Introduction & objectives

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Results I

Discharge of low risk non muscle invasive bladder cancer after one year: Results of a national survey of the adoption of the NICE bladder cancer guidelines recommendations in the UK

- The National Institute for Health and Care Excellence (NICE) produces guidelines for the National Health Service (NHS) in England ‘To ensure that maximum gain is achieved from limited resources’.

- In 2015, the NICE bladder cancer guidelines recommended that urologists in England should ‘Discharge to primary care people who have low-risk non-muscle-invasive bladder cancer (NMIBC) who have no recurrence within 12 months’.

- This represented a significant change from the EAU NMIBC guidelines which recommend cystoscopic surveillance for 5 years and was therefore controversial.

- Although hospitals in the UK are expected to follow NICE guidelines, even after 2 years, the level of adoption of this recommendation is unknown.

- Moreover, the clinical consequences of such a policy with respect to re-presentation of patients with recurrences and possibly progression are unknown.

- A National survey of all urologists and urological nurses in the UK was carried out in an attempt to obtain a national picture of the level of adoption of the NICE guidelines recommendation.

- A total of 165 responses were received (120 from BAUS and 45 from BAUN members respectively) this represents 108 of 237 urology departments in the UK.

- 45% of respondents have adopted the NICE guidelines whereas 55% have not.

- Of those adopting the NICE guidelines, only 8 respondents (4.8% of the overall total) had encountered an adverse outcome.

- Of these, 3 patients had confirmed low risk recurrence.

- Despite a strong central recommendation from NICE to discharge low risk NMIBC patients after 1 year, the majority of UK urology departments continue to use the EAU guidelines with discharge after 5 years.

- A total of 55% of respondents who have not adopted the NICE guidelines reported dissatisfaction at being discharged after 5 years.

- No respondents reported progression to a higher stage or grade.

- Of the 55% of respondents who have not adopted the NICE guidelines, 85% reported adhering to the EAU NMIBC guidelines.

Results II

- Patient dissatisfaction at being discharged was the main reported adverse outcome.

- No respondents reported progression to a higher stage or grade.

- 67% of respondents who have not adopted the NICE guidelines reported adherence to the EAU NMIBC guidelines.

- Of the 55% of respondents who have not adopted the NICE guidelines, 85% reported adhering to the EAU NMIBC guidelines.

- Of these, 3 patients had confirmed low risk recurrence.

- Despite a strong central recommendation from NICE to discharge low risk NMIBC patients after 1 year, the majority of UK urology departments continue to use the EAU guidelines with discharge after 5 years.

Conclusions

- Despite a strong central recommendation from NICE to discharge low risk NMIBC patients after 1 year, the majority of UK urology departments continue to use the EAU guidelines with discharge after 5 years.

- In those departments who are following the NICE recommendations, 8 of 120 respondents (6.7%) have encountered an adverse outcome.

- The majority of departments who have not adopted the NICE guidelines have adopted the EAU guidelines.

- This represents 105 of 237 urology departments in the UK which do not adopt the NICE guidelines.

- Of those adopting the NICE guidelines, only 8 respondents (4.8% of the overall total) had encountered an adverse outcome.

- Of these 8, 3 patients had confirmed low risk recurrence.

- In October 2017 the British Association of Urological Surgeons (BAUS) and the British Association of Urological Nurses (BAUN) published a joint statement on the clinical management of bladder cancer.

- In December 2017 the British Association of Urological Surgeons (BAUS) and the British Association of Urological Nurses (BAUN) published a joint statement on the clinical management of bladder cancer.

- The statement stressed the importance of patient education and the need for multidisciplinary teams to ensure that patients are discharged appropriately.

- The statement highlighted the need for further research into the long-term outcomes of patients discharged after 1 year.

- The statement also called for the development of a national guideline on the management of bladder cancer.

- The statement concluded that further research is needed to determine the best approach to the management of bladder cancer.

- The statement encouraged urologists to follow the NICE guidelines where possible.

- The statement also highlighted the importance of patient education and the need for multidisciplinary teams to ensure that patients are discharged appropriately.

- The statement concluded that further research is needed to determine the best approach to the management of bladder cancer.