ARE YOU BEING FOLLOWED UP FOR BLADDER CANCER?

Biomarkers may significantly reduce the burden of monitoring for tumour recurrence

Most bladder tumours do not invade the muscle of the bladder, meaning that they are confined to the inner layers of the bladder. These tumours are called non-muscle-invasive bladder cancer (NMIBC). If you have been treated for NMIBC in the past, there is a high risk of tumour recurrence. It is important that regular follow-up visits are planned so that treatment can be started as soon as possible in case a tumour recurs.

Currently, the standard recommended procedures for follow-up are cystoscopy combined with cytology to detect tumour cells. In general, these procedures are scheduled every 3 months in the beginning and reduced in frequency over time, if the tumour does not recur. Cystoscopy is an invasive procedure often causing pain and discomfort during and after the procedure.

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A simple urine test can measure the presence of biomarkers indicating a recurrence of a bladder tumour

The ideal biomarker test will:

- Rule out bladder tumour recurrence with a high level of confidence
- \rightarrow Be able to **detect** tumour markers in a urine sample instead of an invasive procedure
- \rightarrow **Reassure** you that no high-risk bladder tumour was missed in case of a negative result.
- Make sure that the chances of getting a positive test result is low when there is no tumour in the bladder



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Bladder EpiCheck[®] is a biomarker test that meets all of the required criteria for high-risk NMIBC. It is a highly sensitive and specific test which can ensure that a negative (favourable) test result accurately rules out high-risk tumours with 99% certainty [1,2].

The reliable outcomes of this biomarker test would allow your physician to safely reduce the number of cystoscopies, in favour of a simple urinary test.

Urinary biomarkers for bladder cancer surveillance in clinical practice

Example of Bladder EpiCheck® for NMIBC surveillance



The European guidelines mention that four of the promising and commercially available urine biomarkers, including a specific reference to Bladder EpiCheck[®], might be used to replace and/or postpone cystoscopy as they may identify the rare high-grade recurrences occurring in low/intermediate NMIBC [3].



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BIOMARKERS MAY SIGNIFICANTLY REDUCE THE BURDEN OF MONITORING FOR TUMOUR RECURRENCE



An expert and a patient share their experience on the benefits of using Bladder EpiCheck[®] for bladder cancer surveillance



"Application of this test could reduce the current burden of repeat cystoscopy and cytology tests, for example, by alternating between the follow-up gold standard and Bladder EpiCheck[®]."

– Prof. Dr. Witjes, Radboud UMC, Nijmegen, The Netherlands [4,5]



https://youtu.be/SGrZDXmp9FU



"I think I had about 65 cystoscopies. But with the Bladder EpiCheck[®] you undergo cystoscopy, 3 months later you do the Bladder EpiCheck[®] test. Your physician gives you your test result within 14 days. The advantage is that you only need a cystoscopy 2 times per year and you don't need to go to the hospital. That's less burdensome for me, and for the other patients"

- Gerard Lensvelt, Dussen, The Netherlands Bladder cancer patient since 2002 [6]



https://youtu.be/utNgB0Y8jOw

Are you a non-muscle-invasive bladder cancer patient who is being monitored for recurrence of a bladder tumour?

Ask your treating physician for more information on how you might benefit from the Bladder EpiCheck[®] urine test and how it could impact your bladder cancer check-up approach.

References

- 1. Laukhtina E, Shim SR, Mori K, et al. Eur Urol Oncol 2021;4:927-42.
- 2. Laukhtina E, Shim SR, Mori K, et al. Eur Urol Oncol 2022;doi: 10.1016/j.euo.2022.01.003.
- 3. Gontero P, Compérat E, Dominguez Escrig JL, et al. EAU guidelines on Non-muscle-invasive Bladder Cancer (TaT1 and CIS). Update 2023.
- 4. Witjes JA, Morote J, Cornel EB, et al. Eur Urol Oncol 2018;1:307-13.
- 5. https://youtu.be/SGrZDXmp9FU
- 6. https://youtu.be/utNgB0Y8jOw



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