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Changku Jia

Affiliated Hangzhou First People's Hospital, Zhejiang University School of Medicine, China

Selective occlusion of hepatic artery and portal vein improves liver hypertrophy for staged hepatectomy of hepatocellular carcinoma

Statement of the Problem: Due to insufficient future liver remnant (FLR), many patients with huge (hepatocellular carcinoma) HCC lost the opportunity of surgery.

Methodology & Theoretical Orientation: We designed selective occlusion of hepatic artery and portal vein (SOAP) for staged hepatectomy (SOAPS) for HCC. Seven patients with unresectable HCC due to insufficient volume of FLR were chosen to follow this study. SOAP without liver partition was applied for patients in the first stage. The growth rate of FLR after SOAP was observed for effectiveness assessment. Second stage of hepatectomy was performed if FLR increased sufficiently.

Findings: No hepatic failure and no death occurred post SOAP. FLR of all patients increased post SOAP. After SOAP, FLR increased 147.9ml by the average. The average growth rate was 15.9ml/day. The average ratio of FLR to standard liver volume increased from 32.1% to 40.5%. The average time interval between two stages was 14 days. Second stage of hepatectomy was performed 8 to 18 days after SOAP. No in-hospital death occurred post SOAPS. One patient suffered hepatic failure after SOAPS. Artificial liver support was adopted for this patient and his TBIl became normal 35 days after SOAPS. AFP level of all patients reduced to the normal range within two months post SOAPS. Out of 7 patients, 4 survived till now, with the longest surviving time of 32.9 months. Of the 4 living cases, bone metastasis and intrahepatic recurrence was found in patient no-5 six months post SOAPS. Other 3 patients survived without disease.

Conclusion & Significance: SOAP could facilitate a rapid and sustained FLR hypertrophy. Apart from portal vein blood redistribution as reported, hepatic artery blood redistribution is one of the mechanisms of liver hypertrophy in SOAP. SOAPS is safe and effective for patients with unresectable HCC.

Biography

Changku Jia has Majored in Hepatobiliary Pancreatic Surgery & Liver Transplantation and obtained his Graduation at Zhejiang University, with a doctor's degree. After graduation, he entered academic practice including basic science and clinical training within liver transplantation center of Zhejiang University and Queen Mary Hospital of Hong Kong University. From August 2010, he was appointed the Director of Department of Hepatobiliary Pancreatic Surgery, First Affiliated Hospital of Hainan Medical University. Currently, he is the Director of Department of Hepatobiliary Pancreatic Surgery, Affiliated Hangzhou Hospital of Nanjing Medical University. He strongly experienced in clinical and fundamental work of hepatobiliary surgery and liver transplantation. He is an Expert of Hepatobiliary Surgery and Liver Transplantation in humans and heart & liver transplantation in rats. He has published more than 20 papers in reputed journals including *Digestive and Liver Disease*, *Cancer Investigation*, *Journal of Thromb Thrombolysis*, etc.

jiachk@126.com