

Low-dose Gemcitabine and Carboplatin as a Good Palliation for Local Symptoms in Advanced Transitional Cell Carcinoma of Bladder

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Introduction

Controlling local symptoms of bladder cancer in advanced situations is important to provide a good quality of life for the patients.¹ We treated these cases in an ambulatory setting using gemcitabine and carboplatin.

Materials and Methods

Twenty chemotherapy-naïve patients with advanced bladder cancer (transitional cell carcinoma), seventeen males and three females, with an average age of 63 years were included in the study. All patients had multiple sites of metastasis in lung, liver, and/or bone. All patients had bladder involvement for which underwent conservative surgery.

Patients underwent a total 12-courses chemotherapy (gemcitabine 750mg/m² and carboplatin 200mg/m² every three weeks for six sessions, and every two months for the next sessions. All cases were treated in an outpatient setting. Low doses were applied to avoid potential side effects.

Results

All patients had a subjective feeling of improvement with this treatment. Gross hematuria, dysuria, frequency, and urinary incontinence were controlled in all cases except one. Improvement was more considerable after the second course of chemotherapy. The only side effect was mild transient thrombocytopenia. Nausea and vomiting were not significant, and tolerated by all patients.

The average follow up was eight months, without any recurrence of symptoms. The maximum duration of clinical remission was three years.

Discussion

In advanced bladder cancer; because of incurability, short survival, and high morbidity of repeated operations, a palliative therapeutic approach is needed.²⁻⁴ The aim of our study was to control the local symptoms of bladder cancer. The combination of low-dose gemcitabine and carboplatin is an ideal systemic chemotherapy regimen for advanced bladder tumors. High efficacy and low rate of side effects, such as alopecia, nausea, vomiting, mucositis, and bone marrow toxicity led it to be selected as a good therapeutic choice. Here, we reported on its possible efficacy to control local symptoms of advanced bladder cancer medically, regardless of other sites of metastasis and survival, to provide an acceptable quality of life to the patients.

References

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