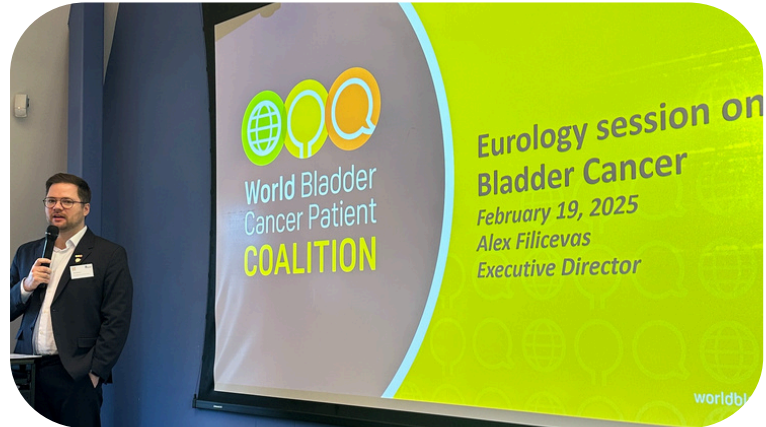


European  
Association  
of Urology

## Introduction

The Bladder Cancer Awareness Meeting brought together experts, policymakers, researchers, and patient advocates to discuss key issues surrounding bladder cancer prevention, diagnosis, treatment, quality of life, and research.

The discussions highlighted the importance of patient-centred policies, access to innovative treatments, and the need for continued investment in research, including on early detection. The event allowed stakeholders to collaborate, share insights, and advocate for meaningful change in bladder cancer care.



## Prevention

Steven Baylis, a research fellow working for the the European Respiratory Society shared a presentation 'Towards a Tobacco-Free Future: EU Legislation and the Feasibility of a Tobacco Endgame for Member States'. In his talk, he highlighted legislative challenges and opportunities in implementing stricter tobacco control measures, outlining the necessity for policy revision at the EU and national levels. His insights emphasised that effective legislation could dramatically reduce tobacco-related bladder cancer cases and he proposed a potential legal pathway for generational sales bans.

MEP Alessandra Moretti (Italy, S&D) reinforced the need to prioritise health in EU policymaking in her video address. She argued that prevention efforts, particularly those targeting tobacco cessation, require stronger enforcement and funding to drive long-term impact. Their discussion underscored the urgency of policy-driven approaches in tackling bladder cancer at its root cause and the importance of collaborative policy support from patients and scientific communities for these preventative policy measures.

## Key takeaways:

- 1** Strengthening EU tobacco control legislation is crucial to reducing the incidence of bladder cancer, as smoking remains one of its primary causes. EU-level action can support national policies in moving towards a tobacco-free generation.
- 2** Sustained political will and public health advocacy are needed to ensure tobacco prevention efforts are implemented and enforced. Health must remain a central EU policy priority to achieve long-term cancer prevention goals.

## Diagnosis and treatment

Piet Klein from the Patient Association for Bladder and Kidney Cancer in the Netherlands, shared personal experience with bladder cancer, highlighting the distressing limitations of current treatment options in both non-muscle-invasive bladder cancer and muscle-invasive and advanced bladder cancer. His testimony reinforced the need for patient-centred approaches in research and treatment of bladder cancer as well as evolving research into more options for bladder cancer treatment.

Dr Thorsten Ecke, a urologist representing the European Association of Urology from Germany, outlined several barriers to timely diagnosis and effective treatment of bladder cancer. He emphasised that blood in the urine, the most common symptom, is often misdiagnosed, particularly in women, who are frequently prescribed antibiotics. He also pointed to inequities in diagnostic tools across Europe, noting that while Western Europe uses flexible cystoscopes, many Eastern European countries still rely on rigid instruments, which are more painful and may discourage timely follow-up. These systemic disparities contribute to delays in detection and increase the risk of later-stage diagnoses. He stressed the importance of improving diagnostic accuracy and increasing access to immunotherapies as a treatment option.

He also referenced the White paper on Bladder Cancer, published by the EAU and WBCPC, which has been developed for policymakers, urologists, and healthcare professionals to outline key recommendations for improving bladder cancer care and treatment accessibility.



Ondřej Dostál, Member of the European Parliament and patient right's lawyer, offered his policy perspective. He questioned whether second- and third-line treatments for bladder cancer are used primarily for medical reasons or influenced by economic constraints. In response, Dr Ecke clarified that treatment sequencing is guided by clinical guidelines and patient needs, with financial considerations having limited influence on medical decision-making.

This exchange highlighted the importance of transparency in treatment access and the need for policies that support equitable access to innovation.

## Diagnosis and treatment

Josephine Mosset, from Cancer Patients Europe, addressed the persistent inequalities in cancer treatment access across Europe, highlighting how structural barriers often leave patients in smaller or lower-resourced countries waiting longer for life-saving therapies. She pointed to the recently implemented EU Health Technology Assessment (HTA) regulation as a promising step forward, as it aims to harmonise joint clinical assessments of new oncology treatments across Member States. Importantly, she emphasised that this regulation now mandates patient and clinician involvement in the evaluation process, a major shift toward more democratic, transparent healthcare decision-making. She called for community-driven advocacy to ensure that the regulation is implemented meaningfully, with accessible formats and real-world patient experience embedded in every stage of assessment.



### Key takeaways:

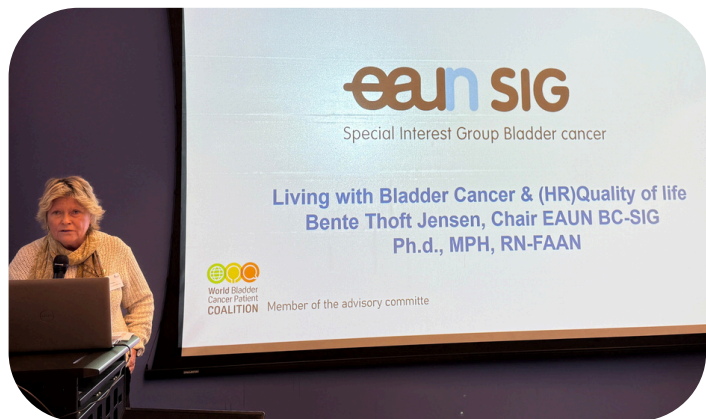
- 1** Patients continue to face critical gaps in early detection and treatment, with misdiagnosis, outdated diagnostic tools, and limited treatment options contributing to delayed care and recurrence. Addressing these disparities requires coordinated action at both clinical and policy levels.
- 2** Policy changes must accelerate access to innovative treatments and support more equitable healthcare systems across Europe. This includes reforming approval processes, investing in therapeutic innovation, and ensuring affordability and accessibility regardless of geography or health system structure.

# Living with bladder cancer and quality of life

Melanie Costin, from Fight Bladder Cancer (UK), delivered a moving personal account of her prolonged journey to diagnosis, having experienced years of misdiagnoses and dismissed symptoms, despite recurring signs of bladder cancer. Her story is unfortunately part of a broader pattern, with studies showing that women are often diagnosed later and face worse outcomes due to a persistent gender gap in bladder cancer recognition. Melanie called for mandatory training for primary care professionals to improve early identification, particularly of hematuria (blood in urine) in female patients, which is too often misattributed to urinary tract infections. She also underlined the importance of clearer clinical referral guidelines to help GPs act decisively when symptoms appear, noting that early intervention dramatically improves prognosis.

Dr Bente Thoft Jensen, from the European Association of Urology Nurses, presented research on the enduring physical and emotional impact of bladder cancer treatments, particularly after major surgeries like cystectomy. She highlighted that many patients struggle with fatigue, incontinence, sexual dysfunction, and anxiety, yet these issues are often overlooked in clinical follow-up.

Dr Thoft Jensen called for integrating psychosocial care and lifestyle support into routine bladder cancer care, emphasising the value of nurse-led interventions and regular quality-of-life assessments to ensure holistic recovery.



## Key takeaways:

1

Patients with bladder cancer endure long-term physical and psychological impact, necessitating greater support prior, during and after the treatment and improved awareness of bladder cancer amongst at-risk populations and healthcare professionals, especially in the primary care setting.

2

Quality of life must be prioritised alongside clinical outcomes, with healthcare providers offering integrated psychosocial support, information, and shared decision-making to empower patients throughout the care journey.

## Research and innovation

Florence Le Calvez-Kelm, from the World Health Organisation's International Agency for Research on Cancer, presented cutting-edge developments in urinary biomarkers, a promising non-invasive tool for bladder cancer detection. These tests could significantly reduce the need for repeated cystoscopies, improving both early diagnosis and patient comfort. She stressed that integrating biomarkers into routine practice could streamline surveillance and ease the burden on healthcare systems, especially for patients undergoing long-term monitoring.

Prof. Christine Chomienne, Vice-Chair of the EU Cancer Mission Board and Chair of the European Cancer Organisation's Cancer Research Network discussed the broader landscape of EU-funded cancer research, stressing the focus for continued investment in personalised medicine and innovative treatment strategies. Referencing the White paper on bladder cancer and how it advocates for increased research funding, patient access to innovative treatments, and increased collaboration across European research networks.

### Key takeaways:

- 1** Advancements in urinary biomarkers offer promising alternatives to invasive diagnostic procedures, with a potential to revolutionise early detection and recurrence surveillance of bladder cancer.
- 2** Ongoing EU-funded research and cross-border collaboration are key to driving progress in bladder cancer care. Increased funding and joint initiatives will help translate scientific advances into tangible patient benefits across the continent.

### Contacts:

<https://worldbladdercancer.org/>

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Bladder Cancer**



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