



II JORNADA DE ACTUALIZACIÓN EN  
**URO-ONCOLOGÍA:**  
UPDATE 2025

Madrid, 25 de febrero de 2025

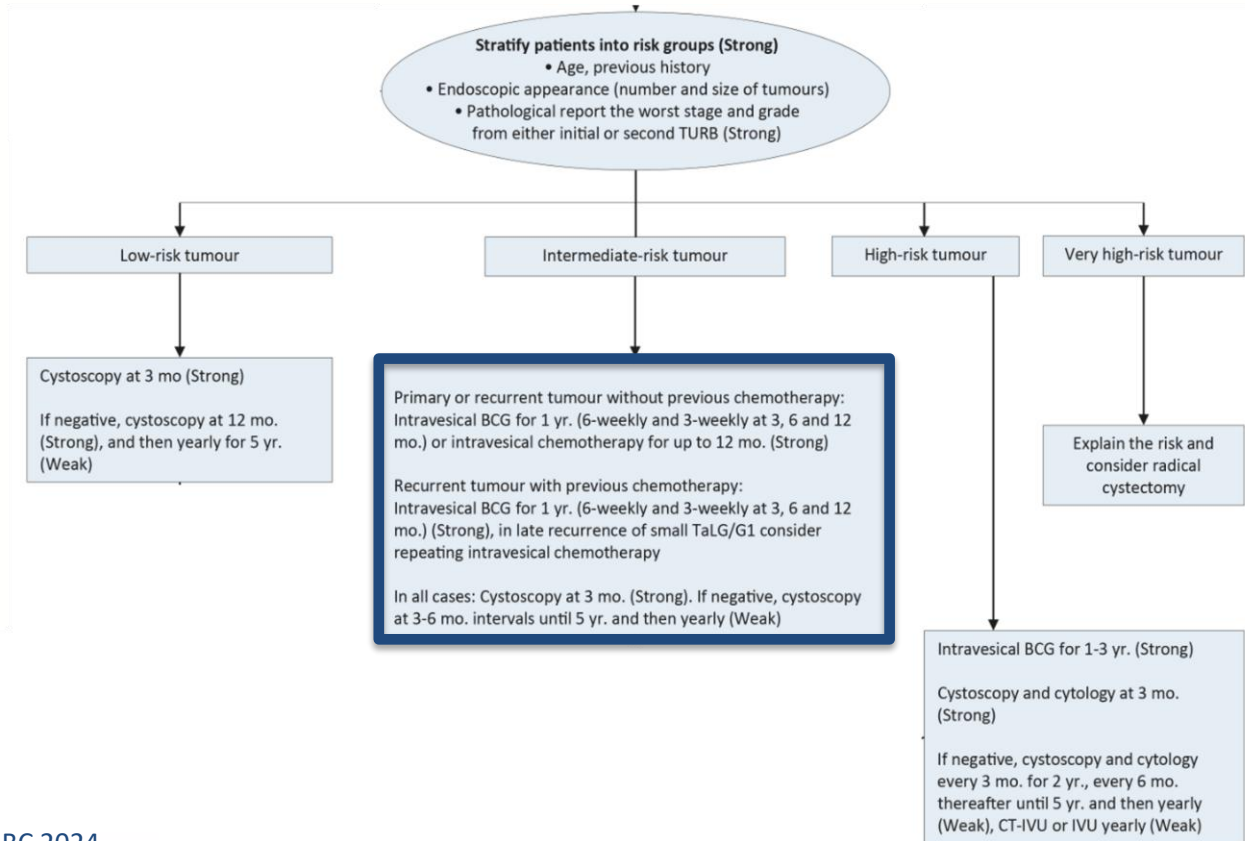
# Presente y futuro del tratamiento intravesical en el cáncer de vejiga no músculo-invasivo

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Hospital Universitario 12 de Octubre

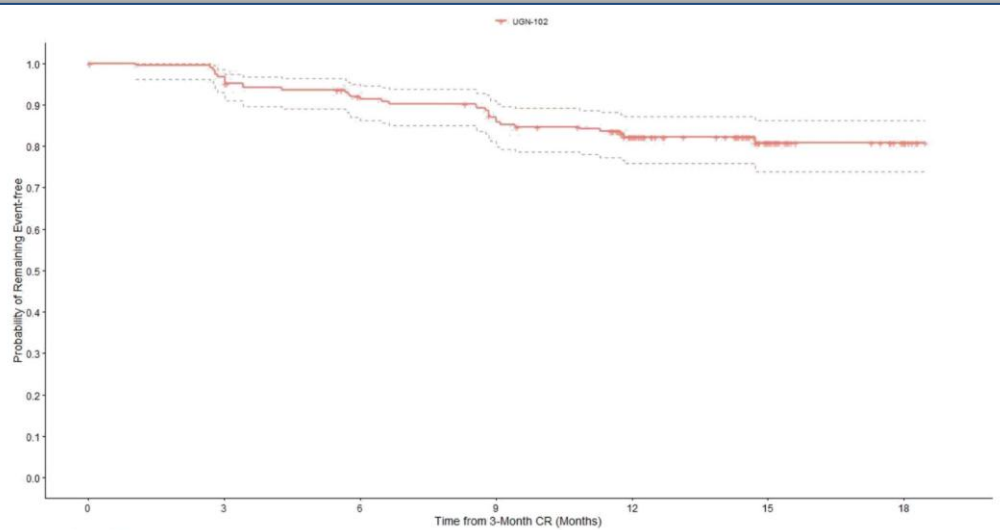
## CONFLICTOS DE INTERÉS

<b>Research support/PI</b>	Johnson and Johnson, Pfizer, Taxis, BMS, Roche, Seagen, AstraZeneca, Combat Medical, Cepheid, Fidia, Astellas, UroGen, MSD
<b>Employee</b>	SERMAS (Servicio Madrileño de Salud)
<b>Consultant</b>	Johnson & Johnson, Pfizer, Merck, Roche, Taxis, Combat Medical, AstraZeneca, MSD, BMS
<b>Stockholder</b>	CG Oncology, Johnson & Johnson, Pfizer
<b>Speaker bureau</b>	Janssen, Nucleix, MSD, Pfizer, Merck, BMS, AstraZeneca, Palex, Combat Medical, Johnson and Johnson, Recordati
<b>Travel</b>	Pfizer, Recordati, Ipsen, Combat Medical, Alter, Salvat, Nucleix, AstraZeneca, Fidia, Johnson and Johnson
<b>Scientific advisory board</b>	AstraZeneca, BMS, Combat Medical, Johnson and Johnson, Nucleix, Pfizer, Taxis, Roche, MSD
<b>Manuscript support</b>	Pfizer, Janssen, Combat Medical, AstraZeneca, Johnson & Johnson, BMS

# Riesgo intermedio: presente

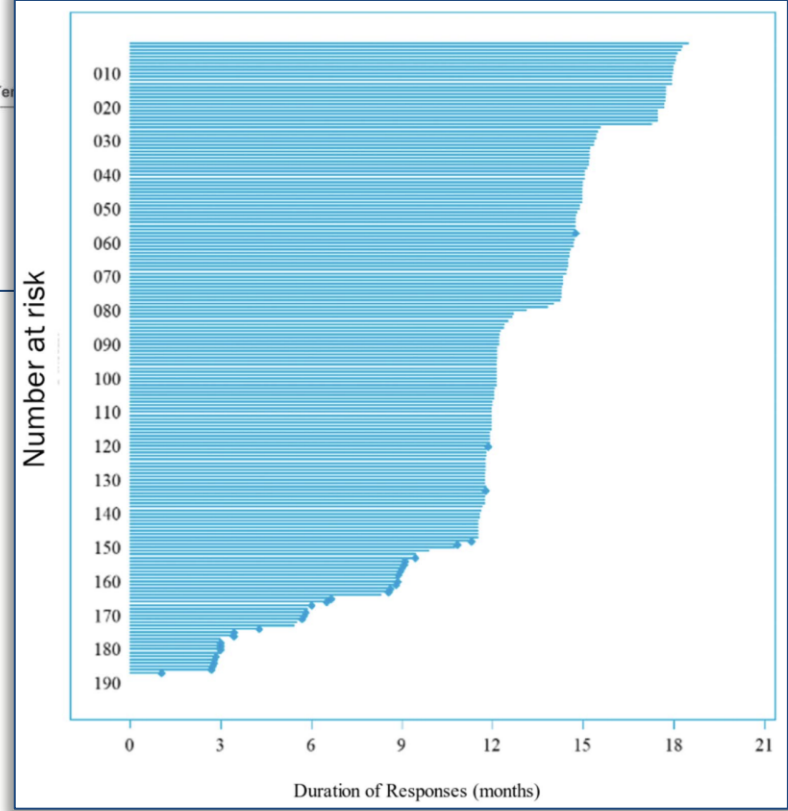


Surgical Chemoablation for LG IR-NMIBC using UGN-102: reverse thermo-  
 on hydrogel containing mitomycin



**Figure 2.** Kaplan-Meier plot of duration of response in patients with a complete response (CR) at 3 months. Events include recurrence, progression, or death.

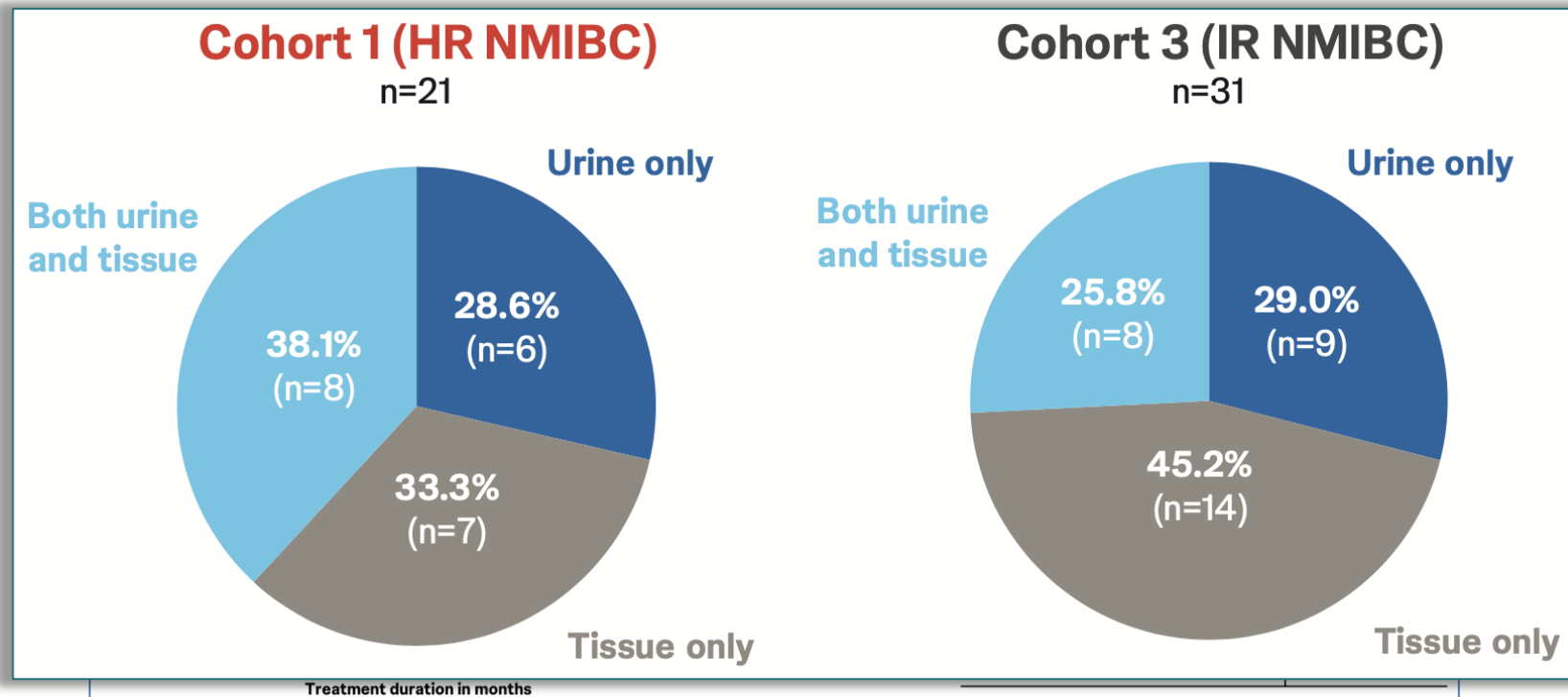
UGN-102 +/- TURBT	191	181	167	156	108	43	9
TURBT alone	140	119	76	60	54	42	
<b>Number Censored</b>							
UGN-102 +/- TURBT	0	11	19	23	26	35	
TURBT alone	0	20	32	35	36	43	



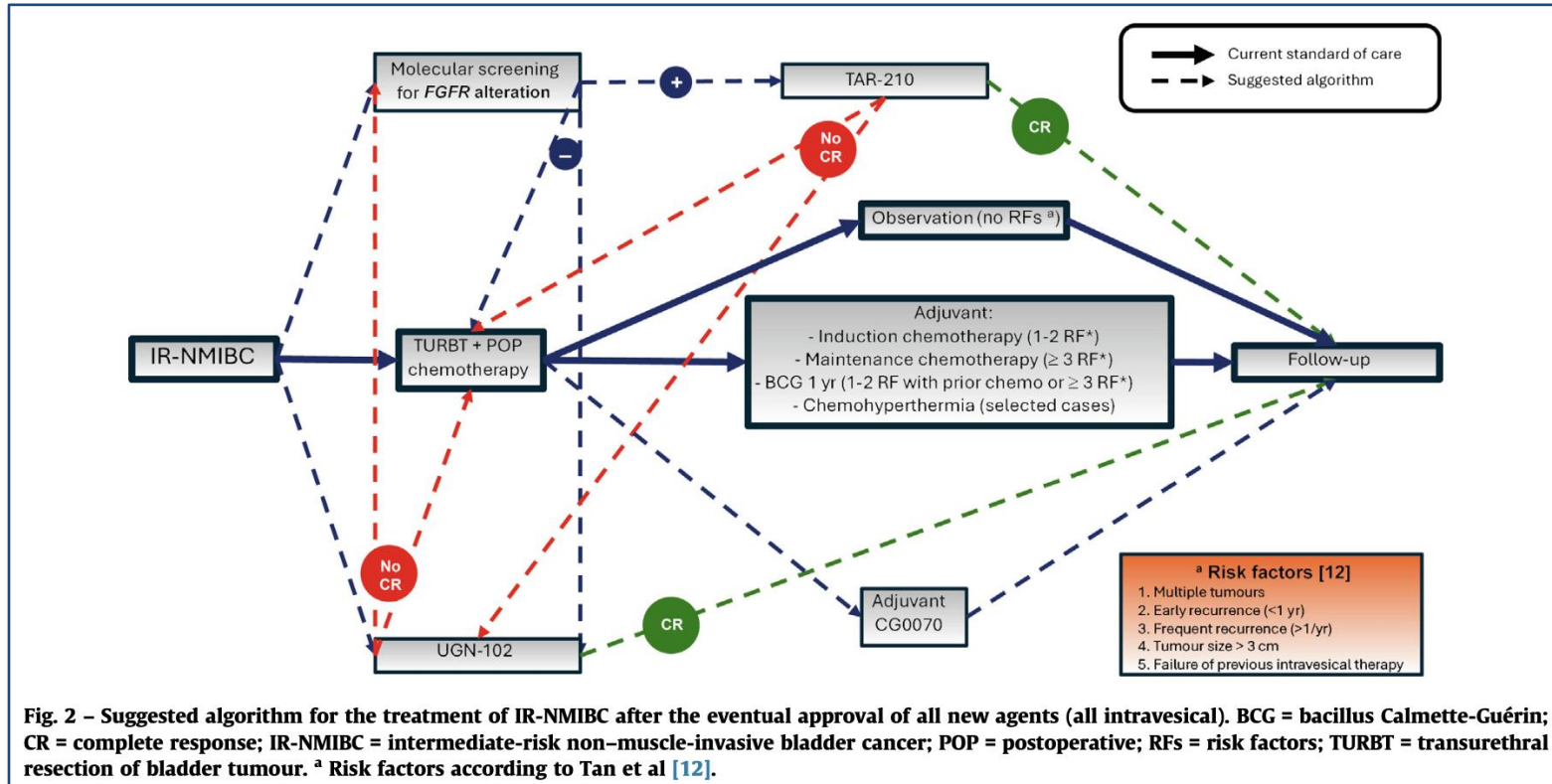
# Riesgo intermedio: futuro

## TAR-210 Erdafitinib Intravesical Delivery System in Non-Muscle-Invasive Bladder Cancer With Select *FGFR* Alterations: Updated First-in-Human Results

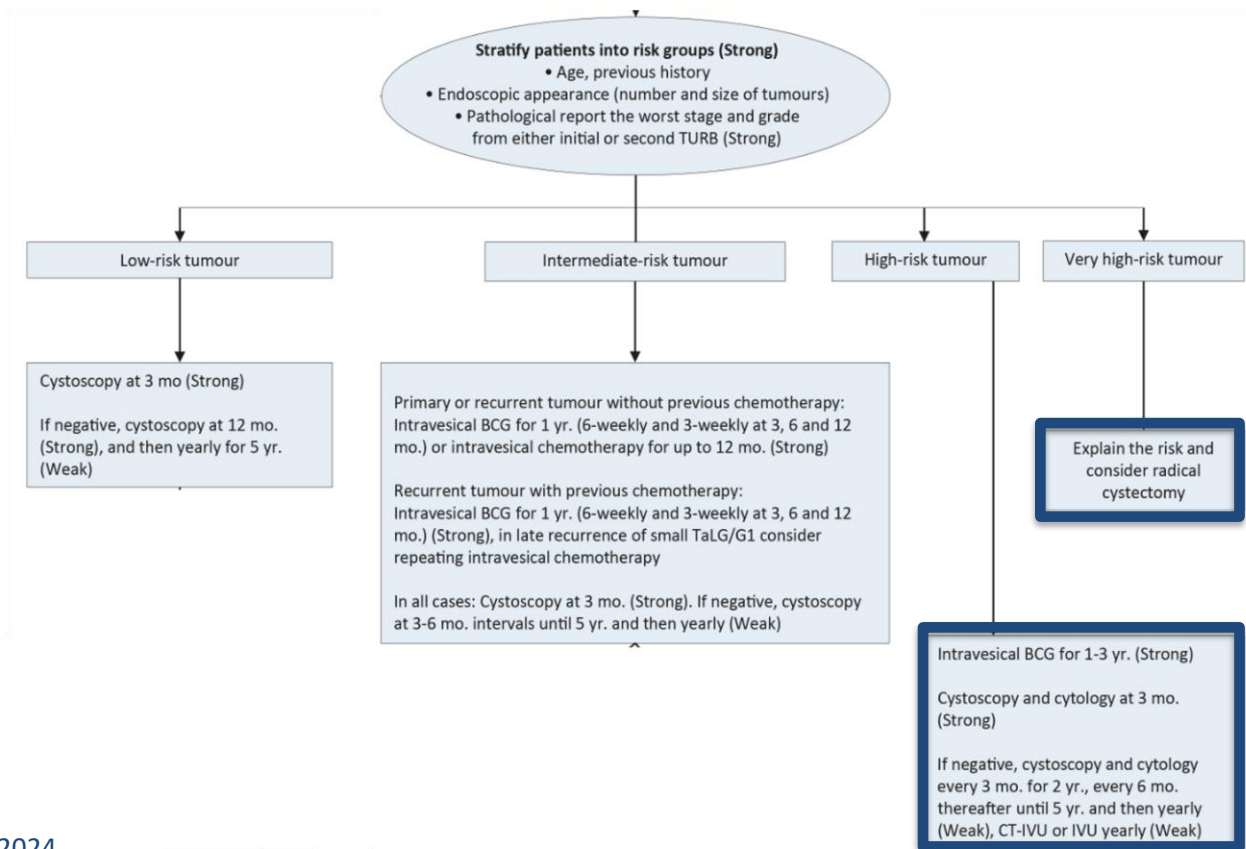
Antoni Vilaseca<sup>1</sup>, Gautam Jayram<sup>2</sup>, Carles Raventos<sup>3</sup>, Neal D Shore<sup>4</sup>, Daniel Zainfeld<sup>5</sup>, Taek Won Kang<sup>6</sup>, Ja Hyeon Ku<sup>7</sup>, Joshua J Meeks<sup>8</sup>, Oscar Rodriguez Faba<sup>9</sup>, Florian Roghmann<sup>10</sup>, Siamak Daneshmand<sup>11</sup>, Neil Beeharry<sup>12</sup>, Carrye R Cost<sup>13</sup>, Anna Kalota<sup>14</sup>, Josh Lauring<sup>15</sup>, Michelle R Peterson<sup>16</sup>, Michelle Quiroz<sup>17</sup>, Nicole L Stone<sup>18</sup>, Wei Zhu<sup>19</sup>, Felix Guerrero-Ramos<sup>14</sup>



# Riesgo intermedio: futuro

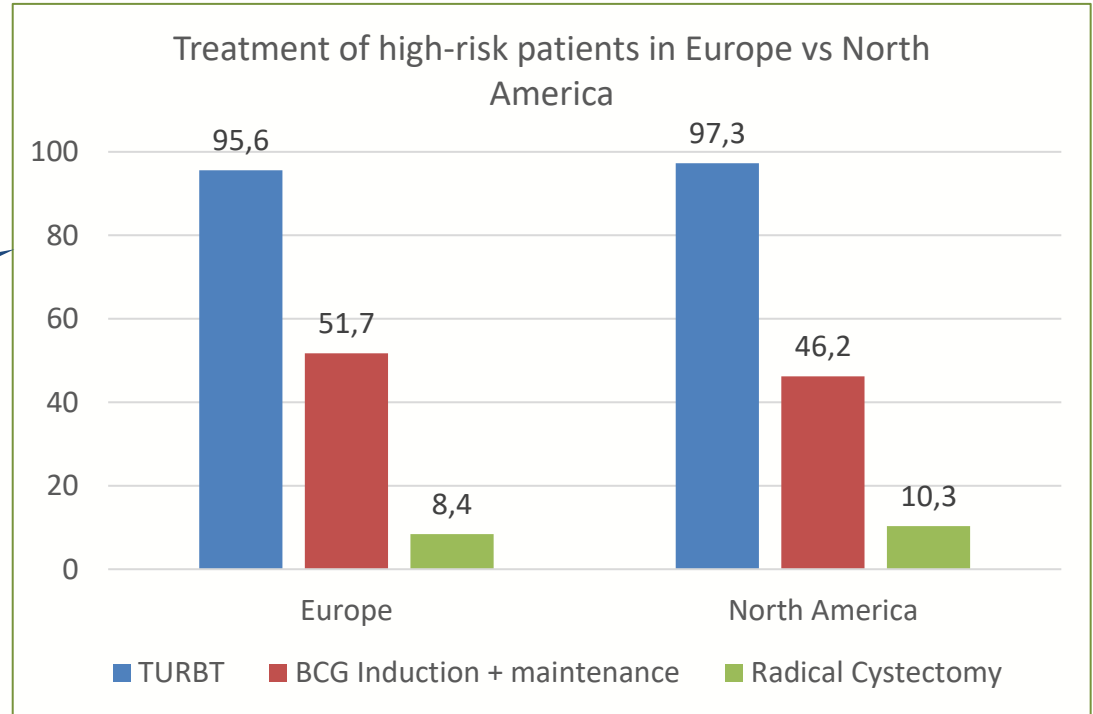


# Riesgo alto y muy alto BCG naïve: presente

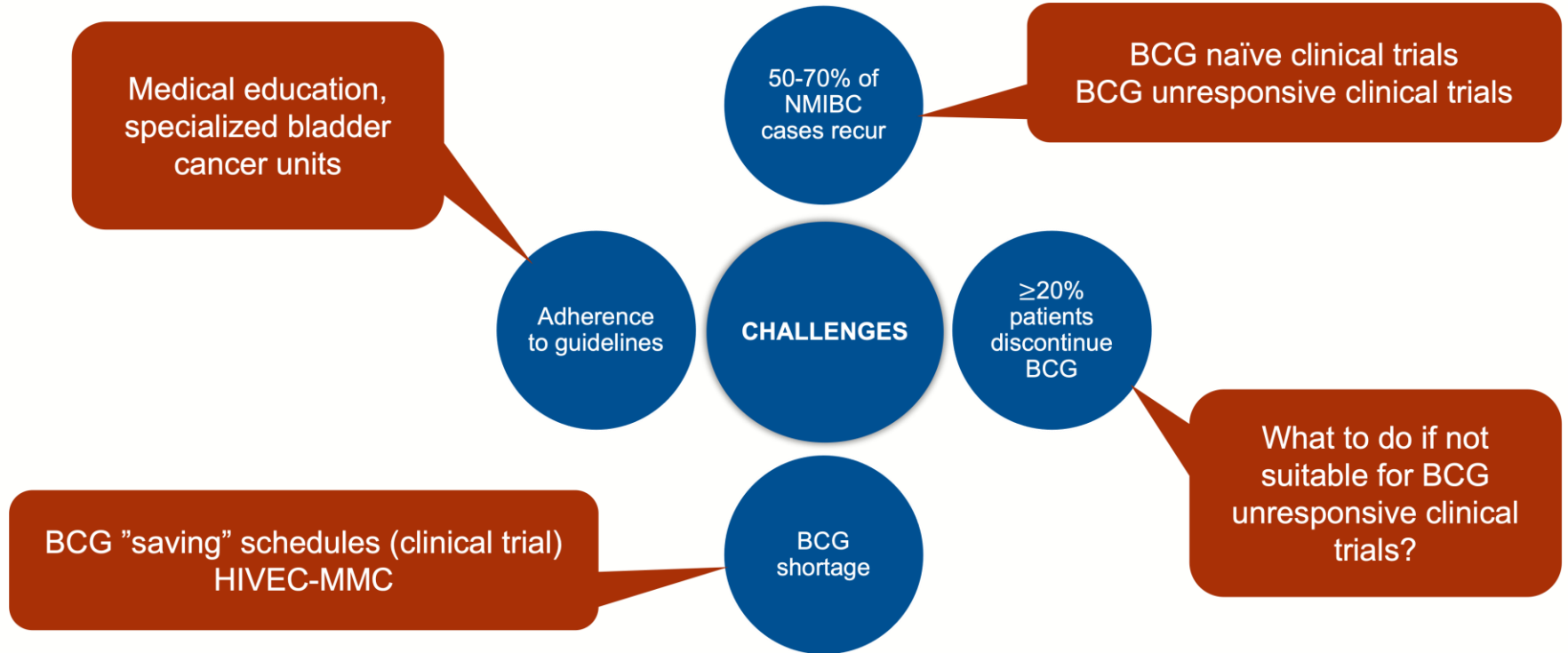


## Riesgo alto y muy alto BCG naïve: presente

Only 57–60% of high-risk patients receive the recommended treatment



# Riesgo alto y muy alto BCG naïve: retos



## Riesgo alto y muy alto BCG naïve: futuro

### Pfizer's Sasanlimab in Combination with BCG Improves Event-Free Survival in Patients with BCG-Naïve, High-Risk Non-Muscle Invasive Bladder Cancer

Friday, January 10, 2025 - 06:45am



- *Clinically meaningful and statistically significant results are the first pivotal Phase 3 data for sasanlimab, a subcutaneously administered PD-1 inhibitor*
- *If approved, sasanlimab would be the first PD-1 inhibitor, in combination with BCG, to significantly prolong event-free survival in this patient population*
- *Treatment naïve high-risk NMIBC is an area of significant unmet need, where therapeutic options have largely remained unchanged for over three decades*

# BCG unresponsive: presente

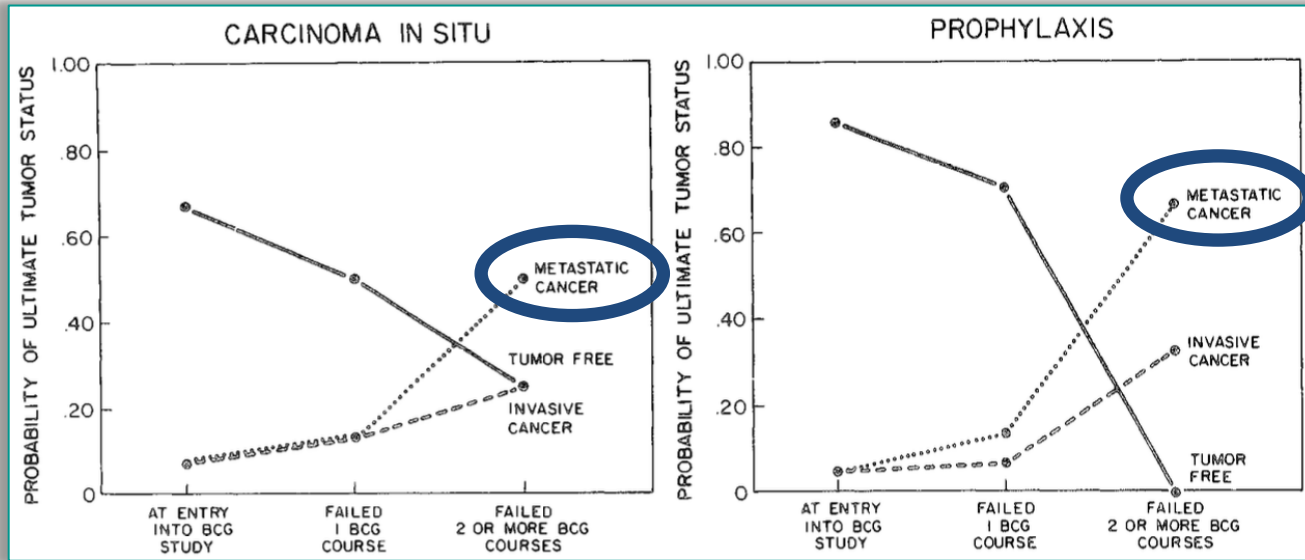
**PERO...**

Category	Treatment options
BCG-unresponsive	<ol style="list-style-type: none"><li>1. Radical cystectomy (RC).</li><li>2. Enrolment in clinical trials assessing new treatment strategies.</li><li>3. Bladder-preserving strategies in patients unsuitable or refusing RC.</li></ol>

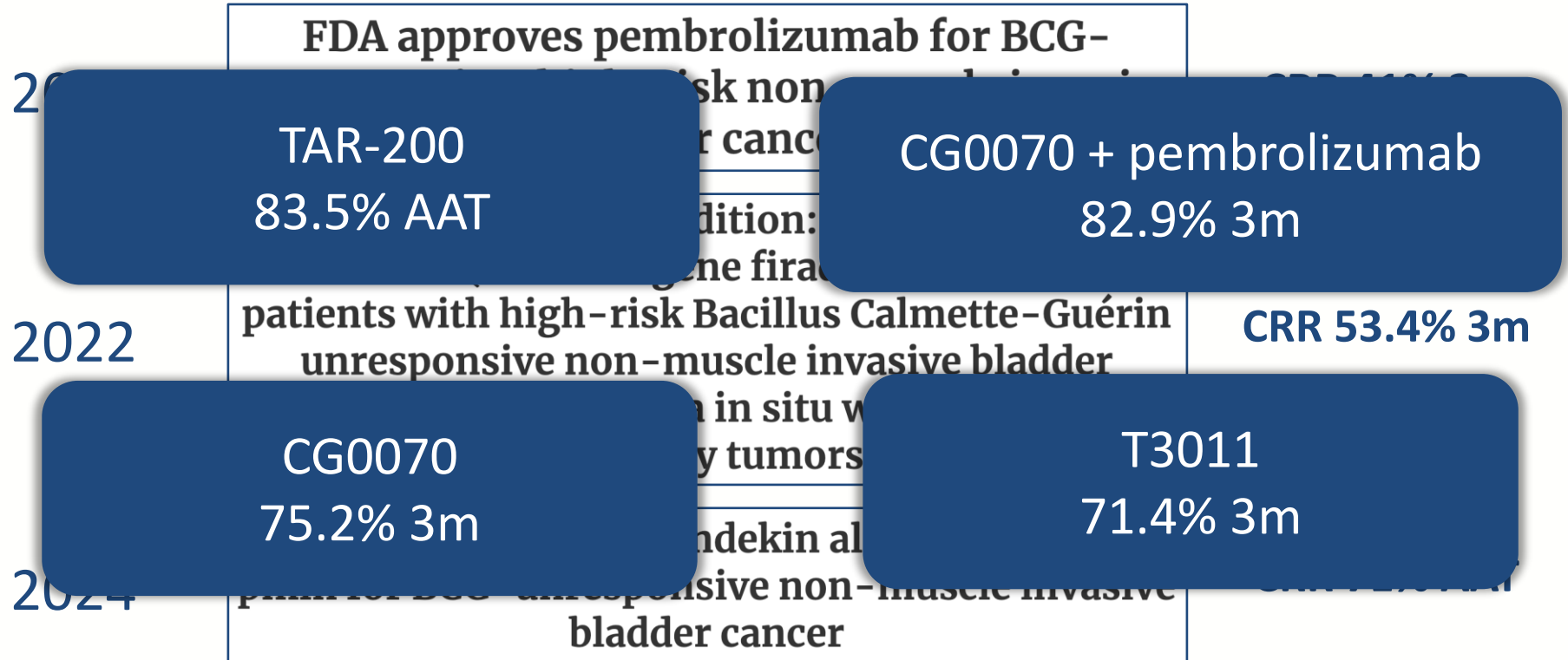
Summary of evidence	LE
Prior intravesical chemotherapy has no impact on the effect of BCG instillation.	1a
Treatments other than RC must be considered oncologically inferior in patients with BCG-unresponsive tumours.	3

# BCG unresponsive: presente

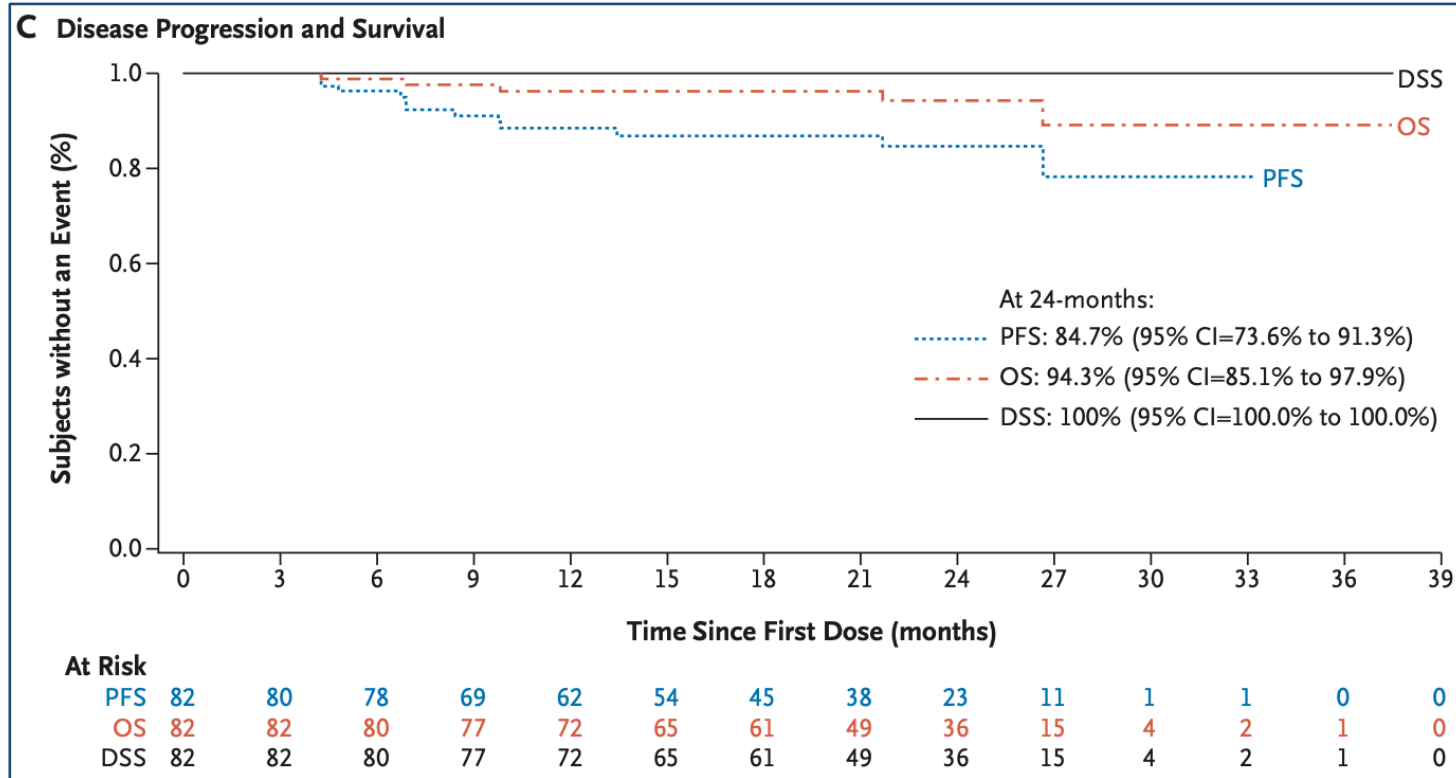
Based on what...?



## BCG unresponsive: futuro



# BCG unresponsive: retos (supervivencia)



# BCG unresponsive: retos (supervivencia)

**Challenge: ACCOMPLISHED?**



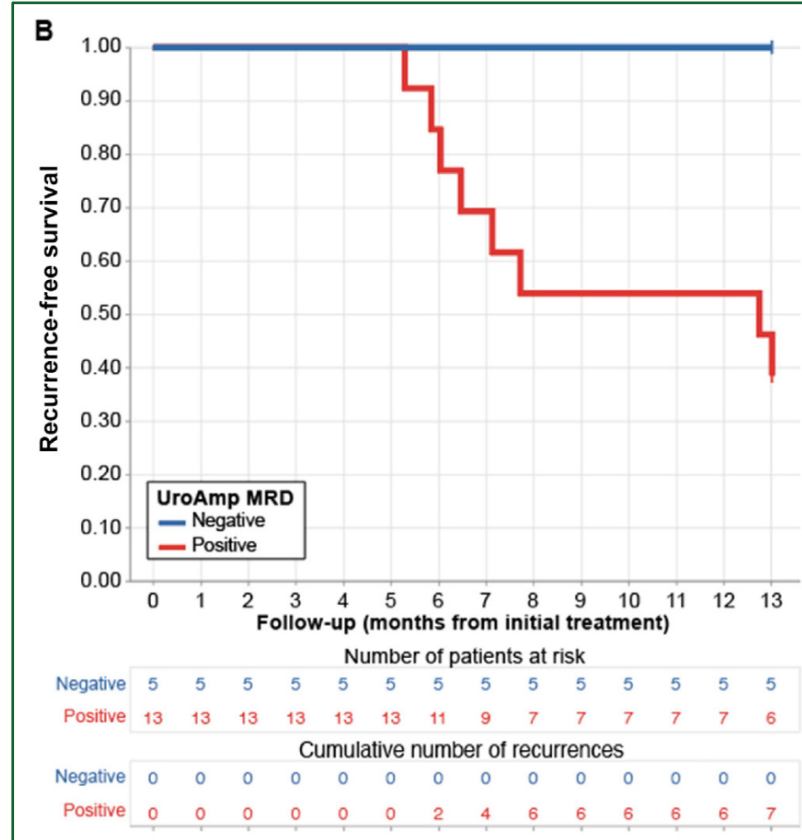
	<b>Pembrolizumab</b>	<b>Nadofaragene fir</b>	
Price per dose	\$11,957 (200 mg)	\$60,000 (75 mg)	
Dosage	Every 3 weeks	Every 3 months	
Duration	24 months	12 months	
Total doses	34	4	21
<b>Overall cost*</b>	<b>\$406,538</b>	<b>\$240,000</b>	<b>\$751,800</b>



Estimated cost of a radical cystectomy:  
\$70,000 (90 days), \$150,000 (1 year)

\*All these are estimations; Williams SB, et al. JAMA Surgery 2019. Image created with ChatGPT 4o.

# BCG unresponsive: retos (biomarcadores)



## Conclusiones

IR: adjuvant vs ablative approaches

HR: pivotal trials & multidisciplinary approach



BCGu (and soon all of the above):

Approvals

Survival

Cost

Biomarkers

# ¡MUCHAS GRACIAS!



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