Surgical managements and outcomes

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Lecture : Background: Spontaneous rupture of HCC (srHCC) is an infrequent but life-threatening complication of HCC and occurs in 2.3 to 26% patients with HCC in Asia and less than 3% in the West. This complication accounts for 6-10% mortality in patients with HCC. For treating the patients with srHCC, several methods, including emergent or staged hepatic resection, perihepatic packing, TAE, and radio-frequency ablation, were employed. According to liver function and tumor characteristics, the treatment is selected. It has been reported that tumor rupture is associated with a poor liver functional reserve and an advanced tumor status. However, its mechanism has not been fully elucidated. In this presentation, personal cases with srHCC were reviewed and adequate treatment was groped.
Patients: There were 17 patients with srHCC (Male : Female = 14 : 3, mean age: 62.6±11.9 years). Viral infectious condition included HBV in 1, HCV in 9 and nonBnonC in 7.
Results: Preoperatively, srHCC was diagnosed in 13 patients: 12 received TAE followed by hepatic resection and one underwent emergent hepatic resection. Whereas srHCC was not diagnosed in 4 patients and was diagnosed at the time of hepatic resection by the presence of bloody ascites. Hemi-hepatectomy or more extended resection was performed in 5 patients, segmentectomy in 1, subsegmentectomy in 3 and limited resection in 8. Curative resection and reduction surgery were performed in 12 and 5 patients, respectively. There was one in-hospital death. After resection, 11 patients received TACE (n=9), sorafenib (n=3), chemotherapy (n=1), radiation (n=1) and skin meta resection (n=1), but 6 patients did not receive postoperative treatment. 5-year overall survival and 5-year recurrence free survival rates were 19.4% and 16.7%, respectively.
Conclusion: Although our results guaranteed the safety of combination therapy of TAE and hepatic resection, the outcomes were not sufficient. Further adjuvant treatment should be added to improve the overall survival and recurrence free survival rates.

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