

## Non-muscle invasive bladder cancer: New standards in endoscopic management and adjuvant instillations

Poster Session 49

Sunday, 26 March  
15:45 - 17:15

**Location:** Room Madrid, North Hall (Level 1)

**Chairs:** M. Babjuk, Prague 5 (CZ)  
M. Brausi, Modena (IT)  
M. Burger, Regensburg (DE)

### Aims and objectives of this session

Non-muscle invasive bladder cancer (NMIBC) comprises a heterogeneous group in which tumour number, size, grade and pathological stage (pT) are important prognostic factors related to the risk of recurrence, progression and survival. Transurethral resection of bladder tumour (TURBT) is the reference treatment of NMIBC. The accepted standard for "correct" TURBT is complete macroscopic tumour clearance with specimens of the tumour base and resection border sent separately. A key feature of the pathology report is the presence and/or invasion of lamina propria or muscularis propria, the latter being dependent upon the presence of detrusor muscle (DM) in the TURBT specimens. It is now well established that a "correct" TURBT positively influences recurrence and progression. This session aims to provide an overview of new techniques available to improve the quality of TURBT and the deliverance of adjuvant bladder instillations.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

- 655 **Active surveillance for non-muscle invasive bladder cancer (NMIBC): Result from bladder cancer Italian active surveillance (BIAS) project**  
By: [Hurle R.](#)<sup>1</sup>, [Lazzeri M.](#)<sup>1</sup>, [Saita A.](#)<sup>1</sup>, [Forni G.](#)<sup>1</sup>, [Buffi N.](#)<sup>1</sup>, [Casale P.](#)<sup>1</sup>, [Lughezzani G.](#)<sup>1</sup>, [Pescechera R.](#)<sup>1</sup>, [Pasini L.](#)<sup>1</sup>, [Zandegiacomo S.](#)<sup>1</sup>, [Benetti A.](#)<sup>1</sup>, [Lista G.](#)<sup>1</sup>, [Maffei D.](#)<sup>1</sup>, [Cardone P.](#)<sup>1</sup>, [Colombo P.](#)<sup>2</sup>, [Guazzoni G.](#)<sup>1</sup>  
**Institutes:**<sup>1</sup>Istituto Clinico Humanitas, Dept. of Urology, Rozzano, Italy, <sup>2</sup>Istituto Clinico Humanitas, Dept. of Pathology, Rozzano, Italy
- 656 **Can the use of narrow-band imaging (NBI) reduce persistent bladder cancer rate during white-light classic trans-urethral resection of tumor (WLcTURBT)? A preliminary single-center experience in a large case series**  
By: [Giulianelli R.](#)<sup>2</sup>, [Falavolti C.](#)<sup>1</sup>, [Gentile B.C.](#)<sup>2</sup>, [Mirabile G.](#)<sup>2</sup>, [Tariciotti P.](#)<sup>2</sup>, [Albanesi L.](#)<sup>2</sup>, [Buscarini M.](#)<sup>3</sup>  
**Institutes:**<sup>1</sup>Villa Betania Hospital, Rome, Italy, <sup>2</sup>Villa Claudia Clinic, Dept. of Urology, Rome, Italy, <sup>3</sup>University Campus Bio-Medico, Dept. of Urology, Rome, Italy
- 657 **Monopolar versus bipolar transurethral resection for primary non-muscle invasive bladder cancer**  
By: [Liem E.](#)<sup>1</sup>, [McCormack M.](#)<sup>2</sup>, [Chan E.](#)<sup>3</sup>, [Matsui Y.](#)<sup>4</sup>, [Geavlete P.](#)<sup>5</sup>, [Choi Y.](#)<sup>6</sup>, [De Reijke T.](#)<sup>1</sup>, [Farahat Y.](#)<sup>7</sup>, [Inman B.](#)<sup>8</sup>, [De La Rosette J.](#)<sup>1</sup>, [Naito S.](#)<sup>9</sup>  
**Institutes:**<sup>1</sup>Academic Medical Center, Dept. of Urology, Amsterdam, The Netherlands, <sup>2</sup>Centre Hospitalier De L'Universite De Montreal, Dept. of Urology, Montreal, Canada, <sup>3</sup>Chinese University of Hong Kong, HKSAR, Dept. of Surgery, Hong Kong, China, <sup>4</sup>Kyoto University, Dept. of Urology, Kyoto, Japan, <sup>5</sup>Saint John Emergency Clinical Hospital, Dept. of Urology, Bucharest, Romania, <sup>6</sup>Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea, <sup>7</sup>Sheikh Khalifa General Hospital, Dept. of Urology, Umm Al Quwain, United Arab Emirates, <sup>8</sup>Duke University Medical Center, Dept. of Urology, Durham, United States of America, <sup>9</sup>Harasanshin Hospital, Dept. of Urology, Fukuoka, Japan

- 658 **Transurethral en-bloc hydrodissection for non-muscle invasive bladder cancer: Results of a randomized controlled trial**  
**By:** Gakis G.<sup>1</sup>, Karl A.<sup>2</sup>, Bertz S.<sup>3</sup>, Burger M.<sup>4</sup>, Fritsche H-M.<sup>4</sup>, Hartmann A.<sup>3</sup>, Jokisch F.<sup>2</sup>, Kempkensteffen C.<sup>5</sup>, Miller K.<sup>5</sup>, Mundhenk J.<sup>6</sup>, Schneevoigt B-S.<sup>2</sup>, Schubert T.<sup>1</sup>, Schwentner C.<sup>6</sup>, Wullich B.<sup>7</sup>, Stenzl A.<sup>1</sup>  
**Institutes:**<sup>1</sup>Eberhard-Karls University, Dept. of Urology, Tübingen, Germany, <sup>2</sup>Ludwig-Maximilians University, Dept. of Urology, Munich, Germany, <sup>3</sup>Friedrich-Alexander University, Dept. of Pathology, Erlangen, Germany, <sup>4</sup>Caritas St. Joseph's Hospital, University of Regensburg, Dept. of Urology, Regensburg, Germany, <sup>5</sup>Charite, University Medicine Berlin, Dept. of Urology, Berlin, Germany, <sup>6</sup>Diakonie-Klinikum, Dept. of Urology, Stuttgart, Germany, <sup>7</sup>Friedrich-Alexander University, Dept. of Urology, Erlangen, Germany
- 659 **Is restaging transurethral resection (TUR) necessary in patients with non-muscle invasive bladder cancer (NMIBC) and focal lamina propria invasion?**  
**By:** Audenet F.<sup>1</sup>, Retinger C.<sup>1</sup>, Chien C.<sup>2</sup>, Benfante N.<sup>2</sup>, Bochner B.<sup>1</sup>, Donat M.<sup>1</sup>, Herr H.<sup>1</sup>, Dalbagni G.<sup>1</sup>  
**Institutes:**<sup>1</sup>Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America, <sup>2</sup>Memorial Sloan Kettering Cancer Center, Dept. of Biostatistics, New York, United States of America
- 660 **Bladder endoscopic dissection of NMIBC procures better specimens for pathology than standard TURBT - the pathologists' perspective**  
**By:** Daniel G.<sup>1</sup>, Quintyn-Rant M-L.<sup>1</sup>, Brierre T.<sup>2</sup>, Roumiguié M.<sup>2</sup>, Malavaud B.<sup>2</sup>  
**Institutes:**<sup>1</sup>Institut Universitaire Du Cancer, Dept. of Pathology, Toulouse, France, <sup>2</sup>Institut Universitaire Du Cancer, Dept. of Urology, Toulouse, France
- 661 **Simultaneous transurethral resection of high grade bladder tumor and benign prostatic hyperplasia (BPH): Oncological safety**  
**By:** Sionov B.V., Khunovich D., Benjamin S., Sidi A.A., Tsivian A.  
**Institutes:**E. Wolfson M.C. and The Sackler Faculty of Medicine Tel-Aviv University, Dept. of Urologic Surgery, Holon, Israel
- 662 **Safety and tolerability analysis of hyperthermic intravesical mitomycin to mitomycin alone in HIVEC I and HIVEC II: An interim analysis of 307 patients**  
**By:** Tan W.S.<sup>1</sup>, Palou J.<sup>2</sup>, Kelly J.<sup>1</sup>  
**Institutes:**<sup>1</sup>University College Hospitals London, Dept. of Surgery and Interventional Sciences, London, United Kingdom, <sup>2</sup>Universitat Autònoma De Barcelona - Fundació Puigvert, Dept. of Urology, Barcelona, Spain
- 663 **Optimal diagnostic performance of photodynamic diagnosis (PDD) and Storz Professional Image Enhancement System (SPIES) is independent from surgeon experience**  
**By:** Soria F., Rorato L.M., Pisano F., Allasia M., Pecoraro A., Filippini C., Zitella A., Gontero P.  
**Institutes:**University of Turin, Città Della Salute E Della Scienza Di Torino, Dept. of Surgical Sciences, Division of Urology, Turin, Italy
- 664 **Recurrence and progression according to stage at re-TUR in t1g3 bladder cancer patients treated with BCG: Not as bad as previously thought**  
**By:** Palou J.<sup>1</sup>, Gontero P.<sup>2</sup>, Pisano F.<sup>2</sup>, Joniau S.<sup>3</sup>, Oderda M.<sup>2</sup>, Serretta V.<sup>4</sup>, Larrè S.<sup>5</sup>, Di Stasi S.<sup>6</sup>, Van Rhijn B.<sup>7</sup>, Witjes A.J.<sup>8</sup>, Grotenhuis A.J.<sup>8</sup>, Colombo R.<sup>9</sup>, Briganti A.<sup>9</sup>, Babjuk M.<sup>10</sup>, Soukup V.<sup>10</sup>, Malmstrom P.U.<sup>11</sup>, Irani J.<sup>12</sup>, Malats N.<sup>13</sup>, Baniel J.<sup>14</sup>, Mano R.<sup>14</sup>, Cai T.<sup>15</sup>, Cha E.K.<sup>16</sup>, Ardelt P.<sup>17</sup>, Varkarakis J.<sup>18</sup>, Bartoletti R.<sup>19</sup>, Dalbagni G.<sup>20</sup>, Shariat S.<sup>21</sup>, Xylinas E.<sup>16</sup>, Karnes R.J.<sup>22</sup>, Sylvester R.<sup>23</sup>  
**Institutes:**<sup>1</sup>Fundació Puigvert, Dept. of Urology, Barcelona, Spain, <sup>2</sup>A.O. Città Della Salute E Della Scienza, University of Turin, Dept. of Urology, Turin, Italy, <sup>3</sup>University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, <sup>4</sup>Paolo Giaccone General Hospital, Dept. of Urology, Palermo, Italy, <sup>5</sup>John Radcliffe Hospital, University of Oxford, Dept of Surgical Science, Oxford, United Kingdom, <sup>6</sup>Policlinico Tor Vergata-University of Rome, Dept of Urology, Rome, Italy, <sup>7</sup>Netherlands Cancer Institute – Antoni Van Leeuwenhoek Hospital, Dept of Urology, Amsterdam, The Netherlands, <sup>8</sup>Radboud University Nijmegen Medical Centre, Dept of Urology, Nijmegen, The Netherlands, <sup>9</sup>Universit A Vita-Salute. Ospedale S. Raffaele, Dept of Urology, Milan, Italy, <sup>10</sup>Motol Hospital,

University of Praha, Dept of Urology, Prague, Czech Republic, <sup>11</sup>Cademic Hospital, Uppsala University, Dept of Urology, Uppsala, Sweden, <sup>12</sup>Centre Hospitalier Universitaire La Mil Etrie, University of Poitiers, Dept of Urology, Poitiers, France, <sup>13</sup>Genetic and Molecular Epidemiology Group, Spanish National Cancer Research Centre, Dept. of Genetics, Madrid, Spain, <sup>14</sup>Rabin Medical Centre, Dept. of Urology, Tel Aviv, Israel, <sup>15</sup>Santa Chiara Hospital, Dept. of Urology, Trento, Italy, <sup>16</sup>Weill Medical College of Cornell University, Dept. of Urology, New York, United States of America, <sup>17</sup>Chirurgische Universitäts Klini, Dept. of Urology, Freiburg, Germany, <sup>18</sup>Ismanoglio Hospital, University of Athens, Dept. of Urology, Athens, Greece, <sup>19</sup>University of Florences, Dept. of Experimental and Clinical Medicine, Athens, Greece, <sup>20</sup>Memorial Sloan Kettering Cancer Center, New York, Dept. of Urology, New York, United States of America, <sup>21</sup>Medical University of Vienna, Dept. of Urology, Vienna, Austria, <sup>22</sup>Mayo Clinic, Dept. of Urology, Rochester, United States of America, <sup>23</sup>ORTC Headquarters, Formerly Department of Biostatistics,, Brussels, Belgium

665

**Radiofrequency-induced thermo-chemotherapy effect plus mitomycin versus a second course of bacillus Calmette-Guérin (BCG) or institutional standard in patients with recurrence of non-muscle invasive bladder cancer following induction or maintenance BCG therapy (HYMN): A phase III, open-label, randomised controlled trial**

**By:** Tan W.S.<sup>1</sup>, Buckley L.<sup>2</sup>, Devall A.<sup>2</sup>, Loubière L.<sup>2</sup>, Pope A.<sup>2</sup>, Feneley M.<sup>3</sup>, Cresswell J.<sup>4</sup>, Issa R.<sup>5</sup>, Mostafid H.<sup>6</sup>, Madaan S.<sup>7</sup>, Bhatt R.<sup>8</sup>, McGrath J.<sup>9</sup>, Sangar V.<sup>10</sup>, Griffiths L.<sup>11</sup>, Page T.<sup>12</sup>, Hodgson D.<sup>13</sup>, Datta S.<sup>14</sup>, Bilingham L.<sup>2</sup>, Kelly J.<sup>1</sup>

**Institutes:**<sup>1</sup>University College London, Division of Surgery and Interventional Science, London, United Kingdom, <sup>2</sup>University of Birmingham, Cancer Research UK Clinical Trials Unit, Birmingham, United Kingdom, <sup>3</sup>University College London Hospitals, Dept. of Urology, London, United Kingdom, <sup>4</sup>James Cook University Hospital, Dept. of Urology, Middlesbrough, United Kingdom, <sup>5</sup>St George's Hospital, Dept. of Urology, London, United Kingdom, <sup>6</sup>Basingstoke and North Hampshire Hospital, Dept. of Urology, London, United Kingdom, <sup>7</sup>Darent Valley Hospital, Dept. of Urology, Dartford, United Kingdom, <sup>8</sup>Queen Elizabeth Hospital, Dept. of Urology, Birmingham, United Kingdom, <sup>9</sup>Royal Devon and Exeter Hospital, Dept. of Urology, Exeter, United Kingdom, <sup>10</sup>Withington Hospital, Dept. of Urology, Manchester, United Kingdom, <sup>11</sup>Leicester General Hospital, Dept. of Urology, Leicester, United Kingdom, <sup>12</sup>Freeman Hospital, Dept. of Urology, Newcastle, United Kingdom, <sup>13</sup>Queen Alexandra Hospital, Dept. of Urology, Portsmouth, United Kingdom, <sup>14</sup>University Hospital of Wales, Dept. of Urology, Cardiff, United Kingdom

666

**5-year outcomes of RITE thermochemotherapy for BCG unresponsive high risk non muscle invasive bladder cancer**

**By:** Ayres B., Sri D., Perry M., Issa R.

**Institutes:**St George's Hospital, Dept. of Urology, London, United Kingdom

667

**Comparison of pain, quality of life, lower urinary tract symptoms and sexual function between flexible and rigid cystoscopy in follow-up male patients with non muscle invasive bladder cancer: A randomized controlled cross section single blind study**

**By:** Üçer O., Temelta G., Yüksel M.B., Gümü B., Müezzino İu T.

**Institutes:**Celal Bayar University, Faculty of Medicine, Dept. of Urology, Manisa, Turkey

17:00 - 17:07

**Guidelines update**

M. Babjuk, Prague 5 (CZ)