

Liver Cancer: Hepatocellular Carcinoma (HCC)

What is Hepatocellular Carcinoma (HCC)??

Cirrhosis (and some liver diseases without cirrhosis) can cause **Hepatocellular Carcinoma (HCC)**, the most common type of primary liver cancer. **Primary cancer** is the original, or first tumor in the body.

HCC is becoming more common as cirrhosis is becoming more common. It happens to about 2 in every 100 people with cirrhosis every year. “Small” HCC begins as a mass or bump inside the liver which usually grows slowly, but it can grow very fast. Sometimes there are many masses throughout the liver instead of a single mass. Small HCC does not cause symptoms.

Why do we screen for Hepatocellular Carcinoma (HCC)?

Screening tests are done to check for illness when someone has no symptoms. For example, are a colonoscopy or a mammogram. Your doctor may recommend screening for liver cancer. Because HCC is common and often grows slowly, we screen every 6 months. Screening is important because if we catch a liver cancer early when it is small, the treatment for HCC works best. Multiple tools can be used for screening. Usually, we use liver ultrasound and a blood test called ‘alpha fetoprotein (AFP)’ and we sometimes use CT scans or MRIs as well.

How is Hepatocellular Carcinoma (HCC) diagnosed?

Diagnosing HCC usually starts with ultrasound imaging. **Ultrasound imaging** uses high-energy sound waves to look at tissues and organs inside the body. The sound waves make echoes that form pictures of the tissues and organs on a computer screen (sonogram). Ultrasound imaging can only show if there is a

mass or not, it cannot tell you if it is HCC. It is very important to know that sometimes we see masses in the liver on imaging that turn out to not be liver cancer. For this reason, if we find a liver mass with ultrasound, our next step is to arrange a CT or MRI scan. HCC in many cases can be diagnosed with a CT or MRI scan.

Often your doctor will discuss your scan at a special conference arranged to discuss your care. This conference is called a 'Liver Tumor Board.' Doctors at the tumor board include liver specialists and the HCC treatment team.

Occasionally, we determine that a new scan is needed or that a liver biopsy is needed to figure out if you have HCC. A liver biopsy involves passing a needle through your skin and into your liver to take a sample of the mass for review by a pathologist. A **pathologist** is a specialist doctor that looks at biopsies under the microscope.

How is Hepatocellular Carcinoma (HCC) treated?

Treating HCC is a very personal decision based on a discussion with your liver doctor. The main things that inform the choice of treatment are:

- The size, number, and location in the liver of your HCC mass or masses
- How well your liver is working
- If you have symptoms like ascites (fluid in the belly) or varices (veins in the wall of the esophagus are enlarged)
- How fit you are, whether you need help with your daily activities

Treatments could include:

- Surgery
- Procedures done by a specialist radiologist
- Medications prescribed by a cancer doctor
- Supporting you by treating any symptoms, often with a palliative care doctor

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