

# Chemoembolisation of Multifocal Hepatoma

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### Patient History

- 52-year-old male with cirrhosis attributed to past alcohol abuse presented with bleeding varices that were banded
- MRI demonstrated two hypervascular masses measuring 5-6cm, one in left lateral segment and the other in left medial segment, surrounded by multiple small satellites
- Biopsy revealed moderated differentiated hepatoma

### Procedure

- Cobra catheter was advanced into the left hepatic artery and beyond the right gastric artery
- A solution of 100mg cisplatin, 50mg doxorubicin, 10mg mitomycin-C dissolved in 10ml of radiographic contrast was emulsified with 10ml of ethiodol
- 10-15ml of the resulting emulsion was infused slowly into the left hepatic artery
- One syringe of 300-500µm Bead Block™ microspheres was added to the remaining emulsion after expressing the excess saline from the syringe
- Careful infusion was continued until near-stasis was achieved

### Outcome

- Angiography of left and common hepatic arteries showed no residual tumour blush
- Follow-up visit one month later showed complete necrosis of both masses with no viable tumour identified
- Complete radiographic response of multifocal hepatoma to chemoembolisation



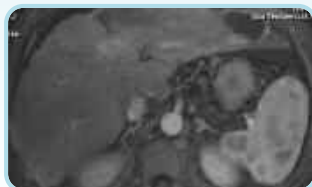
*Left hepatic arteriogram:  
early phase*



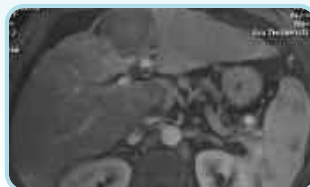
*Left hepatic arteriogram:  
late phase*



*Left hepatic arteriogram:  
during embolisation*



Arterial phase:  
gadolinium enhanced MRI



Arterial phase: one month  
after chemoembolisation



Post-embolisation: left  
hepatic arteriogram



Post-embolisation: common  
hepatic arteriogram



## Ordering Information

2ml Bead Block is suspended in 5ml physiological buffered saline in 20ml syringe and is packed singly.

Size Range $\mu\text{m}$	Colour Code	2ml Product Code
100 – 300	Yellow	EB2S103
300 – 500	Blue	EB2S305
500 – 700	Red	EB2S507
700 – 900	Green	EB2S709
900 – 1200	Purple	EB2S912

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## Important Information

### Indications:

Bead Block™ is intended to be used for the embolisation of hypervascular tumours, including uterine fibroids and arteriovenous malformations (AVMs).

### Potential Complications:

- Undesirable reflux or passage of Bead Block into normal arteries adjacent to the targeted lesion or through the lesion into other arteries or arterial beds
- Non-target embolisation
- Pulmonary embolisation
- Ischaemia at an undesirable location
- Capillary bed saturation and tissue damage
- Ischaemic stroke or ischaemic infarction
- Vessel or lesion rupture and haemorrhage
- Neurological deficits including cranial nerve palsies
- Vasospasm
- Death
- Recanalisation
- Foreign body reactions necessitating medical intervention
- Infection necessitating medical intervention
- Clot formation at the tip of the catheter and subsequent dislodgement

### UFE-Specific Potential Complications:

Potential post-procedure complications include:

- Abdominal pain
- Discomfort
- Fever
- Nausea
- Constipation
- Premature ovarian failure (ie menopause)
- Amenorrhoea
- Infection of the pelvic region
- Uterine/ovarian necrosis
- Phlebitis
- Deep vein thrombosis with or without pulmonary embolism
- Vaginal discharge
- Tissue passage, fibroid sloughing, or fibroid expulsion post UFE
- Post-UFE intervention to remove necrotic fibroid tissue
- Vagal reaction
- Transient hypertensive episode
- Hysterectomy