gutflix
GI learning, personalised

Summary

HCC: How far can we go?

Helen Reeves

UEG Week Barcelona 2026 | Presentation

Surgery | Hepatobiliary | Digestive Oncology | Colorectal

October 19, 2026

The speaker reviewed advances in patient selection for liver transplantation in hepatocellular carcinoma, emphasising the evolution beyond Milan criteria through biological markers, downstaging strategies, and expanding donor pools, while cautioning about the investigational role of post-transplant immunotherapy.

KEY POINTS

- Milan criteria (single tumour ≤5 cm or up to three tumours ≤3 cm each, no macrovascular invasion or extrahepatic spread) remain the foundation but have been extended in some centres to include up to five nodules if less than 3 cm.
- Serum alpha fetoprotein is the biological marker currently incorporated into selection criteria in multiple countries, with a threshold of 1000 stated for the speaker's UK centre.
- Downstaging using transarterial chemoembolization, selective internal radiotherapy, microwave ablation, or systemic therapies allows reassessment of tumour biology over time; the speaker considers six months a reasonable reassessment period, though standard treatment timelines often exceed this.
- The speaker reported that in their Newcastle centre, no patient who successfully completed downstaging with an acceptable score has experienced post-transplant recurrence.
- Machine perfusion techniques have expanded the donor pool by enabling use of donation after cardiac death donors, steatotic livers, and older donors.
- The speaker stated that immunotherapy (checkpoint inhibitors plus bevacizumab) is first-line for advanced HCC but is not endorsed in national or international guidelines for post-transplant recurrence; the speaker's team considers it case-by-case only in young, fit patients with rapidly progressive disease and no other options, acknowledging high risks of graft rejection.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/0c349830-d150-11f1-a607-daaa6dbee0a2

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.