

Treatment for Bladder Tumours – transurethral resection of bladder tumour (TURBT)

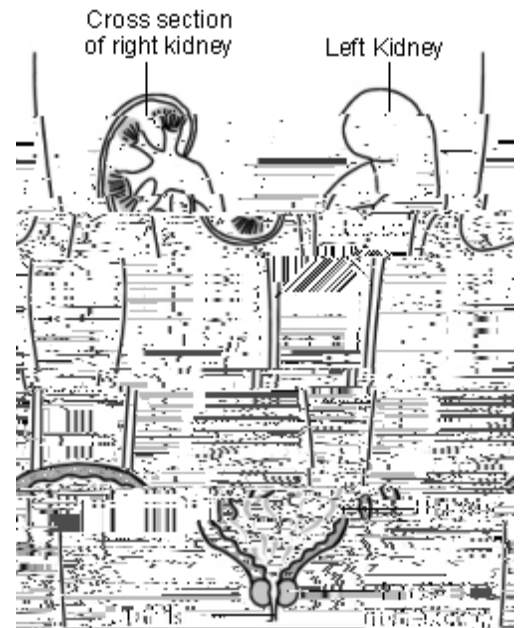
What is a TURBT?

A transurethral resection of bladder tumour, or TURBT, is a treatment for bladder tumours. The tumour(s) will be cut away from the bladder wall, removed and sent for examination. From this, your consultant will be able to find out whether the tumour cells are cancerous

Develop a bladder infection called schistosomiasis, caused by a parasite in certain tropical countries.

What is the bladder?

The bladder is part of the urinary tract. It is at the bottom of the abdomen. It fills with urine and we pass urine out from time to time through a tube called the urethra. The urethra passes through the prostate gland and penis in men. The urethra is shorter in women and opens just above the vagina.



What does TURBT involve?

When you are anaesthetised your doctor will place a slim fibre optic telescope (cystoscope) up your urethra and into your bladder. This is a special tube that allows your doctor to see your bladder lining. The visible tumour(s) will be cut away from the lining of your bladder using instruments that are passed down the scope. This can cause some bleeding. Once a tumour has been removed, any bleeding is prevented or reduced by using a mild electric current to cauterize (burn) and seal the area where the tumour was.

A TURBT is carried out either under a general or spinal anaesthetic. A general anaesthetic is medicine that will make you unconscious (asleep) during your operation, so you will not feel any pain. A spinal anaesthetic is where a special needle is inserted into your back and anaesthetic is injected around the spinal nerves. This numbs the lower half of your body so you will be awake but will not feel anything from the waist downwards. You can also have sedation with this, which does not put you to sleep but makes you very drowsy. Your doctor will discuss the options with you before the operation.

Depending on the size of your tumour(s) the operation may take between 15 minutes and an hour. The tumour(s) will then be sent for examination. Once the operation is over, you will be taken to the recovery room to allow the anaesthetic to wear off. You will be taken back to your ward when you are fully awake.

What are the alternatives?

If malignant tumours recur, we may offer chemotherapy or immunotherapy as a treatment but a TURBT is the first treatment offered for all bladder tumours.

Benign bladder tumours usually grow very slowly. However, if they are not treated, they could become very large and cause problems by taking up too much space in your bladder or pressing on other organs in your body.

Malignant tumours continue to grow unless they are removed. They can invade surrounding tissue and spread to other areas of the body causing further problems.

Special preparations

You will come into hospital either the afternoon before or, more usually, the morning of surgery.

Please remember to bring in all the medicines that you are taking with you when you come

What are the risks?

Further information

If you want any further information or any help, do