



Intravesical Mitomycin chemotherapy following a transurethral resection of bladder tumour (TURBT): for outpatients

This leaflet will give you an overview of Mitomycin C therapy, how it is given and any side effects it may cause. Please read it carefully as it contains information that will help you to minimise any possible problems the treatment may cause. If you have any concerns or would like further information please do not hesitate to contact one of the urology team on the numbers at the back of the leaflet.

Why do I need a TURBT?

Your body is made up of millions of cells. When body tissues become old or damaged new cells grow and divide to replace them. Occasionally this process gets out of control and the cells continue to divide and grow to create a tumour.

Your bladder has produced a tumour and this needs to be removed in order for it to be examined under the microscope. This may be found to be a type of bladder cancer. However, around 75% of these cancers are superficial and once removed cause no further problems to you.

Why do I need further treatment after my TURBT?

Many bladder cancers are superficial and will never recur. Unfortunately, some do come back after removal by TURBT. However, we know that by regularly looking into the bladder (cystoscopy) and with the use of treatments such as Mitomycin C 2-4 weeks following TURBT we can reduce the risk of this.

What is intravesical chemotherapy (Mitomycin C)?

Mitomycin C is a type of chemotherapy that is given into the bladder. It coats the bladder lining and works by stopping the growth and division of cancer cells. The aim of the treatment is to kill any cancer cells left in the bladder or disturbed by the TURBT and reduce the risk of further ones growing. Research has shown that if Mitomycin is given after surgery it can decrease the likelihood of the cancer coming back.

How is the treatment given?

- You may be asked to limit the amount that you drink for 4 hours prior to the treatment. This is so that the Mitomycin C does not dilute too much within the bladder. It also makes it easier for you to hold the solution in the bladder without needing to pass water.

- The treatment will be given in the Outpatients setting.
- After the first treatment is put into your bladder we will ask you to stay in the department for about 1 hour. For weeks 2 to 6 of treatment you may go home with the Mitomycin C in your bladder which you would need to empty at home in the toilet, after 1 hour.
- The treatment is given through a catheter which is removed immediately after instillation.
- You may be encouraged to have a walk around but please stay in the department in case of leaking.
- If you do leak the Mitomycin when walking around, please inform a member of staff immediately.
- You will need to ensure you empty your bladder in the toilet after 1 hour of the treatment being instilled.
- Please sit down on the toilet to minimise the risk of splashing. Your urine may look purple for the rest of the day.

What should I do for 6 hours after each treatment?

- Men – sit down to pass urine to prevent spraying the Mitomycin C onto your skin and the toilet seat.
- Each time you pass urine wash your hands and private parts with soap and water.
- If you leak urine onto your clothes, wash well in hot water or on a hot washing machine cycle.

What should I do for 48 hours after each treatment?

- Drink at least 2-3 litres of fluid a day for at least 48 hours after each treatment to help flush the treatment out of the bladder.
- If you are having sexual intercourse you should either refrain from it or ensure you use a condom for 48 hours to protect your partner.

How safe is Mitomycin C and what are the risks?

Your consultant will discuss the treatment with you after your initial diagnosis. You will then see the nurse who will explain the side effects of treatment and will ask you to sign a consent form to show that you understand the risks and benefits and that you are happy to proceed. **Feel free to ask questions if there is anything you are unsure of.**

It is possible that you will notice:

- **Discomfort when passing urine or having to pass urine more frequently.** This is due to the Mitomycin C irritating the lining of the bladder. It occurs in about 40% of patients and should settle within 48 hours.
- **Blood in your urine.** Drinking 2-3 litres of water a day can ease this. If symptoms do not improve after 2-3 days you should consult your GP or contact one of the urology team at the hospital.
- **Smelly or cloudy urine.** This may mean that you have a urine infection. You should contact your GP who may give you some antibiotics to take.

- **Rash on your palms or genitalia.** This can occur in 5-20% of cases and is usually because the solution has come into contact with your skin. The best way to reduce the risk of this is by washing your hands and private parts each time you pass urine.
- **All over body rash.** This can occur in 3-19% of people and can be due to an allergic reaction. If this happens you should contact your GP immediately as you may require hydrocortisone cream.

What happens once all the treatment is finished?

You will have a cystoscopy in approximately 8-10 weeks after the final instillation of Mitomycin C.

What else should I know?

If you or your partner are planning to become pregnant or are pregnant please inform your consultant and nursing team prior to starting the treatment.

Who can I contact if I have any questions?

Uro-Oncology Nursing Team: Tel: 0118 322 7905 (direct line with answer phone)

Email: urology.nurses@royalberkshire.nhs.uk

Working hours are Monday to Friday between 8am to 5pm, excluding bank holidays and weekends. Please leave a message on the answer machine and the team will aim to respond to you on the same working day or the next working day.

Out of hours: either contact your GP service, NHS 111 or Hopkins Ward on 0118 322 7274.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Urology / Uro-oncology

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