

# EAU's nye risikoklassifisering av ikke-muskelinvasiv blærekreft

Risk group	
Low Risk	<ul style="list-style-type: none"><li>• A primary, single, Ta/T1 LG/G1 tumour &lt; 3 cm in diameter without CIS in a patient &lt; 70 years</li></ul>
	<ul style="list-style-type: none"><li>• A primary Ta LG/G1 tumour without CIS with at most ONE of the additional clinical risk factors (see below*)</li></ul>
Intermediate Risk	<ul style="list-style-type: none"><li>• Patients without CIS who are not included in either the low, high or very high-risk groups</li></ul>
High Risk	<ul style="list-style-type: none"><li>• All T1 HG/G3 without CIS, EXCEPT those included in the very high-risk group</li><li>• All CIS patients, EXCEPT those included in the very high-risk group</li></ul>
	<b>Stage, grade with additional clinical risk factors:</b> <ul style="list-style-type: none"><li>• Ta LG/G2 or T1 G1, no CIS with all 3 risk factors</li><li>• Ta HG/G3 or T1 LG, no CIS with at least 2 risk factors</li><li>• T1 G2 no CIS with at least 1 risk factor</li></ul>
Very High Risk	<b>Stage, grade with additional clinical risk factors:</b> <ul style="list-style-type: none"><li>• Ta HG/G3 and CIS with all 3 risk factors</li><li>• T1 G2 and CIS with at least 2 risk factors</li><li>• T1 HG/G3 and CIS with at least 1 risk factor</li><li>• T1 HG/G3 no CIS with all risk factors</li></ul>

\*The additional clinical risk factors are: Age >70 yr, Multiple tumours, Tumour diameter  $\geq 3$  cm.

Ref.: EAU Guidelines 2021

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# Behandlingsanbefalinger ifølge EAU-Guidelines 2021

Recommendations	Strength rating
<b>EAU risk group: Low</b>	
Offer one immediate instillation of intravesical chemotherapy after transurethral resection of the bladder (TURB).	Strong
<b>EAU Risk Group: Intermediate</b>	
In all patients either one-year full-dose Bacillus Calmette-Guerin (BCG) treatment (induction plus 3-weekly instillations at 3, 6 and 12 months), or instillations of chemotherapy (the optimal schedule is not known) for a maximum of one year is recommended. The final choice should reflect the individual patient's risk of recurrence and progression as well as the efficacy and side effects of each treatment modality. Offer one immediate chemotherapy instillation to patients with small papillary recurrences detected more than one year after previous TURB.	Strong
<b>EAU risk group: High</b>	
Offer intravesical full-dose BCG instillations for one to three years or radical cystectomy (RC).	Strong
<b>EAU risk group: Very High</b>	
Consider RC and offer intravesical full-dose BCG instillations for one to three years to those who refuse or are unfit for RC.	Strong

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