PATIENT COMPLIANCE WITH INTRAVESICAL MAINTENANCE PROTOCOLS FOR NON-MUSCLE INVASIVE BLADDER CANCER

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Background:
Intravesical therapy with Bacillus Calmette-Guerin (BCG) or Mitomycin C (MMC) is the mainstay of treatment for non-muscle invasive urothelial carcinoma of the bladder after initial transurethral resection. Evidence suggests that after an induction course, monthly or Lamm (three weeks of every three months) maintenance therapy reduces recurrence and progression. Limited data exist on patient compliance with maintenance protocols outside of clinical trials. We report our "real-life" experience with compliance with intravesical maintenance therapy.

Methods: We have compiled data on a retrospective cohort of patients who received intravesical therapy at Beilinson Hospital between 1998-2013. We used descriptive statistics to demonstrate the compliance rate with each maintenance protocol.

Results:
During the study period, 1117 patients received intravesical treatment at our institution (713 (59.3%) BCG, 441 (36.7%) MMC). There was no difference (84% vs. 86%) in the completion rate of BCG vs. MMC induction. Within the BCG cohort, 242 (33.9%) patients commenced Lamm maintenance, 24 (9.9%) of whom completed 21 treatments over three years. Of the 118 (16.5%) BCG patients on monthly maintenance, 61 (52%) completed nine treatments.

MMC therapy was started in 441 patients, 134 of whom (30.4%) commenced monthly maintenance, and 62 (46.3% of 134) completed nine treatments. The mean number of maintenance treatments was higher in BCG patients on Lamm (9.71) than in monthly BCG patients (6.87) or MMC patients (6.62).

Conclusions:
Our initial results demonstrate poor compliance with maintenance protocols. Although the clinical utility of monthly maintenance remains unproven, more patients are compliant with monthly protocols than Lamm.