

The Influence of NBI Vision Over the First Follow-up Cystoscopy' Outcomes in Newly Diagnosed NMIBC Patients

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Abstract

Background: A retrospective study was aimed to establish the eventual impact of narrow band imaging (NBI) cystoscopy over the short term residual tumors' rate determined during the first follow-up endoscopic control in newly determined non-muscle invasive bladder cancer (NMIBC) cases.

Methods: 68 patients were found with NMIBC by means of both white light cystoscopy (WLC) and NBI. A follow-up using both investigation modalities was performed at 3 months from the initial procedure in 67 cases (one was lost from follow-up). Results concerning the short term recurrences were retrospectively compared to those obtained in a similar series of 67 patients previously diagnosed and treated by means of classical WLC and resection only.

Results: The short term residual tumors' rate established during the first follow-up cystoscopy was lower in the study group initially benefiting from the NBI mode by comparison to the WLC control series (4.5% versus 11.9%). When drawing a parallel with the tumor map location outlined during the initial procedure, the most important differences were emphasized concerning other site recurrences (3% versus 8.95%).

Conclusions: NBI cystoscopy and resection displayed a substantially favorable influence over the short term oncologic outcome in newly diagnosed NMIBC cases when compared to the standard protocol.

Abbreviations: NBI – narrow band imaging; NMIBC – non-muscle invasive bladder cancer; WLC – white light cystoscopy; TURBT – transurethral resection of bladder tumors; CIS – carcinoma in situ

Key words: narrow band imaging, newly diagnosed NMIBC, first follow-up cystoscopy, short term recurrence

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