Summaries of Clinical Studies Relating to Veterans and Bladder Cancer

1. The prevalence rate of bladder cancer is increasing in veterans

Prevalence and trends of selected urologic conditions for VA healthcare users
Min-Woong Sohn1,2, Huiyuan Zhang1,2, Brent C Taylor3, Michael J Fischer1,4, Elizabeth M Yano5, Christopher Saigal6, Timothy J Wilt3,7 and the Urologic Diseases in America Project

Conclusion
In conclusion, prevalence rates of several high priority urologic diseases including prostate, bladder, kidney cancers, renal mass and erectile dysfunction are increasing in veterans and show regional and racial variations. The comparison of the VHA and the Medicare data shows different trends in prevalence of several urologic conditions. Prevalence rates among veterans might be substantially underestimated without using other administrative claims data, including Medicare in combination with VHA data.

2. A higher than expected association of prostate and bladder cancer among veterans

Higher Than Expected Association of Clinical Prostrate and Bladder Cancers
AMAR SINGHa, YOSHIHISA KINOSHITAa, PETER M. ROVITO, JRa, STEVE LANDASa, JON SILBERSTEINA, IMAD NSOUILla, CHING Y. WANGa and GABRIEL P. HAAS

In this study we evaluated the risk of a second malignancy of the bladder or prostate in patients with a previous diagnosis of prostate cancer (PCa) or urothelial cancer (TCC).

Conclusions:
Patients with PCa have higher incidence of bladder cancer and those with bladder cancer have a higher incidence of PCa. This study has clinical implications in the care of these patients and it may stimulate research interest that may identify common pathways of carcinogenesis.

3. Veterans with nonmuscle-invasive bladder cancer have a poorer health related quality of life than private patients.

Veterans with NonMuscle-Invasive Bladder Cancer Report Worse HRQOL than Private Patients
Sai K JP Munjampalli, Jeffery Gordon, Leslie Schover, Gilad E Amiel, David M Latini, Seth Lerner, Houston, TX

Preliminary data from this on-going study will be presented at the 2009 AUA annual meeting in Chicago. Highlights include: Veterans have poorer health related quality of life than private patients.
4. **Among white veterans, risk was significantly elevated for several cancers, including cancers of the bladder**

*Obesity and cancer risk among white and black United States veterans*

Claudine Samanic*, Gloria Gridley, Wong-Ho Chow, Jay Lubin, Robert N. Hoover & Joseph F. Fraumeni, Jr., Division of Cancer Epidemiology and Genetics, National Cancer Institute, NIH, DHHS, Bethesda, MD 20892, Cancer Causes and Control 15: 35–43, 2004. 2004

**Conclusions:** Obese men are at increased risk for several major cancers as well as a number of uncommon malignancies, a pattern generally similar for white and black men. Due to the increasing prevalence of obesity and overweight worldwide, it is important to clarify the impact of excess body weight on cancer and to elucidate the mechanisms involved.

5. **VA Greater Los Angeles Healthcare System, Los Angeles, California: Single-institution series have documented the adverse impact of a 12-week delay between resection of muscle-invasive bladder cancer and radical cystectomy.**


Delay in definitive surgical treatment beyond 12 weeks conferred an increased risk of disease-specific and all-cause mortality among subjects with stage II bladder cancer. Compared with immediate surgery (i.e., within 4-8 weeks of transurethral resection), longer time to cystectomy increased the risk of both disease-specific and overall mortality
NMP22 Articles

The following provides a listing of some recent peer reviewed articles, abstracts and presentations about the NMP22 test used in diagnosing and monitoring bladder cancer that are summarized in this report.

JAMA 2006

JAMA 2006

CA Cancer Journal for Clinicians 2006
1. Recurrence Urine Test May Improve Detection of Bladder Cancer, CA Cancer J Clin 2006;56;132-133

World Journal of Urology 2007

Urologic Oncology 2006

BJU International 2008

Supplement to Contemporary Urology September 2006
5. Improving Bladder Cancer Detection: The Value Of Combining a Molecular Test with Cystoscopy, A review of the 2006 American Urological Association (AUA) Bladder Cancer Detection and Screening podium and poster sessions, including scientific findings reported at EAU and SGSU, Mark S. Soloway, MD, H. Barton Grossman, MD, Giora Katz, MD, and Barry Stein, MD, Ihor S. Sawczuk, MD, Carleen Bensen, MD

Supplement to Contemporary Urology September 2005
Abstracts
American Urological Association
May 2008

1. Evaluation Of Urinary Nuclear Matrix Protein 22 Test for Detection of Upper Tract Urothelial Carcinoma
   Ithaar H Derweesh*, Jim Y. Wan, Christopher J. DiBlasio, John B. Malcolm, Reza Mehrazin, Anthony L. Patterson, Robert W. Wake, Memphis, TN

2. Urine cytology is of no added value in the primary evaluation of patients with hematuria. Marina C Hovius*, Lara C. Schreuders, Roos W. Wieringa, Guido M. Kamphuis, Eddi A. Heldeweg, George van Andel, Amsterdam, The Netherlands

3. Florida State Bladder Cancer Clusters: Identification of Populations at Risk
   Alan M. Nieder*, Jill A. MacKinnon, Miami, FL; Youjie Huang, Tallahassee, FL; Lora E. Fleming, Leonidas G. Koniaris, David J. Lee, Miami, FL


5. Results from the San Francisco Firefighters Bladder Cancer Screening Study
   Kirsten L Greene*, Badrinath Konety, Marshall Stoller, San Francisco, CA

May 2007

6. Evaluation and Work-up of Hematuria Among Primary Care Physicians in Miami-Dade County: an Anonymous Questionnaire-Based Survey
   Alan M Nieder, MD, Murugesan Manoharan, MD, Sachin Vyas, PhD, Mark S Soloway, MD. University of Miami Miller School of Medicine, Miami, FL

7. Gender Disparities in Urologic referral of Hematuria
   Emilie Johnson, Stephanie Daignault, Yingxi Zhang, Cheryl T Lee*, Ann Arbor, MI.

March 2006 -- Society for Gynecologic Investigation (SGI), Scientific Poster 332,