

Re: Defining Progression in Nonmuscle Invasive Bladder Cancer: It is Time for a New, Standard Definition: D. Lamm, R. Persad, M. Brausi, R. Buckley, J. A. Witjes, J. Palou, A. Böhle, A. M. Kamat, M. Colombel and M. Soloway J Urol 2014;191:20-27

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RE: DEFINING PROGRESSION IN NON-MUSCLE-INVASIVE BLADDER CANCER:

IT IS TIME FOR A NEW, STANDARD DEFINITION

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18 We write in agreement with Lamm et al in proposing a new standard definition for progression in
19 non-muscle-invasive bladder cancer (NMIBC)¹. We too recognised that defining a state of
20 progression before the development of muscle-invasion would be a useful tool for clinical trials in
21 NMIBC. Consequently, in 2005 we went through a very similar process to Lamm et al when writing
22 the protocol for the West Midlands' (UK) Bladder Cancer Prognosis Programme (BCPP, incorporating
23 the SELENIB clinical trial), defining progression as "a recurrence with an increase in tumour grade
24 from 1/2 to grade 3, or an increase in TNM stage, or the new occurrence of carcinoma *in situ* (CIS) in
25 a bladder previously free from such lesions, or the new occurrence of multiple tumours following
26 resection of a solitary tumour, or the need for a cystectomy because of refractory disease"³. Clearly,
27 there are many similarities between our definition of progression for the purposes of BCPP/SELENIB
28 and that proposed by Lamm et al, and we support their rationale and endeavour¹. As we have
29 observed with the change in terminology from "superficial bladder cancer" to "NMIBC" over the last
30 ten years or more^{4,5}, the key to adoption is utilising a term which is universally applicable and
31 acceptable. In BCPP/SELENIB we have always qualified our definition of progression by describing it
32 as "biological progression". Perhaps "biological progression" could be the term that best describes
33 Lamm et al's new definition?

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36 **References**

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