

Cystectomy

Who is suitable for Cystectomy?

Cystectomy may be necessary for patients that:

- Have a bladder tumour that has invaded the muscle wall (or has not invaded the muscle wall but is very large)
- Have bladder cancer that has returned after treatment with BCG or Mitomycin
- Have recurrent bleeding from bladder damage after radiation treatment for prostate cancer

What are the advantages of Cystectomy?

- This is major surgery but can be life-saving by preventing the spread of bladder cancer to other parts of the body
- Most patients can achieve a good quality of life after this surgery and avoid the need for radiation treatment

How is Cystectomy performed?

- This procedure is performed under general anaesthetic
- This is major cancer operation; at Melbourne Urology Centre these cases will be performed by 2 experienced surgeons working together to achieve the best possible outcomes
- A midline abdominal incision is made to access the bladder which is removed (along with the prostate in men, and the uterus in women). The pelvic lymph nodes (which is the first place that bladder cancer usually spreads to) are also removed
- A segment of small intestine is then used to create a 'conduit' which allows the urine to drain onto the skin (stoma) into a bag attached to the abdomen

What to expect after Cystectomy?

- Most patients will remain in hospital for around one week after this

surgery

- The bowel takes time to recover so you will gradually be started on fluids and then food over the course of several days
- Complete recovery from Cystectomy can take 1-3 months
- Strenuous activity and heavy lifting should be avoided for the first 6 weeks to minimize the chance of a hernia
- Most patients can return to a normal lifestyle following this surgery
- The stoma and bag are very discrete and easily concealed under clothing
- A stomal therapist will assess each patient prior to surgery to identify the most appropriate location for the conduit site (stoma)

Procedure outcomes

- To ensure the best possible outcome all patients at Melbourne Urology Centre will be treated with a multidisciplinary approach including specialist perioperative medical physician, medical oncologist, experienced anaesthetist
- Some patients will have chemotherapy either prior to or after Cystectomy – in some cases this may improve overall survival from bladder cancer compared to Cystectomy alone
- A medical oncologist will be involved to help determine which treatment is best for each individual patient
- If the cancer is confined to the bladder and hasn't spread to lymph nodes the long-term outcomes are usually good
- If the cancer has spread to lymph nodes or other organs, there are systemic treatments available including chemotherapy or immunotherapy

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European Association of Urology, (2021), Cystectomy, [<https://patients.uroweb.org/treatments/cystectomy/>], accessed 28/02/21.

Urology Care Foundation, 2021), Muscle invasive bladder cancer, [<https://www.urologyhealth.org/healthy-living/urologyhealth-extra/magazine-archives/fall-2020/muscle-invasive-bladder-cancer>], accessed 28/02/21.