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Summary

Predicting therapy response in HCC and CCC

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Digestive Oncology | Hepatobiliary | Mechanisms & Personalised Medicine

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The speaker reviewed imaging-based approaches to predict therapy response in hepatocellular carcinoma, highlighting radiomics and multiparametric MRI techniques alongside challenges in model generalizability and lack of industry support for biomarker validation.

KEY POINTS

- The speaker stated that radiomics models show promising performance in training cohorts but typically experience performance drops in external validation, with one recent study showing area-under-curve decline from 0.9 to 0.7.
- Overall survival prediction with radiomics performed better than progression-free survival prediction in external validation, and image information was reported as a stronger predictor than BCLC stage or ALBI grade.
- The speaker described that multiparametric MRI with hepatobiliary contrast media can identify microvascular invasion, early HCC forms, and tumors with beta-catenin mutations, which show poor immunotherapy response.
- In a Korean study the speaker cited, only 8 percent of nodules lacking arterial hypervascularity but showing absent hepatobiliary uptake were benign, and these dark nodules predicted early recurrence after local therapy.
- The speaker noted that different immunotherapy mechanisms may require different predictive models, creating a granularity problem for radiomics applications.
- The speaker recommended that future study collaborations must include free access to trial data to enable biomarker validation work.

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