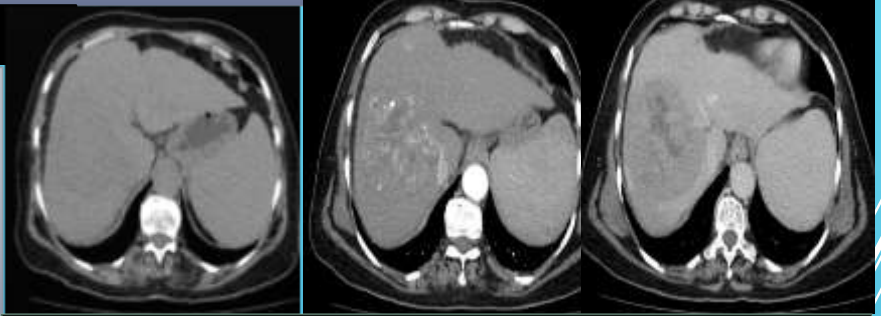


Outcomes of Transarterial embolization (TAE) in Hepatocellular carcinoma patients at Rehman Medical Institute.

BACKGROUND

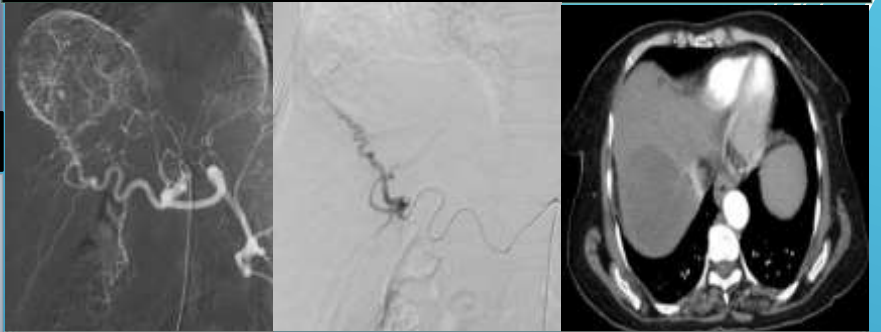
Hepatocellular carcinoma (HCC) is the sixth most common cancer worldwide and the second leading cause of cancer-related death. Its prevalence is increasing in Pakistan due to high prevalence of HBS and HCV, etiology of 90% cases in Pakistan. Locoregional treatment as trans arterial embolization (TAE) as been used as the first-line treatment for intermediate stage HCC patients with proven survival benefits.



Figures: Multiphase dynamic CT shows arterialized lesion in segment VII showing washout on portovenous phase consistent with HCC.

PATIENTS AND METHODS

A retrospective analysis of 153 diagnosed HCC patients undergoing TAE in Rehman Medical Institute from April, 2016 till October 2021. Through a common femoral artery, selective catheterization of the celiac trunk, followed by a super selective feeding branch catheterization. Embolizing agent was injected at the most distal site. The data was retrieved from electronic database system and then analyzed.



Figures During TAE procedure, initially contrast blush, followed by embolization. PostTAE CT dynamic doesn't show any residual lesion on arterial phase.

RESULTS

The data collected showed that out of 153 patients who had undergone TAE, 66.7 % were male and 33.3% were females. 42 patients (28 %) showed complete radiological response, 46 patients (30%) showed partial radiological response, 40 patients (26%) showed disease progression and 25 patients (16%) did not have follow up.



		Gender			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	MALE	102	66.7	66.7	66.7
	FEMALE	51	33.3	33.3	100.0
Total		153	100.0	100.0	

Graphical representation of outcome of Transarterial embolization in HCC at RMI

CONCLUSION

Our result showed that by proper selection of patients and proper follow up, TAE has proved to be promising palliative and bridging technique to liver transplant and is better treatment option in patient with HCC.

REFERENCES

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