



# Transurethral Resection of Bladder Tumor (TURBT), with or without intravesical treatment

## What is TURBT?

It is an operation that uses an instrument to resect a bladder tumor. Bladder tumors most often are bladder cancers, and failure to remove these tumors can lead to urinary tract bleeding, pain, urinary retention, and progression of cancer to other regions of the body.

This operation is performed in a hospital or surgery center under anesthesia, and most often the patient will go home the same day. A special instrument is passed into the bladder to perform the operation, and there are no external incisions.

Alternatives to this procedure include watchful waiting, though this is rarely recommended given the problems bladder tumors can cause, including the progression of cancer.

Anticipated benefits include the proper diagnosis and treatment of the bladder tumor. Once the pathology is known, your doctor will discuss the next steps in your care.

**Intravesical treatment.** Your doctor may choose to instill a liquid medicine into your bladder following resection. Typically, this dwells in the bladder for approximately one hour immediately after surgery, and is drained through the indwelling catheter prior to discharge. This medicine serves to decrease the risk of cancer recurrence.

It is typical to have bladder irritation following surgery, including urinary frequency, urgency, or cramping, that can last variable amounts of time.

## **What are the risks?**

**Bleeding.** As with any operation there will be some bleeding. This may persist to some degree for up to 2-3 weeks, and is often fairly minimal. You should hydrate aggressively if bleeding becomes heavy. Transfusion rates for this operation are typically less than 1%.

**Infection.** A preventative antibiotic is given prior to the surgery at the hospital, and infection rates are usually less than 5%.

**Injury to the bladder.** Sometimes, depending on how deep of resection is necessary, a catheter may be required for several days to weeks following surgery, to allow complete healing of the surgical site.

**Anesthetic and other risks.** Significant events such as heart attack, stroke, even death may occur as a result of any anesthetic, though such risks are extraordinarily low, especially if properly evaluated by your primary physician before surgery if indicated. Should you develop any pain or swelling of your lower legs and ankles following surgery, notify your doctor's office immediately, as this may indicate a blood clot in your leg (deep vein thrombosis or "DVT"). If a blood clot moves to the lung this could be immediately life-threatening, and usually presents with shortness of breath and/or painful breathing.

## **What are preparations for surgery?**

Please have nothing to eat or drink after midnight prior to your surgery. If you take blood thinners, your surgeon will discuss the cessation of this medication prior to your surgery.

## **What happens during the surgery?**

You usually will have a general anesthesia. To perform the surgery, a telescopic instrument called a resectoscope is passed into your urethra (the tube through which you pass urine), into the bladder. The resectoscope has a video camera at its end, allowing clear visualization of the bladder and tumor during the treatment.

## **What happens after the surgery?**

Patients often go home the same day following surgery, and you will require someone to drive you from the hospital.

## **Resuming activities**

You can go back to work when you feel able, usually within 5-7 days, though heavy activities should not resume for several weeks.

You may drive when you feel able and are not under the influence of any medications.

## **Follow-up**

Your doctor will arrange a follow-up visit, to review the pathology from the tumor, and to arrange the next steps in your care.