



# Frequency of Low Grade T1 Bladder Cancer Has Decreased but Continues to Vary by Institution

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## BACKGROUND

- Low grade but invasive papillary urothelial carcinomas are rare
- Current bladder cancer grading system aimed to reduce tumor heterogeneity and was widely adopted in 2004
- There is a paucity of data on the questionable clinical entity of low grade (LG) T1 bladder cancer

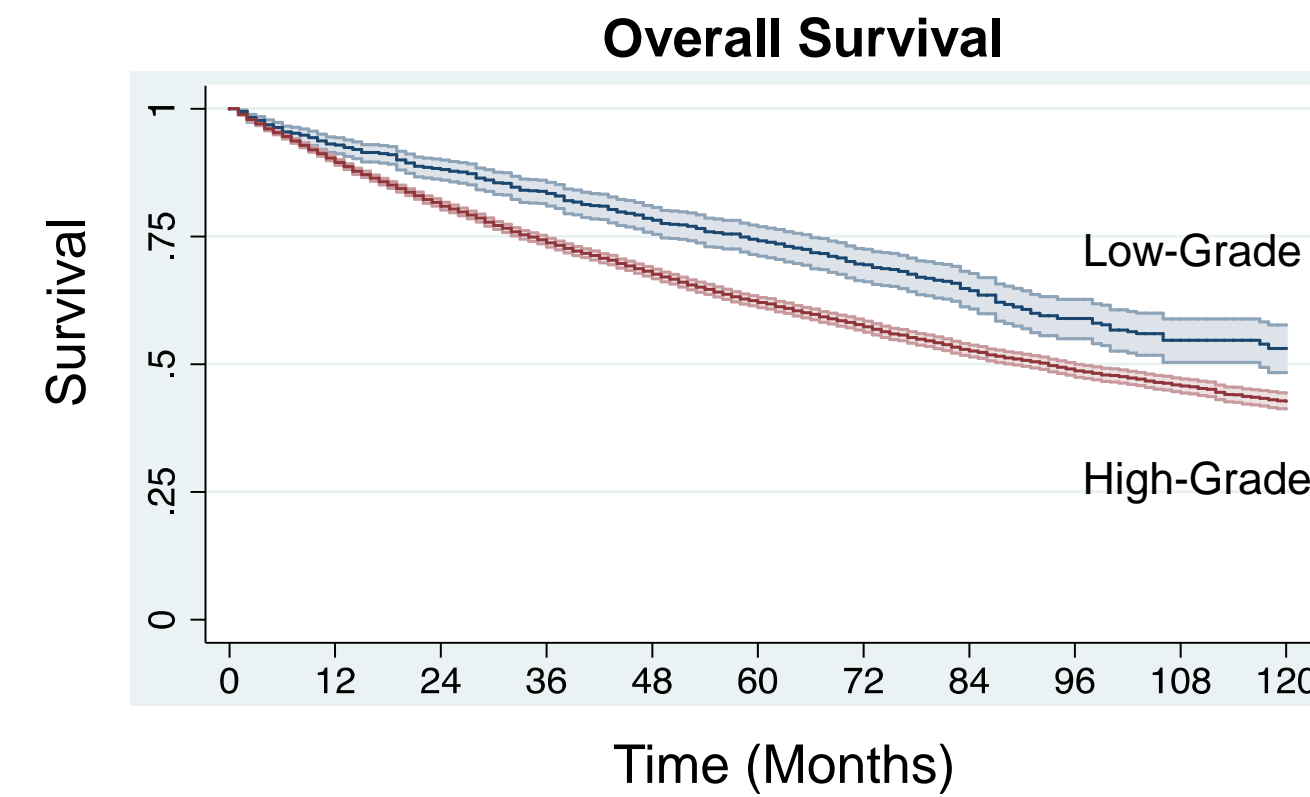
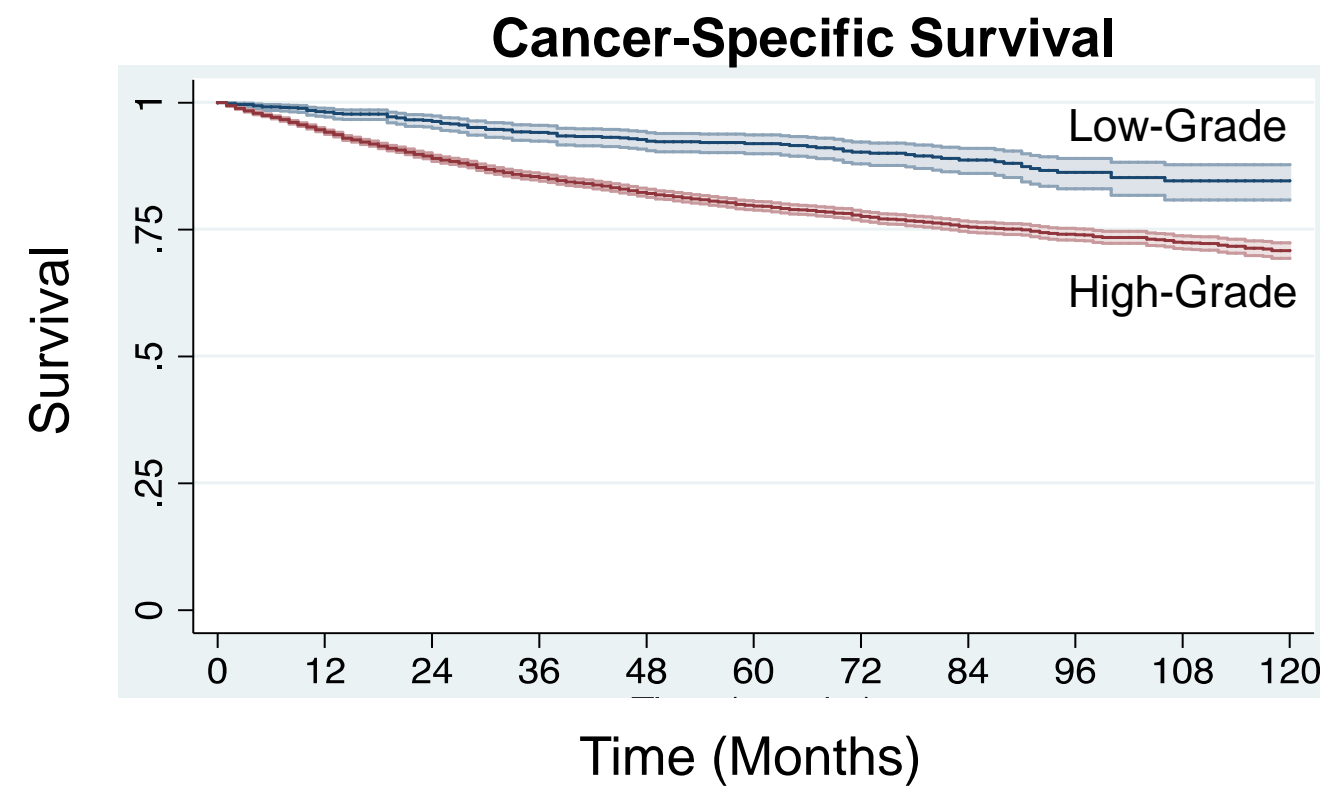
## OBJECTIVES

To evaluate the incidence and factors associated with the diagnosis of LG T1 bladder cancer since the adoption of the 2004 grading system

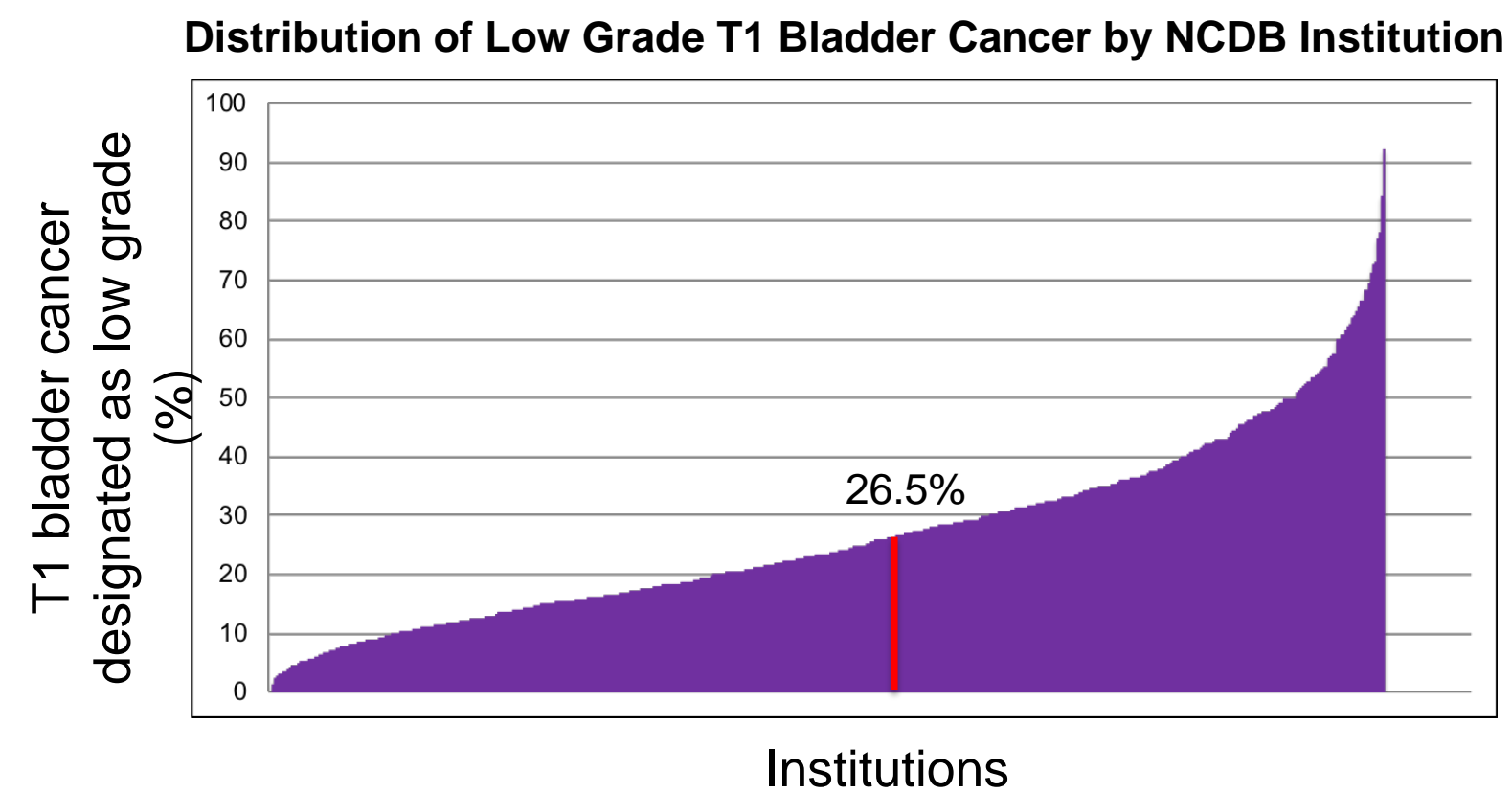
## METHODS

- SEER (2004 – 2014) and National Cancer Database (NCDB) (2004 – 2013) were queried for all T1 bladder cancer patients
- Proportion of T1 patients with LG disease was trended over time
- Overall and cancer-specific mortality was compared between LG and HG
- Factors associated with a diagnosis of LG were assessed using logistic regression
  - Year of diagnosis
  - Age
  - Race
  - Sex
  - Charlson Comorbidity Index
  - Treatment facility type
  - Income and insurance
  - Distance from treatment facility
- Institutions that did not contribute cases in each successive year were excluded

## RESULTS



	Proportion of LG T1	p
SEER		
2004	33.4%	
2014	15.6%	< 0.001
NCDB		
2004	38.9%	
2013	18.5%	<0.001



## NCDB Logistic Regression

Variable	OR (95% CI)	p
<b>Year of diagnosis</b>		
2004	Reference	
2005	0.86 (0.79-0.93)	<0.001
2006	0.76 (0.70-0.82)	<0.001
2007	0.74 (0.68-0.80)	<0.001
2008	0.63 (0.58-0.68)	<0.001
2009	0.58 (0.54-0.63)	<0.001
2010	0.49 (0.45-0.53)	<0.001
2011	0.46 (0.43-0.50)	<0.001
2012	0.42 (0.39-0.46)	<0.001
2013	0.38 (0.35-0.41)	<0.001
<b>Age</b>		
Per one year	0.99 (0.99-0.99)	<0.001
<b>Sex</b>		
Male	Reference	
Female	1.15 (1.10-1.20)	<0.001
<b>Charlson comorbidity index</b>		
0	Reference	
1	0.95 (0.91-0.99)	0.019
>1	0.98 (0.91-1.05)	0.507
<b>Race/Ethnicity</b>		
White	Reference	
Black	0.99 (0.91-1.08)	0.88
Hispanic	1.26 (1.13-1.40)	<0.001
Unknown/other	0.95 (0.90-1.02)	0.137
<b>Geographic Location</b>		
North East	Reference	
North Central	1.33 (1.26-1.40)	<0.001
South	1.21 (1.15-1.28)	<0.001
West	1.00 (0.95-1.06)	0.922
<b>Facility Type</b>		
Community	Reference	
Comprehensive	0.69 (0.66-0.73)	<0.001
Academic	0.46 (0.44-0.49)	<0.001
Other	0.58 (0.35-0.94)	0.028
<b>Insurance Type</b>		
Medicare	Reference	
Private	0.88 (0.77-1.00)	0.042
Medicaid	0.83 (0.73-0.95)	0.006
Uninsured	0.98 (0.78-1.23)	0.86
Unknown	1.24 (1.03-1.49)	0.026
<b>Income</b>		
<\$38,000	Reference	
\$38,000-47,999	1.01 (0.95-1.07)	0.797
\$48,000-\$62,999	0.97 (0.91-1.04)	0.378
\$63,000+	0.90 (0.83-0.96)	0.003
<b>Distance from treatment facility</b>		
≤60 miles	Reference	
60-120 miles	0.82 (0.74-0.91)	<0.001
>120 miles	0.71 (0.62-0.81)	<0.001

## CONCLUSIONS

- Since the adoption of the current grading system the percentage of T1 bladder cancers designated as LG has declined substantially but continues to vary widely by institution
- This variability raises concerns for grading misclassification within the current system
- Given the worse overall and cancer-specific survival for HG T1, the misclassification of T1 disease at LG could have a negative impact on survival