Bladder cancer: an assessment of international practice guidelines
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Record Status
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Citation

Authors' objectives
Our aim was to identify a comprehensive high-quality practice guideline on the diagnosis, management and follow-up of both muscular-non-invasive and muscular-invasive bladder cancer (limited to urothelial carcinoma). Surgical and radiation therapy as well as adjuvant therapy were to be considered. Ureteral, urethral and genital neoplasms were out of scope of the present report.

Authors' conclusions
Although at the outset the KCE intended to produce a de novo guideline (GL) on the management of bladder cancer, it was found that 10 recently updated bladder cancer guidelines produced by international agencies were available, two of them published in 2015, and two others in 2014. Upon critical appraisal of those GLs, the one produced by the UK's National Collaborating Centre for Cancer and commissioned by NICE came out as the most comprehensive and methodologically most solid guideline. It was also the most up-to-date document, including published research until June 2014. Our Guideline Development Group (GDG) concluded that the development of a new Belgian guideline on bladder cancer would be redundant and a waste of time and resources. Some GDG members commented that the NICE guideline is less well known among Belgian clinicians as compared to the EAU (European Association of Urology) guidelines, but the GDG saw this KCE report as an opportunity to inform their colleagues on the high quality of the NICE guideline. They emphasised also the important role of the Belgian urological and oncological societies to disseminate this guideline to their members. The full version of the NICE guideline is a comprehensive document, including a 929 pages “evidence review” and a 500 pages “clinical guideline”. It is too large for hands-on use in daily practice. However, the algorithms that are produced by NICE and displayed on its website clearly guide clinicians through the clinical pathway per cancer stage. The GDG members emphasised the importance of such tools which could be re-used on the College of Oncology's website. The GDG stressed the importance of the “Information for the public” section on NICE's website and mentioned the need to raise awareness to the general Belgian public for early signs of bladder cancer (haematuria) and its relation to smoking. The lack of a French and Dutch version of the guideline could hamper patients to retrieve this information. During the GDG meeting the scientific organisations and the organisation of patient representatives discussed opportunities to collaborate to translate NICE's patient information to French and Dutch. The European Urology Week in September 2015 was mentioned as an excellent opportunity to inform patients about bladder cancer. This concise report will be published on the KCE website including links to relevant NICE documents for which permission was obtained by NICE. A press release will be published in collaboration with the BMUC (Belgian Multidisciplinary Meeting on Urological Cancers), a cooperation between the Belgian Society of Medical Oncology (www.bsmo.be), the Belgian Association of Urologists (www.bvu.be and www.societebelgeurologie.be), the Belgian Association of Radiation-Oncology (www.abro-bvro.be), representing medical oncologists, urologists and radiation oncologists.

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