

CHRISTUS HEALTH

Bladder Cancer

Site Specific Annual Report 2016

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Bladder cancer is the ninth most common cancer in the world. There were about 430,000 new cases diagnosed in 2012 (about 77,000 in the United States) and it is the most common type of urothelial cancer. Between 1985 and 2005, the diagnosis of bladder cancer has increased by about 50%.

The purpose of this study is to examine the evaluation and treatment of bladder cancer at Christus Cancer Treatment Center and to ensure that treatment conforms to evidence based guidelines.

Treatment is typically based on the staging which is broadly classified as non-muscle invasive, muscle-invasive, and metastatic. Between the years of 2004 and 2014, 299 cases were diagnosed within the Christus Schumpert Health System. 26.42% were Stage 0, 16.3% were stage I, 20.7% were stage 2, 6.3% were stage 3, and 4.0% were stage 4.

Facilities throughout the United States: 47.6% were stage 0, 21.0% were stage 1, 11.8% were stage 2, 4.8% were stage 3, and 7.1% were stage 4.

TREATMENT:

Treatment for non-muscle invasive cancer depends on whether the tumor is low, intermediate, or high risk. These tumors are treated with transurethral resection of bladder tumor (TURBT) and adjuvant intravesical therapy. Patients with low risk disease are treated with one dose of this chemotherapy. Patients with higher risk disease received typically 6 doses of induction intravesical therapy followed by a maintenance course.

At Christus 68.9% had local tumor excision only compared to 80.1% nationwide. This may be due to the fact that more tumors were muscle invasive as outlined previously at our facility vs. nationwide.

For muscular invasive disease, the mainstay of treatment is radical cystectomy with urinary diversion. This is often preceded by preoperative chemotherapy with a cisplatin-based regimen. Randomized clinical trials have demonstrated a statistically significant survival advantage for patients with muscle invasive bladder cancer undergoing this chemotherapy prior to cystectomy. This is the preferred approach for patients who can tolerate such chemotherapy. There is no data supporting adjuvant chemotherapy.

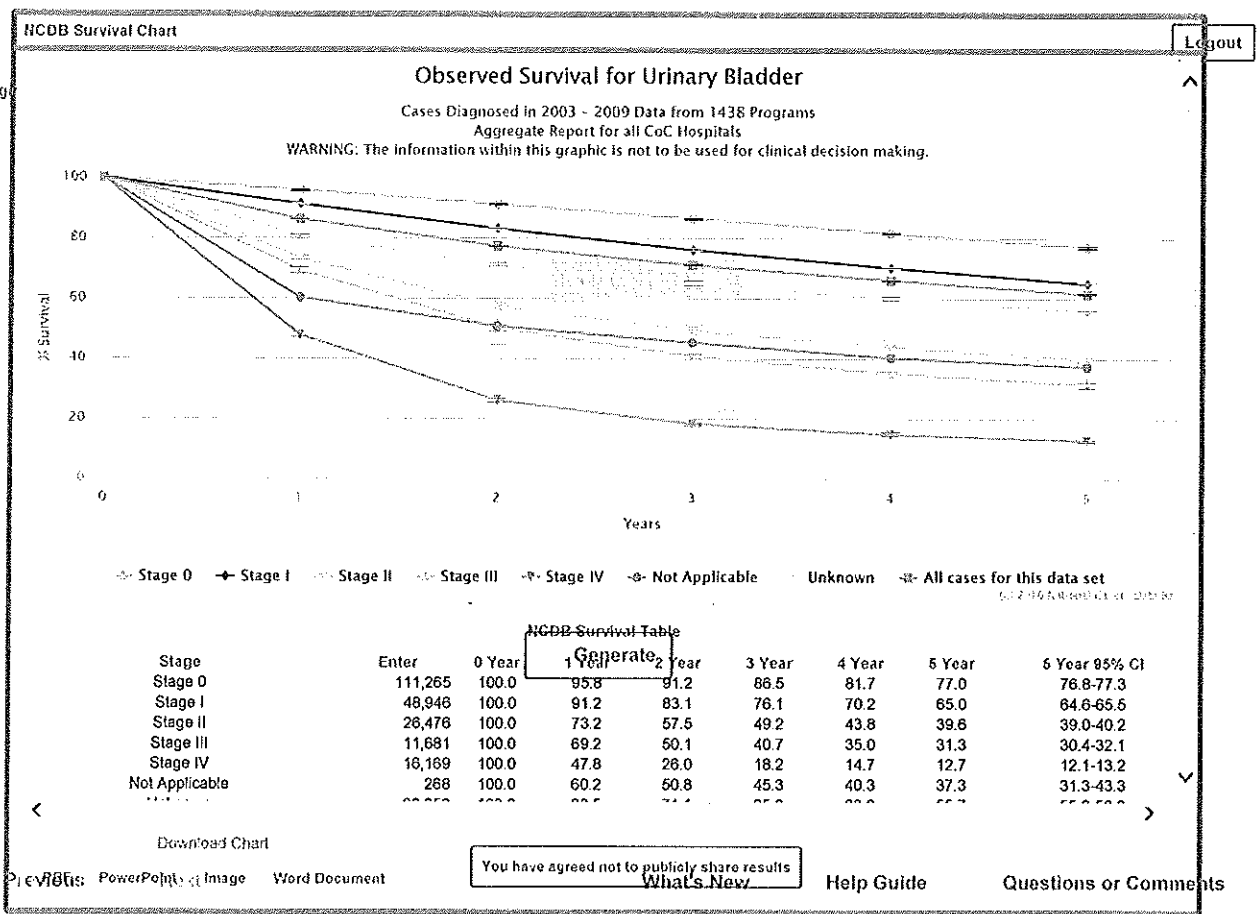
8% of patients at Christus had treatment with surgery and chemotherapy vs. 15% nationwide. This may be due to patient or physician preference or other patient characteristics. The majority of patients had surgery alone at 69.5% locally vs. 63.3% nationwide.

The standard therapy for metastatic bladder cancer involves chemotherapy. Immunotherapy has shown promising results in the second line setting with additional studies ongoing.

The percent at diagnosis of metastatic disease locally was 4% vs. 7% nationwide. Interestingly we had 8% choose no treatment vs. 3.75% nationwide. I am uncertain of the reason for this.

Radiation is considered in combination with chemotherapy in patients who may not be able to tolerate surgery or choose to preserve their bladder.

Survival for patients with bladder cancer at five years is approximately 77% at stage 0, 65% at stage 1, 39% at stage 2, 31% at stage 3, and 12.7% at stage 4.





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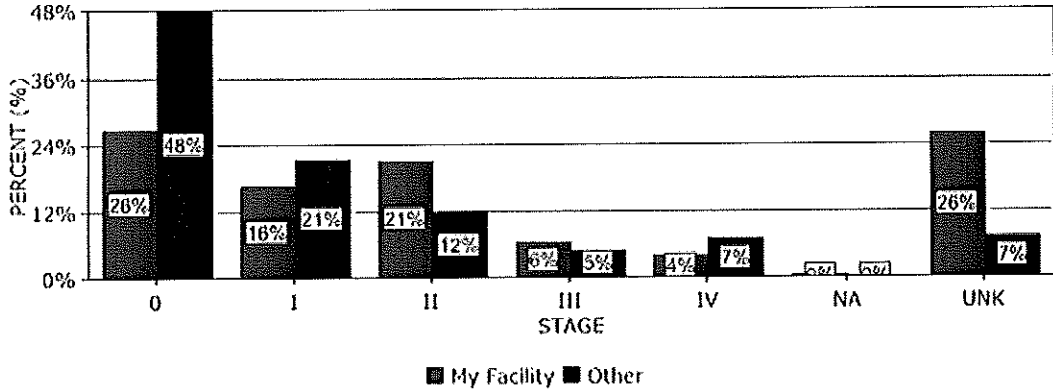
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Stage of Urinary Bladder Cancer Diagnosed in 2004 to 2014
 Christus Schumpert Health System, Shreveport LA
 vs. All Types Hospitals in All States
 All Diagnosis Types - Data from 1470 Hospitals



	0	I	II	III	IV	NA	UNK
My Facility	26%	16%	21%	6%	4%	0%	26%
Other	48%	21%	12%	5%	7%	0%	7%

Stage of Urinary Bladder Cancer Diagnosed in 2004 to 2014
 Christus Schumpert Health System, Shreveport LA
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#	Stage	My (N)	Oth. (N)	My (%)	Oth. (%)
1.	0	79	230584	26.42%	47.68%
2.	I	49	101919	16.39%	21.08%
3.	II	62	57083	20.74%	11.8%
4.	III	19	23204	6.35%	4.8%
5.	IV	12	34341	4.01%	7.1%
6.	NA	1	703	0.33%	0.15%
7.	UNK	77	35756	25.75%	7.39%
Col. TOTAL		299	483590	100%	100%

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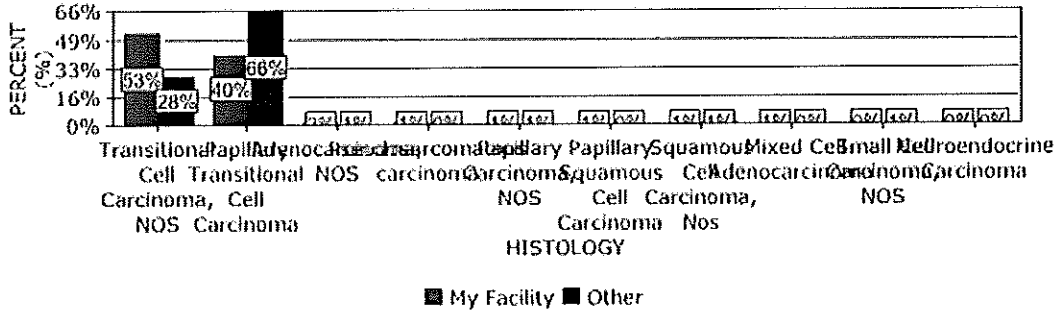
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Histology of Urinary Bladder Cancer Diagnosed in 2004 to 2014
 Christus Schumpert Health System, Shreveport LA
 vs. All Types Hospitals in All States
 All Diagnosis Types - Data from 1470 Hospitals



	Transitional Cell Carcinoma, NOS	Papillary Transitional Cell Carcinoma	Adenocarcinoma, NOS	Pseudosarcomatous carcinoma	Papillary Carcinoma, NOS	Papillary Squamous Cell Carcinoma	Squamous Cell Carcinoma, Nos	Add
My Facility	53%	40%	2%	1%	1%	1%	1%	
Other	28%	66%	1%	0%	1%	0%	1%	

#	Histology	My (N)	Oth. (N)	My (%)	Oth. (%)
	Col. TOTAL	299	483590	100%	100%
1.	Transitional Cell Carcinoma, NOS	159	135267	53.18%	27.97%
2.	Papillary Transitional Cell Carcinoma	120	317516	40.13%	65.66%
3.	Adenocarcinoma, NOS	5	2481	1.67%	0.51%
4.	Pseudosarcomatous carcinoma	3	769	1%	0.16%
5.	Papillary Carcinoma, NOS	2	3348	0.67%	0.69%
6.	Papillary Squamous Cell Carcinoma	2	456	0.67%	0.09%
7.	Squamous Cell Carcinoma, Nos	2	4831	0.67%	1%
8.	Mixed Cell Adenocarcinoma	2	47	0.67%	0.01%
9.	Small Cell Carcinoma, NOS	1	3079	0.33%	0.64%
10.	Neuroendocrine Carcinoma	1	642	0.33%	0.13%

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First Course Surgery of Urinary Bladder Cancer Diagnosed in 2004 to 2014
Christus Schumpert Health System, Shreveport LA
vs. All Types Hospitals in All States
All Diagnosis Types - Data from 1470 Hospitals

My Facility Other

	Local tumor excision, NOS	None; no surgery of primary site	Radical cystectomy	Surgery, NOS	Partial cystectomy	Pelvic exenteration, NOS	Cystectomy, NOS	Local tumor destruction, NOS	Simple/total cyste
MY Facility	69%	11%	8%	6%	3%	3%	0%		
Other	80%	6%	8%	0%	1%	3%	0%	1%	

First Course Surgery of Urinary Bladder Cancer Diagnosed in 2004 to 2014
Christus Schumpert Health System, Shreveport LA
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All Diagnosis Types - Data from 1470 Hospitals

#	First Course Surgery	My (N)	Oth. (N)	My (%)	Oth. (%)
	Col. TOTAL	299	483590	100%	100%
1.	Local tumor excision, NOS	206	387760	68.9%	80.18%
2.	None; no surgery of primary site	32	26849	10.7%	5.55%
3.	Radical cystectomy	24	36832	8.03%	7.62%
4.	Surgery, NOS	17	1347	5.69%	0.28%
5.	Partial cystectomy	10	6589	3.34%	1.36%
6.	Pelvic exenteration, NOS	9	14995	3.01%	3.1%
7.	Cystectomy, NOS	1	946	0.33%	0.2%
8.	Local tumor destruction, NOS	.	5536	.	1.14%
9.	Simple/total/complete cystectomy	.	2271	.	0.47%
10.	Extended exenteration	.	54	.	0.01%

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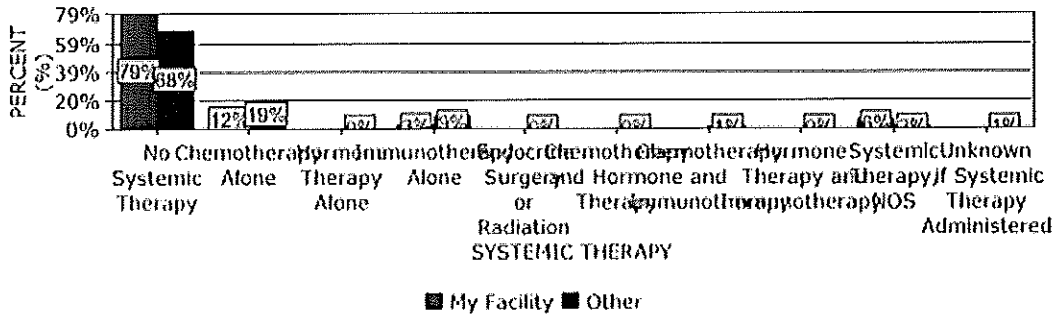
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Systemic Therapy of Urinary Bladder Cancer Diagnosed in 2004 to 2014
Christus Schumpert Health System, Shreveport LA
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	No Systemic Therapy	Chemotherapy Alone	Hormone Therapy Alone	Immunotherapy Alone	Endocrine Surgery or Radiation	Chemotherapy and Hormone Therapy	Chemotherapy and Immunotherapy	Hormone Therapy and Immunotherapy
My Facility	79%	12%	0%	3%	0%	0%	0%	0%
Other	68%	19%	0%	9%	0%	0%	1%	0%

#	Systemic Therapy	My (N)	Oth. (N)	My (%)	Oth. (%)
1.	No Systemic Therapy	235	329042	78.6%	68.04%
2.	Chemotherapy Alone	36	91617	12.04%	18.95%
3.	Hormone Therapy Alone	.	731	.	0.15%
4.	Immunotherapy Alone	9	42284	3.01%	8.74%
5.	Endocrine Surgery or Radiation	.	1	.	0%
6.	Chemotherapy and Hormone Therapy	.	338	.	0.07%
7.	Chemotherapy and Immunotherapy	.	7137	.	1.48%
8.	Hormone Therapy and Immunotherapy	.	31	.	0.01%
9.	Systemic Therapy, NOS	19	7973	6.35%	1.65%
10.	Unknown if Systemic Therapy Administered	.	4436	.	0.92%
	Col. TOTAL	299	483590	100%	100%

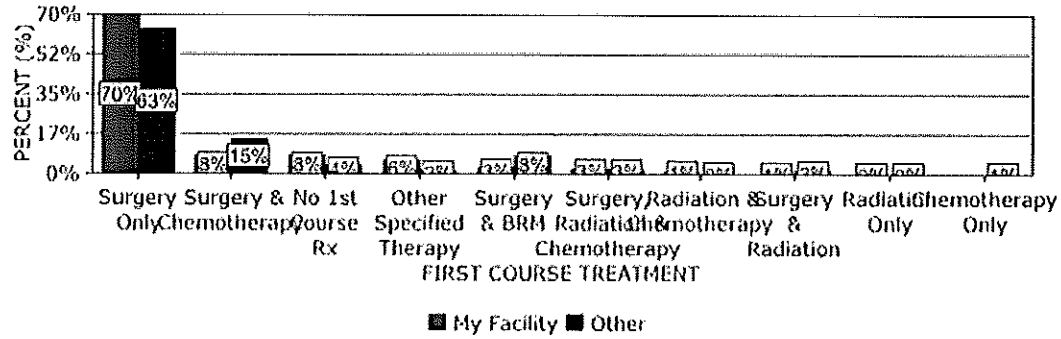


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First Course Treatment of Urinary Bladder Cancer Diagnosed in 2004 to 2014
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	Surgery Only	Surgery & Chemotherapy	No 1st Course Rx	Other Specified Therapy	Surgery & BRM	Surgery, Radiation & Chemotherapy	Radiation & Chemotherapy	Surgery & Radiation	Radiation Only
My Facility	70%	8%	8%	6%	3%	3%	1%	1%	0%
Other	63%	15%	4%	2%	8%	3%	0%	2%	0%

First Course Treatment of Urinary Bladder Cancer Diagnosed in 2004 to 2014
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#	First Course Treatment	My (N)	Oth. (N)	My (%)	Oth. (%)
	Col. TOTAL	299	483590	100%	100%
1.	Surgery Only	208	306185	69.57%	63.31%
2.	Surgery & Chemotherapy	24	74376	8.03%	15.38%
3.	No 1st Course Rx	24	18142	8.03%	3.75%
4.	Other Specified Therapy	19	10033	6.35%	2.07%
5.	Surgery & BRM	9	40423	3.01%	8.36%
6.	Surgery, Radiation & Chemotherapy	8	12464	2.68%	2.58%
7.	Radiation & Chemotherapy	4	1483	1.34%	0.31%
8.	Surgery & Radiation	2	7384	0.67%	1.53%
9.	Radiation Only	1	1404	0.33%	0.29%
10.	Chemotherapy Only	.	3294	.	0.68%

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