

# CÁNCER DE HÍGADO

## **[Short and long-term results of liver resection for hepatocarcinoma in Peru: a Peruvian single center experience on 232 cases].**

Ruiz E, Sanchez J, Celis J, Payet E, Berrospi F, Chavez I, Young F.

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### Abstract

**BACKGROUND:** To evaluate the short and long term outcome of liver resections for hepatocellular carcinoma a retrospective analysis was performed on 232 consecutive patients with hepatocellular carcinoma resected between January 1990 and December 2006 at the Department of Abdomen of the Instituto de Enfermedades Neoplasicas of Lima Peru. **METHODS:** Disease-free survival (DFS) and overall survival (OS) were determined by Kaplan-Meier method, Prognostic factors were evaluated using univariate and multivariate analysis. **RESULTS:** The median age was 36 years. 44.2% were associated with hepatitis B, only 16.3% had cirrhosis. The median size of the tumors was 15 cm. The median value of AFP was 5,467 ng/ml. The majority of patients underwent a major hepatectomy (74.2 % had four or more segments resected) Overall morbidity and mortality were 13.7% and 5.3% respectively. After a median follow-up of 40 months, tumour recurrence appeared in 53.3% of the patients. The 1, 3, and 5 year overall survival rates were 66.5%, 38.7% and 26.7% respectively. The 1, 3, and 5 year disease-free survival rates were 53.7%, 27.6%, and 19.9%. On multivariate analysis, presence of multiple nodules ( $p<0.000$ ), cirrhosis ( $p=0.001$ ), and macroscopic vascular invasion ( $p=0.001$ ) were found to be independent prognostic factors related to a worse long-term survival. **CONCLUSIONS:** Surgical resection is the optimal therapy for large HCC and can be safely performed with a reasonable long-term survival.