

## 影響肝細胞癌接受活體肝臟移植復發後存活率之因子

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### **Predictors influencing survival after recurrence in living donor liver transplantation for hepatocellular carcinoma**

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#### **Purpose:**

Liver transplantation (LT) is the only therapeutic option capable of providing a complete oncologic resection for hepatocellular carcinoma (HCC) while simultaneously replacing the diseased liver. However, some patients experience recurrence and subsequently rapid progression of the disease. The aim of our study quests for potential multivariate predictors of survival of patients whom experienced recurrence after liver transplantation.

#### **Materials and Methods:**

From November 2006 to May 2014, 358 adult patients underwent living donor liver transplantation (LDLT) for HCC. All 32 patients (8.9%) whom diagnosed recurrence were retrospectively reviewed among these patients. Univariate and multivariate analyses were performed to analyze factors affecting survival after recurrence.

#### **Results:**

The median recurrence-free survival was 12.4 months. The median survival time after recurrence was 11.4 months, and the 1- and 3-year survival rates after recurrence were 72.8% and 31.6%, respectively. On analysis, a recurrence-free survival  $\leq 6$  months, initial multiple extra-graft recurrence, unresectable disease, and therapeutic response to initial therapy demonstrated disease progression were related to shorter survival after recurrence.

#### **Conclusion:**

In conclusion, post-transplantation recurrence of HCC has relatively poor prognosis. However, appropriate treatment may prolong survival of some patients. If the recurrent lesion is locally controllable, surgical resection should be considered.