

Supplementary Table 1. Follow-up strategies after cystectomy and trimodality bladder preservation treatment according to guidelines issues by ESMO and EAU [3, 5]

		ESMO [3]	EAU [5]
Follow-up after cystectomy		<ul style="list-style-type: none"> Ab/UT/Ch every 3-6 mo for 2 yr and thereafter based on risk of recurrence Urethral wash every 3-6 mo if urethrectomy was not carried out or there is history of CIS 	<ul style="list-style-type: none"> CT every 6 mo until third year and annually thereafter In patients with multifocal disease, NMIBC, positive ureteral margin (risk of UTUC) monitoring the UUT is mandatory (>3 yr)
Follow-up after trimodality bladder preservation treatment	Cystoscopy	<ul style="list-style-type: none"> Every 3-6 mo for 2 yr 	NA
	Imaging	<ul style="list-style-type: none"> Same follow-up regimen as for cystectomy 	NA

Ab,

abdomen imaging; Ch, chest imaging; CIS, carcinoma in *situ*; CT, computed tomography; EAU, European Association of Urology; ESMO, European Society for Medical Oncology; MIBC, muscle-invasive bladder cancer; NA, not available; NCCN, National Comprehensive Cancer Network; NMIBC, non-muscle-invasive bladder cancer; UT, upper tract imaging; UTUC, upper urinary tract urothelial carcinomas; UUT, upper urinary tract

PATIENT SUMMARY

This report summarises findings from an international, multi-stakeholder project organised by EAU and ESMO. In this project, a steering committee identified areas of bladder cancer management where there is currently no good quality evidence to guide treatment decisions. From this, they developed a series of proposed statements, 71 of which achieved consensus by a large group of experts in the field of bladder cancer. It is anticipated that these statements will provide further guidance to healthcare professionals and could help to improve patient outcomes until a time when good quality evidence is available.

TAKE HOME MESSAGE

This international, multi-stakeholder project, organised by EAU and ESMO, brought together a multidisciplinary group of professional societies and world-leading experts in advanced and variant bladder cancer management to develop consensus statements on controversial issues using a Delphi survey and consensus conference approach.

TWEET

EAU-ESMO manuscript provides guidance from world-leading experts on managing advanced and variant bladder cancer