Bladder Cancer – Recurrence vs Metastatic vs Progression

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Objectives

1. Distinguish Metastatic disease and progression using NED-based decision making.

Apply TNM staging and bladder MP/H rules to complex abstraction scenarios

Analyze case-based examples to improve coding accuracy and consistency

Why This Matters

Common source of abstraction errors

Impacts staging and recurrence coding

Drives treatment interpretation

Core Question

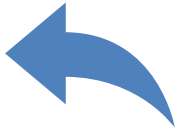
Was there ever a documented NED?

YES → Recurrence

NO → Metastatic or progression

Definitions

Metastatic: spread at diagnosis (no NED)



Recurrence: returns after NED

Progression: never cleared

TNM Refresher

T = tumor in bladder

N = regional nodes (pelvic)

M = distant spread

Key TNM Clarification

All spread beyond the primary site = metastatic clinically

TNM divides spread into:

N = Regional lymph nodes

M = Distant Metastasis

Not all metastatic spread = M stage

Bladder Lymph Node Rule

PELVIC NODES = N

OUTSIDE PELVIS = M1

LOCATION
DETERMINES STAGING

Multiple Primary Rule (Bladder)

Urothelial tumors = ONE primary (lifetime)

Micropapillary = separate primary

Timing does not matter

What This Means

Multiple bladder tumors ≠ new primaries

They are recurrence of same primary

Case 1: Metastatic at Diagnosis

Bladder tumor + lymph nodes at diagnosis

No NED period

-> Metastatic disease to lymph node

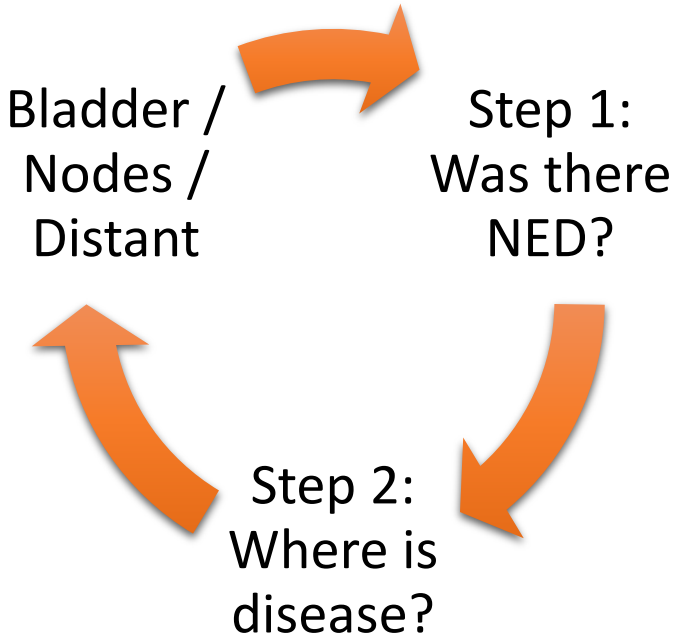
Case 2: Distant Recurrence

Dx -> surgery -> NED

8 months later bone mets ->

-> Distant recurrence

Decision Process



Common Pitfalls

1. Calling all node disease M
2. Ignoring NED
3. Creating multiple primaries incorrectly

Key Takeaways

No NED = NOT recurrence

TNM = where, NED = when

Bladder urothelial = one primary

Case 3: Progression vs Recurrence (Trick Case)

Bladder cancer -> chemo -> cystectomy (no residual tumor)

Pre-op imaging: hepatic lesion suspicious for mets

1 month post-op: sclerotic bone metastases

-> PROGRESSION (not recurrence)

Why This is Progression

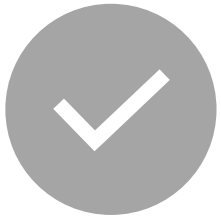
Metastatic disease suspected BEFORE surgery

No confirmed NED across all sites

Post-op mets = continuation of disease

Final Comparison: Recurrence vs Metastatic vs Progression

Metastatic at Dx: No NED, spread present at diagnosis



Recurrence: NED achieved → disease returns

Progression: No true NED, disease continues/spreads

Always ask: Was there ever NED?

Citations:

Thank You!!!

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