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Letter to the Editor

Reply to Jon Mikel Inarritu, Daniele Castellani, and Jeremy Y.C. Teoh's Letter to the Editor re: Agustina Bessa, Steven MacLennan, Deborah Enting, et al. Consensus in Bladder Cancer Research Priorities Between Patients and Healthcare Professionals Using a Four-stage Modified Delphi Method. *Eur Urol* 2019;76:260–1

In their research letter, Inarritu et al. referred to our recently identified top 10 unanswered bladder cancer research questions, and highlighted the strong concordance between patients' and health care professionals' priorities [1]. The authors stressed that bladder cancer still receives less attention than other urological cancers in terms of both research and awareness, which was reinforced by their review of the activity and content of urological oncology on Twitter; #bladdercancer had the lowest-volume activity among all urological cancers [2]. However, and as confirmed by Borgmann et al. [3], Twitter discussion is global, social, and mobile, and merits attention of stakeholders in health care as a promising communication tool. Our research prioritisation work was the topic of the inaugural #LiveJournalClub of #UroSoMe on Twitter. This reflects a recent increase in awareness, and our hope is that this will translate to an increase in research activities for bladder cancer. The aftermath of the social media discussion also highlighted the top five topics for bladder cancer research as recorded by the authors.

Even though Inarritu et al. highlighted our top 10 research priorities, it is worth noting that we identified a list of 41 unanswered research questions for bladder cancer through a review of the literature and focus groups [1]. The diversity of the unanswered research questions and the top five research topics from the global social media discussion highlight the difficulties of prioritising all research needed for bladder cancer. This list of questions is available in the Appendix of our publication [1], and we would like to encourage researchers and clinicians to focus on the entirety of unmet clinical and scientific needs.

We already undertook a first attempt in addressing these needs by organising the inaugural Bladder Cancer Translational Research Meeting in London in March 2019. A multidisciplinary team of international researchers came together and presented several studies focused on the three research themes identified in our research prioritisation work: (1) development of personalised treatment through better prognostic and predictive biomarkers, (2) optimisation of diagnostic pathways, and (3) surveillance following radical therapy [4].

Following this research meeting and the complete list of 41 questions, it is also important to be aware that the impact of bladder cancer is diverse and prolonged, and there is an unmet need for long-term support and survivorship resources to address this [5]. Hence, researchers are encouraged to also consider quality-of-life outcomes when developing studies aiming to answer the research priorities that we identified.

Conflicts of interest: The authors have nothing to disclose.

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References

- [1] Bessa A, MacLennan S, Enting D, et al. Consensus in bladder cancer research priorities between patients and healthcare professionals using a four-stage modified Delphi method. *Eur Urol* 2019;76:260–1.
- [2] Leveridge MJ. The state and potential of social media in bladder cancer. *World J Urol* 2016;34:57–62.
- [3] Borgmann H, Loeb S, Salem J, et al. Activity, content, contributors, and influencers of the twitter discussion on urologic oncology. *Urol Oncol Semin Orig Investig* 2016;34:377–83.
- [4] Frontiers. Bladder cancer translational research meeting. 1889 https://www.frontiersin.org/books/Bladder_Cancer_Translational_Research_Meeting/
- [5] Bhanvadia SK. Bladder cancer survivorship. *Curr Urol Rep* 2018;19:111.

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