About Intravesical Therapy

This information explains intravesical (in-tra-ves-i-cal) therapy at Memorial Sloan Kettering (MSK). It also describes what to expect before and during your intravesical therapy treatments.

Intravesical therapy is a type of treatment for cancer in your bladder or urothelium (the cells that line your bladder and urinary tract). It’s used to treat cancer that hasn’t spread outside the lining of your bladder.

During intravesical therapy, medication is injected (put) into your bladder through a catheter (thin, flexible tube) in your urethra. The medication causes the inner lining of your bladder to break away from the layers of tissue underneath. The lining is then carried out of your bladder in your urine when you urinate (pee). This gives your bladder a chance to grow a new lining that doesn’t have any cancer cells.

Each injection is 1 intravesical treatment. Your doctor will talk
with you about your intravesical therapy treatment schedule.

**During Your Intravesical Therapy**

During your intravesical therapy, it’s important for you or your partner to use a barrier (such as a condom or dental dam) during sexual activity. This will help you avoid exposing your partner to the intravesical therapy medication. Start using barriers when you start intravesical therapy. Your doctor will tell you when it’s safe to stop using them.

Before your first treatment, your nurse will give you more instructions based on the intravesical therapy medication you will be getting.

**Before each intravesical treatment appointment**

Intravesical therapy medications work best if there’s not much urine in your bladder. The medications also need to be held in your bladder for a certain amount of time. If your bladder fills with urine or you need to urinate before your treatment is finished, the medication won’t work as well.

Follow the guidelines below on the day of your treatment appointments. This will help your body make less urine before your treatments.

- If you take a diuretic (water pill), don’t take it before your appointment. You can take it after your treatment if needed. Take your other medications at your normal time.
- Starting 4 hours before your appointment:
Don’t drink anything. However, if you need help swallowing your medications, you can take them with a small sip of water.

Don’t eat anything with caffeine (such as chocolate or foods made with coffee). You can eat foods that don’t have caffeine.

- Your doctor or nurse may tell you to take a medication before each of your treatments. If they do, follow the instructions they give you.

**Getting the intravesical therapy medication**

Your intravesical treatment appointments will be in the infusion treatment area. When you arrive for your appointment, check in at the reception desk and have a seat in the waiting area.

You will be asked to urinate before getting the medication. Try to empty your bladder completely. Once your bladder is empty, your nurse will place a catheter through your urethra, into your bladder. They will inject the intravesical therapy medication into your bladder through the catheter. You may have a feeling of fullness in your bladder, but you won’t have any pain. After the medication is injected into your bladder, the catheter will be removed.

**During each intravesical treatment**

For each treatment, you will hold the medication in your bladder for 1 to 2 hours. Your doctor will tell you the exact
length of time. It may not be the same for each treatment.

Most people can go home after the medication is put into their bladder, but some people may need to stay in the clinic area for up to 2 hours. Your doctor or nurse will give you more instructions during your appointment.

While the intravesical therapy medication is in your bladder, you can do all of your normal activities. You don’t need to do any special activities or movements (such as lying down and moving from side to side) for the medication to work.

**Emptying your bladder**
When your treatment time is up, urinate to let the medication out of your bladder. Empty your bladder completely.

**You may need to take special steps each time you urinate for the first 6 hours after each treatment.** These steps are listed below. Your nurse will check the boxes next to the ones that you need to follow.

- Sit on the toilet when you urinate. This helps prevent splashing.
- After you urinate, close the lid before flushing the toilet.
- After you urinate, flush the toilet twice.
- After you urinate, pour 1 cup of bleach into the toilet. Leave it in the toilet for 15 minutes, then flush the toilet.
After you urinate, wash your hands and genital area well. This will help keep your skin from getting irritated.

- Use soap and warm water or moistened wipes (such as baby wipes or flushable wipes) to wipe your perineal area (the area between your legs) and upper thighs.
- If any liquid gets on your skin when you urinate, wash the area with soap and warm water.
- Wash your hands with soap and warm water.

At your next appointment, tell your doctor or nurse how long you held the medication in your bladder before urinating.

**After each intravesical treatment**

For 48 hours after each treatment, drink more liquids than usual. Aim for 8 or more (8-ounce) glasses of liquids each day. Avoid alcohol and liquids with caffeine (such as coffee, tea, and cola).

You can go back to doing your other usual activities right away after each intravesical treatment, unless your doctor or nurse
Side effects

After each intravesical treatment, you may:

- Have discomfort or a burning sensation when you urinate.
- Need to urinate more often than usual.
- See light red or pink blood in your urine.
- See small pieces of scabs or small amounts of bladder lining in your urine.

Some intravesical therapy medications may cause other side effects. Your doctor or nurse will tell you about any other side effects you may have.

You can write them in the space below.

If you need help managing any side effects, call your doctor’s office.

Response to Intravesical Therapy
During or after your intravesical therapy, you will have tests to see how you’re responding to the treatments. Your doctor or nurse will tell you when to schedule the tests.

- You will have a cystoscopy to check your bladder. During the cystoscopy, your doctor will insert a cystoscope (long, thin camera) through your urethra, into your bladder.
- You will give a urine sample for urine cytology (a urine test). The test will check for cancer cells in your urine.

Based on these tests, your doctor will tell you when to schedule your next follow-up appointment.

**Call Your Doctor if You Have:**

- A fever above 100.5 °F (38 °C).
- Shaking, chills, or both.
- Bright red blood or clots in your urine. Blood clots are large, red, sometimes stringy clumps of blood.
- Flu-like symptoms lasting more than 2 days.
- Fatigue (feeling more tired than usual).
- A rash on your skin.
- A cough.
- Burning or pain during urination for more than 3 days.
- Trouble urinating or can’t urinate.
- Any questions or concerns.
If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 PM, during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.