



# MP72-04 T1 substage in superficial bladder urothelial carcinoma can predict progression free survival

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# **Conflict of Interest Disclosure**

**I have no potential conflict of interest to report**

# Introduction



For urothelial bladder cancer, the **depth** of tumor invasion affect prognosis significantly



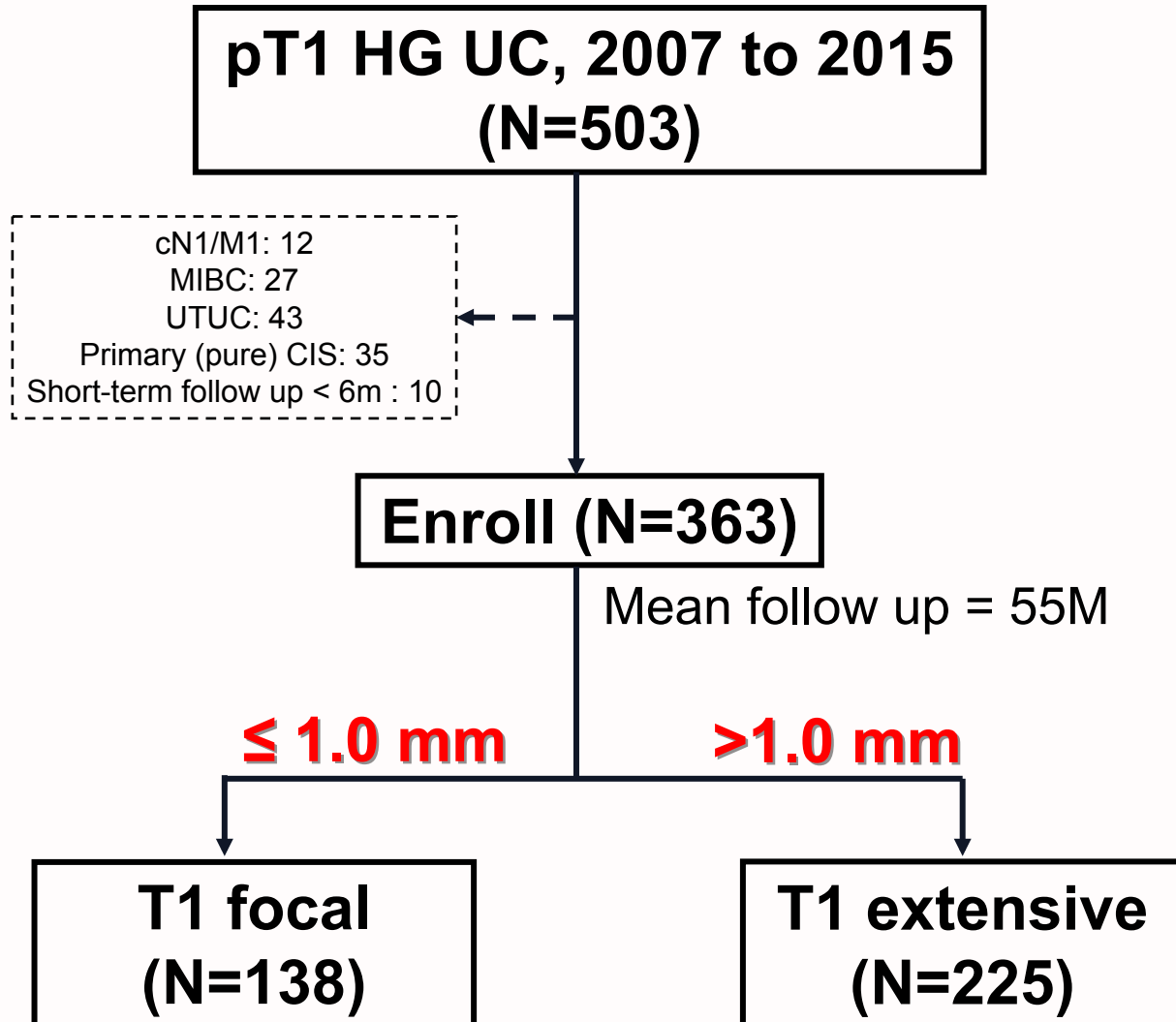
pT1 have highly variable clinical course, but there is no consensus in sub-staging system



We analyzed the outcomes of T1 sub-staging according to the depth of lamina propria invasion (**1.0 mm** as cut-off)

mm

# Materials and Methods



Outcomes analyzed:

- Recurrence free survival (RFS)
- Progression free survival (PFS)
- Cancer specific (CSS)
- Overall survival (OS)

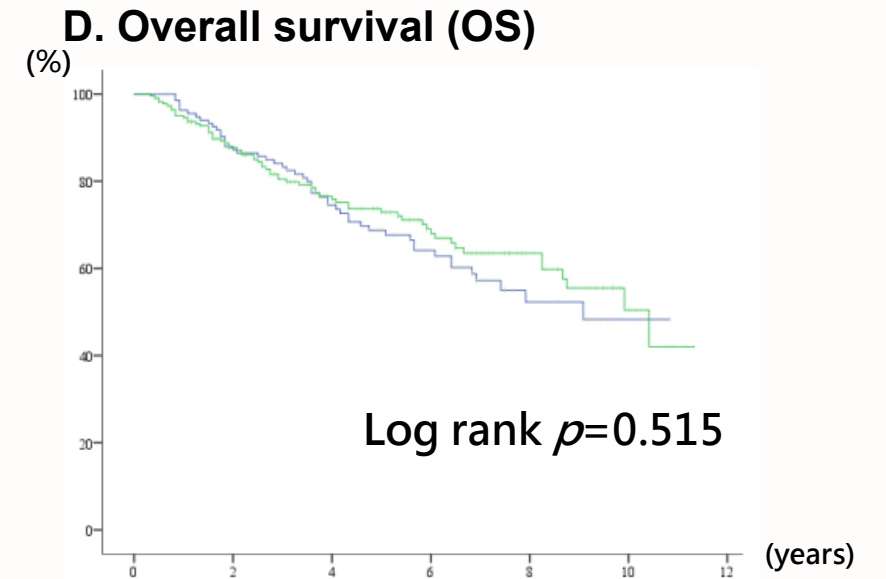
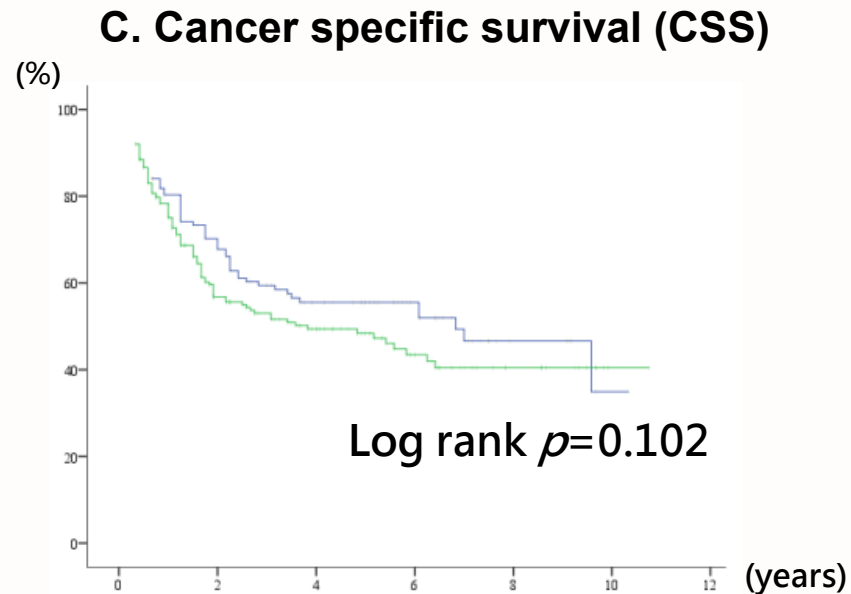
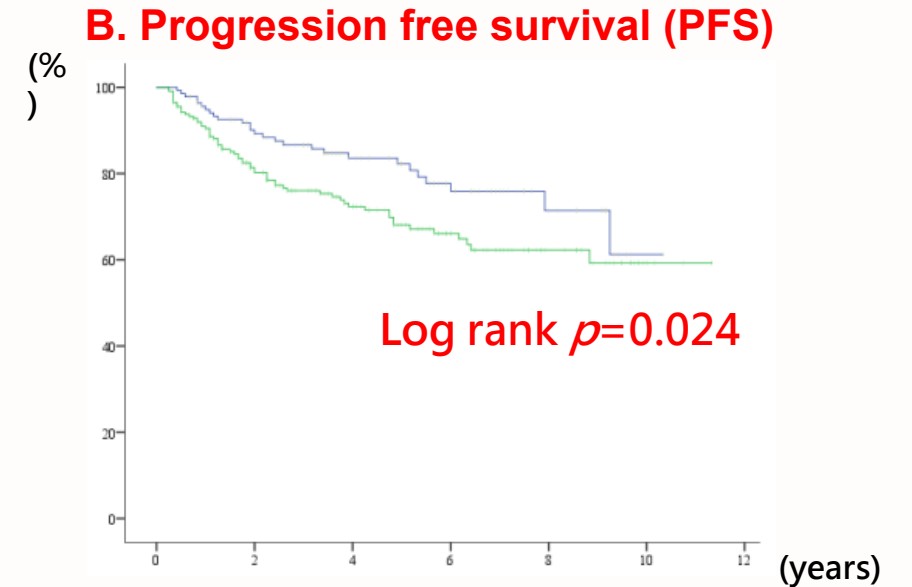
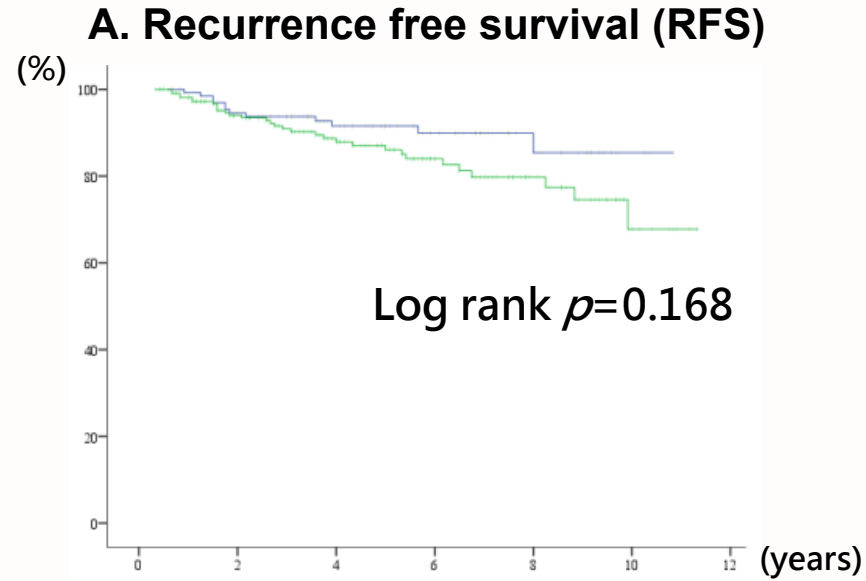
# Characteristics

Mean follow up = 55M

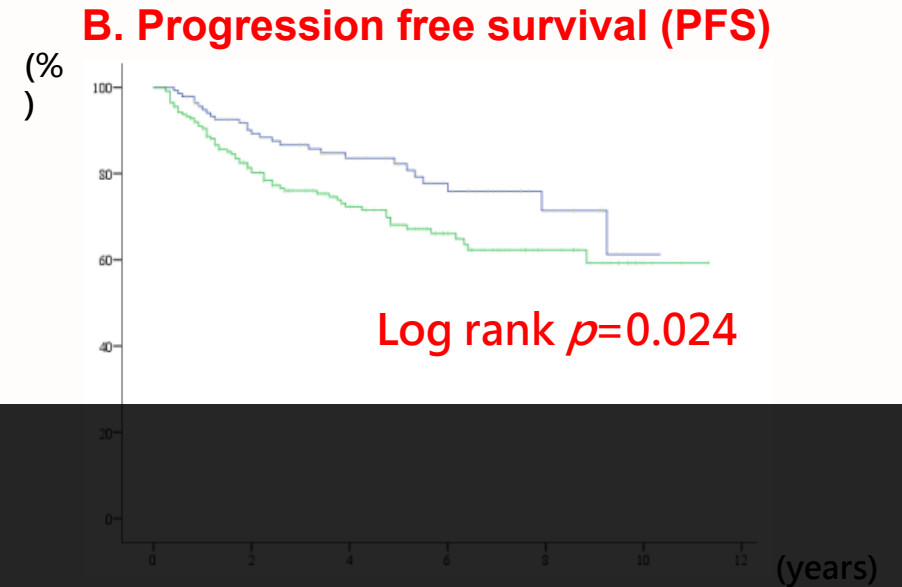
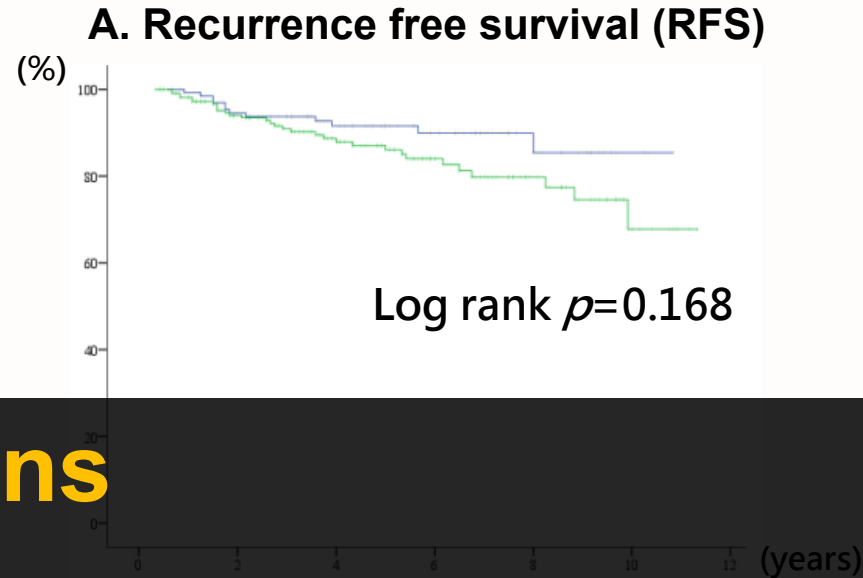
	All pT1 HG	Focal ( $\leq 1.0$ mm)	Extensive ( $> 1.0$ mm)	P value
N (%)	363	<b>138</b>	<b>225</b>	N/A
Age, mean (SD)	74.0 ( $\pm 12.0$ )	75.1 ( $\pm 11.6$ )	73.6 ( $\pm 12.3$ )	0.261
Sex (Male)	292 (80.4%)	112 (81.2%)	180 (80%)	0.892
Smoking	122 (33.6%)	41 (29.7%)	81 (36%)	0.253
Concurrent CIS	42 (11.6%)	20 (14.5%)	25 (11.1%)	0.412
Mortality	115 (31.7%)	50 (36.2%)	65 (28.9%)	0.163
Primary occur	99 (27.2%)	40 (28.9%)	59 (26.2%)	0.627
Intravesical chemotherapy	106 (29.2%)	43 (31.2%)	63 (28%)	0.553
Ives BCG	83 (22.9%)	42 (30.4%)	41 (18.2%)	0.128

# Results

— T1 focal  
— T1 extensive



# Results



# Conclusions

- ① In our single institute cohort, extensive T1 predicted **shorter PFS** than focal T1
- ② However, there is no evidence of survival difference
  - May be affected by consequential treatment

