

MUSCLE DENSITY ADJUSTED SARCOPENIA IS A PREDICTOR OF 6-MONTH MORTALITY IN PATIENTS WITH HEPATOCELLULAR CARCINOMA

Cesar Yaghi

UEG Week Berlin 2025

Poster

Hepatobiliary

October 4, 2025

A retrospective study of 86 HCC patients demonstrates that sarcopenia and myosteatosi measured by L3-SMHDR, combined with MELD-Na score, independently predict 6-month mortality better than tumor stage.

KEY POINTS

- In 86 HCC patients treated between 2016 and 2024, decreased survival was significantly associated with increasing L3-SMHDR, with populations above threshold showing 11.09 months survival versus 31.2 months for those below threshold ($P=0.035$).
- Multivariate analysis identified two independent prognostic factors for 6-month mortality: MELD-Na score and L3-SMHDR, with combined risk estimation showing $OR=10$ at 6 months and $OR=11.4$ at 12 months.
- L3-SMHDR above threshold (5.4 in men, 4.7 in women) conferred mortality risk of $OR=7.8$ at 6 months and $OR=5.64$ at 12 months.
- The authors conclude that 6-month prognosis depends primarily on liver function and severity of sarcopenia/myosteatosi rather than tumor stage, suggesting this may inform transplant prioritization, though they recommend confirmation in larger studies.
- This material is relevant for hepatologists and transplant teams managing HCC patients, particularly those making prioritization decisions.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflif.eu/search/d/fd134096-a814-11f0-bda9-0242ac140006>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.