Intravesical Antineoplastic Therapy Following Transurethral Resection of Bladder Tumors: Nursing Implications From the Operating Room to Discharge

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An aging population and latent effects from exposure to carcinogens will likely augment the current trend of increased incidence of urinary bladder cancer. Intravesical antineoplastic therapy is a common treatment for urinary bladder cancer. Transurethral resection of bladder tumors often is followed immediately by the instillation of an antineoplastic agent in the operating room or postanesthesia care unit. Oncology nurses, who have a unique knowledge of safe handling and patient care, can improve staff safety and patient outcomes in several areas of healthcare organizations, as well as reduce the mortality and morbidity of urinary bladder cancer by learning more about the disease and intravesical antineoplastic therapy.

At a Glance

- Urinary bladder cancer is one of the most common cancers in the United States and is expected to increase in incidence with the aging population.
- To reduce recurrence of bladder tumors, intravesical antineoplastic therapy often immediately follows transurethral resection of bladder tumors. Oncology nurses can improve patient outcomes and reduce hazardous exposure to antineoplastic drugs.
- Oncology nurses can help reduce urinary bladder cancer morbidity and mortality by teaching risk reduction, educating patients about the disease’s signs and symptoms, and advocating for screening and early detection.

reports have addressed the relationship of cancer occurrence to healthcare workers’ exposures to antineoplastic drugs” (p. 6). Healthcare professionals also suffer from acute and delayed