

PREDICTORS OF EXTRAHEPATIC RECURRENCE AFTER TRANSARTERIAL CHEMOEMBOLIZATION AS FIRST-LINE THERAPY FOR HEPATOCELLULAR CARCINOMA

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UEG Week Copenhagen 2023

Poster

Hepatobiliary

October 15, 2023

In 981 HCC patients treated with first-line TACE, only 8.0% developed extrahepatic metastases at first recurrence, with tumor size ≥ 3 cm, multifocality, and AFP levels identified as independent predictors of extrahepatic spread.

KEY POINTS

- Among patients receiving TACE as first-line treatment, 8.0% had extrahepatic tumor at first recurrence (5.4% in tumors ≤ 3 cm vs. 10.7% in tumors > 3 cm, $p=0.002$), while overall extrahepatic recurrence rate was 26.0%
- Patients with HCC ≤ 3 cm had significantly longer recurrence-free survival (12.0 vs. 9.7 months, $p=0.02$) and overall survival (52.5 vs. 34.7 months, $p<0.0001$) compared to those with larger tumors
- Multivariate analysis identified three independent predictors of extrahepatic recurrence: HCC size ≥ 3 cm, multifocality, and AFP levels
- The authors suggest these risk factors may help identify patients who would benefit from closer follow-up to enable earlier initiation of systemic therapy

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