

Cystoscopy

► What is a Cystoscopy?

Cystoscopy [si-stos-kuh-pee] is a procedure used to look inside the bladder and *urethra*. It helps doctors diagnose bladder cancer. During a cystoscopy, a thin flexible or rigid, lighted instrument called a cystoscope is inserted into the urethra. Tissue samples can be removed with the rigid cystoscope.

Some health care institutions offer blue light cystoscopy. A special medication is placed in the bladder before the cystoscopy. A “blue light” in the cystoscope helps the tumors to glow from the medication that was instilled into the bladder.

► What *happens* during a cystoscopy?

Most cystoscopies are done in an outpatient setting. Most patients are not admitted to the hospital and go home shortly after the cystoscopy is over.

- A numbing medicine placed into the urethra may help to reduce discomfort from the cystoscope.
- During the cystoscopy, the *urologist* may remove a small piece of tissue. This sample of tissue is called a biopsy. It is sent to a *pathologist* to determine if it is cancer. If the tumor cannot be safely biopsied during the cystoscopy, another appointment will be made to have this done under general anesthesia.
- A sample of urine from your bladder may also be analyzed (*cytology*) to determine if there are any cancer cells.
- Information from the biopsy sample and the urine sample will help the doctor make recommendations about your future care.



ASK YOUR HEALTHCARE TEAM

- » *Why is a cystoscopy a good option for me?*
- » *What can I do to prepare? Can I eat or drink before the procedure?*
- » *Will I be given any medication before the procedure? Should I take my other medications the day of the procedure?*
- » *How long does the cystoscopy take?*
- » *Will you take a urine sample? If there is a tumor, will you take a biopsy of it?*
- » *How long will it take to recover after the cystoscopy? What side effects can I expect?*
- » *If the cystoscopy shows I have bladder cancer, what happens next?*
- » *If you have a prosthetic joint (i.e. total knee replacement or total hip replacement, etc.) ask your healthcare team if you should have antibiotics before your procedure.*

TERMS TO KNOW

- **Cytology:** The study of the microscopic appearance of cells.
- **Pathologist:** A doctor who identifies disease by studying cells and tissues under a microscope.
- **Urethra:** The tube through which urine empties from the bladder.
- **Urologist:** A doctor who specializes in diseases of the urinary organs in females and the urinary and sex organs in males.

WHAT YOU SHOULD KNOW: Advice from bladder cancer patients who have experience with cystoscopy

BEFORE YOUR CYSTOSCOPY

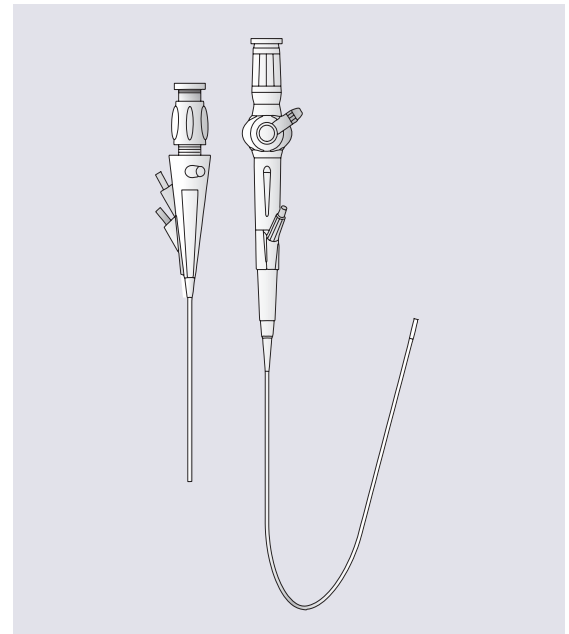
- Think positively. Try to relax as much as possible. Your doctor may also give you medication before the procedure to help you relax. Some people listen to music or do breathing exercises. Do whatever works for you!
- Bring a friend or family member to take notes on what the doctor tells you.

DURING YOUR CYSTOSCOPY

- If you are a woman, you will be asked to lie down and put your feet in stirrups or bend your knees and hold your legs apart. Try not to be embarrassed; many people have cystoscopies!
- Do not forget to breathe. Try to distract yourself by thinking about something else.
- Your doctor may be able to tell you what he or she sees during the procedure. There may also be a monitor or screen where you can watch what is going on, too.
- Do not be afraid to ask questions and tell the doctor or nurse what you are feeling.

AFTER YOUR CYSTOSCOPY

- Drink lots of water. Using medications, gels, and heating pads might help with any discomfort or side effects. Ask your doctor or nurse what he or she recommends.
- Follow your doctor's instructions. Get instructions in writing so you can refer to them later. Call your medical team if you have questions or something seems wrong.
- Side effects from a cystoscopy may vary. They include a burning sensation, difficulty urinating, abdominal pain, spasms, incontinence, and blood in your urine.
- If you have trouble urinating, you may need to use a catheter (a hollow tube used to drain urine from your bladder) for a few days.
- Your doctor may recommend taking antibiotics to help prevent infection. If you had a prior cystoscopy that was complicated by a urinary tract infection, be sure your healthcare team is aware. This might change their plans for you regarding antibiotic usage related to your cystoscopy.



The Rigid Cystoscope (left) has a straight stem.
The Semirigid Ureteroscope (right) has a u-shaped bend.

Image: with permission from National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

NEXT STEPS:

- **If the cystoscopy finds a bladder tumor**, your doctor will likely recommend a Transurethral Resection of the Bladder Tumor (TURBT). With a TURBT the tumor can be removed while you are under anesthesia. It is sent to a pathologist for examination. See BCAN's "**Bladder Cancer: Get the Facts TURBT**"
- It can be helpful to talk to someone who has experienced a Cystoscopy. Call the BCAN Survivor 2 Survivor program to connect with a volunteer who knows about having a Cystoscopy. Dial 888-901-BCAN.

The Bladder Cancer Advocacy Network (BCAN)

BCAN's mission is to increase public awareness about bladder cancer, advance bladder cancer research, and provide educational and support services for the bladder cancer community.



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