PROJECT RESULTS

Below are listed the most important research questions facing the bladder cancer community, as defined by patients and caregivers affected by the disease. Results are provided by treatment stage and ordered such that 1 is the most important, 2 is 2nd most important, and higher number are less important.

NON-MUSCLE INVASIVE BLADDER CANCER

1. When is the most appropriate time to undergo bladder removal surgery (cystectomy) for high-risk non-muscle invasive bladder cancer?
2. What is the best medication to use after the first treatment for non-muscle invasive bladder cancer does not work?
3. What are the best methods to reduce side effects while undergoing BCG (and after treatment)?
4. How do different dosages, lengths of treatment, and follow-up schedules for BCG treatment compare with regard to recurrence, side effects, and survival?
5. What is the best way to reduce discomfort with flexible cystoscopy?
6. How does BCG compare to new medications for initial treatment of bladder cancer?
7. What are the best educational and decision-making tools to determine the best course of treatment and side effects?
8. How does cystoscopy compare to less invasive methods (e.g. ultrasound, urine studies) for surveillance of bladder cancer recurrence?
9. How do lifestyle modifications affect recurrence, survival and quality of life of non-muscle invasive bladder cancer patients?
10. How do new diagnostic techniques compare to standard cystoscopic diagnosis for early bladder cancer diagnosis?
11. How does adding complementary/alternative medicines to standard therapy compare to standard therapy alone for treatment of bladder cancer and preventing recurrence?
12. How do different diagnostic/treatment strategies compare when urine studies are positive and cystoscopy is negative?

MUSCLE INVASIVE BLADDER CANCER

1. How do benefits and risks compare between treatments in which the patient keeps the bladder (chemoradiation, partial cystectomy) and treatment in which the bladder is removed (total cystectomy)?
2. How does quality of life compare between urinary diversions such as ileal conduit, neobladder, and Indiana Pouch?
3. How do different surveillance schedules and testing choices after cystectomy compare on the basis of survival and quality of life?
4. How does survival compare between standard chemotherapy and newer drugs (e.g. immunotherapy) in the treatment of muscle invasive bladder cancer?
5. How do benefits and risks compare between use and non-use of chemotherapy AFTER cystectomy?
6. How do different methods of sexual rehabilitation compare after radical cystectomy?
7. How do patient education, satisfaction, and decisional regret compare between patients seen in multidisciplinary clinic settings vs. non-multidisciplinary settings?

**METASTATIC BLADDER CANCER**

1. How do survival, side effects, and patients' quality of life compare between different chemotherapy treatments for metastatic bladder cancer?
2. What are the benefits of radical cystectomy + chemotherapy versus chemotherapy alone for metastatic bladder cancer patients?
3. How does the timing of palliative care in metastatic bladder affect patients' quality of life and other outcomes?
4. How does survival compare between standard chemotherapy and newer drugs (e.g. immunotherapy) in the treatment of metastatic bladder cancer?
5. How does the value of quantity and quality of life compare for those patients with metastatic bladder cancer?