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Alcorn, J., Biyani, S., Weston, S., Sundaram, R., Burton, Rob, Topping, Annie and Stephenson, John

Retrospective analysis of patients' experience to intravesical Bacillus Calmette-Guerin (BCG)

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Retrospective analysis of patients' experience to intravesical Bacillus Calmette-Guerin (BCG)

J. Alcorn, S. Biyani, P. Weston, S. Sundaram, R. Burton, A. Topping, J. Stephenson



striving for excellence

# Why & what did we do?

### Why?

- Gold standard
- Bladder cancer incidence rates are highest in developed countries, especially Northern America and Europe
- BCG treatment induction & maintenance has significant benefits, but also has significant side effects that tend to be seen within the first 12 months of treatment
- To analyse the reasons for treatment interruption in everyday clinical practice in a large district hospital

## How did we do it?

- Appropriate ethical approval
- Quantitative data
  - -01/01/04 31/12/11
  - Retrospective case note review of 234 cases
  - Diagnosis of NMIBC, grade 3 Ta/1 or CIS, aged 18 years or over
  - Conaught Strain
  - Administered as per SWOG
  - Collected using a specially designed data extraction tool
  - Convenience sample
  - Analysed through IBM SPSS v20

#### The treatment journey of patients receiving BCG treatment for superficial bladder cancer - Audit too

	Co-morbidities:	
Demographics: Id No:	1.	
Sex: M F	2.	
Age:	3.	
Hospital site: PGH PGI DDH	4.	
rai rai pan	5.	
	6.	
	-	
Cancer Staging:	Information given:	
Grade 3	Contact numbers Y N	
pTa	Leaflets Y N	
pT1	Treatment discussion Y N	
CIS	Other:	
as	Other:	
Treatment:	Symptoms during treatment:	
Treatment: Date commenced	Symptoms during treatment:	
Treatment:	Symptoms during treatment: 1. 2.	
Treatment: Date commenced	Symptoms during treatment:	
Treatment: Date commenced Date stopped	Symptoms during treatment: 1. 2. 3.	
Treatment: Date commenced Date stopped Course completed Y N	Symptoms during treatment: 1. 2. 3. 4. 5.	
Treatment: Date commenced Date stopped Course completed Y N	Symptoms during treatment: 1. 2. 3.	
Treatment: Date commenced Date stopped Course completed Y N Reason for stopping:	Symptoms during treatment: 1. 2. 3. 4. 5.	
Treatment: Date commenced Date stopped Course completed Y N Reason for stopping:	Symptoms during treatment: 1. 2. 3. 4. 5.	

CYC	LE	DATE	SIDE EFFECTS	
Cycle 1 — 0 months Induction 6 weekly		/ /20		
		/ /20		
		/ /20		
	6 weekly	/ /20		
		/ /20		
		/ /20		
Cycle 2 – 3 mor Maintenance 3 wee		/ /20		
	3 months 3 weekly	/ /20		
		/ /20		
Cycle 3 – 6 months Maintenance 3 weekly		/ /20		
		/ /20		
		/ /20		
		/ /20		
	12 months 3 weekly	/ /20		
		/ /20		
		/ /20		
Cycle 5 – Maintenance	18 months 3 weekly	/ /20		
		/ /20		
Cycle 6 – Maintenance		/ /20		
	24 months 3 weekly	/ /20		
		/ /20		
		/ /20		
	3 weekly	/ /20		
		/ /20		
Cycle 8 – Maintenance		/ /20		
	36 months 3 weekly	/ /20		
	-	/ /20		

# What did we find?

#### Issues

- Data extraction tool
- Paper to electronic
- Recorded information

### Results

- $-61\% \ge 70$ yrs. From these:
- 92% completed induction, 80% started maintenance
- 56% completed 1 year and 5% completed 3 years
- 43% received counselling
- 10% nurse specialist contact details
- 65% had at least 1 symptom (45% within 35 days)
- 40% experienced pain

# **Conclusion & next steps**

### Conclusion

- Severe toxicity resulted in discontinuation of therapy in the majority
- The majority withdraw in the first year
- Surprising that those who had contact with a nurse specialist or received written information were more likely to withdraw
- Targeted support

### Next steps

- Interview patients who have withdrawn for their experience
- Look at the consultation e.g. grade of Dr
- Review our practice