4th Paris Hepatitis Conference



Case report

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48 year old male

Liver cirrhosis CHILD A

Hepatitis B: known since 15 years (1993)

HBs antigen carrier without replication

NO treatment (only lamivudine available)

Co-morbidities:

MI February 2002

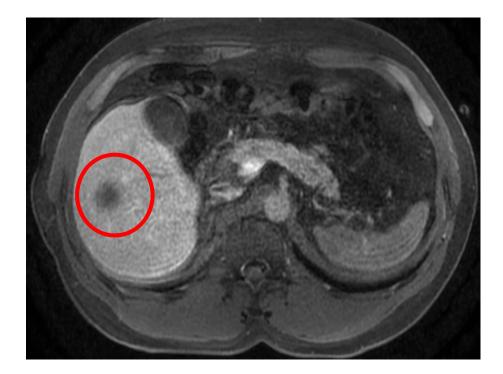
Kidney transplantation July 2004

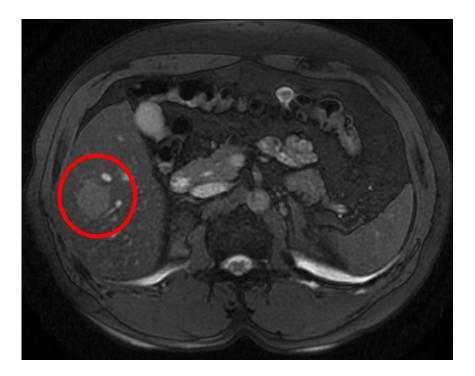


1st Case

OLT for HCC

- June 2007: Increased Virus load > 30.000 IU
 - HCC suspected tumor segment V/VI; 2.7 cm
 - AFP 1.8 µg/l







Bridging Therapy

<u>June 2007:</u>

Start with Telbivudine (Sebivo) Therapy <u>Dosage:</u> 600 mg daily

-- Virus not detectable

July 2007:

Wedge resection segment V/VI

Histopathology:

SAN SAPB CENT

HCC of 2.6 cm No microvascular invasion





Patient at risk for tumor development:

- chronic Hepatitis B
- under immunosuppression after kidney transplantation
- familial disposition (brother also HCC)

Decision December 2007:

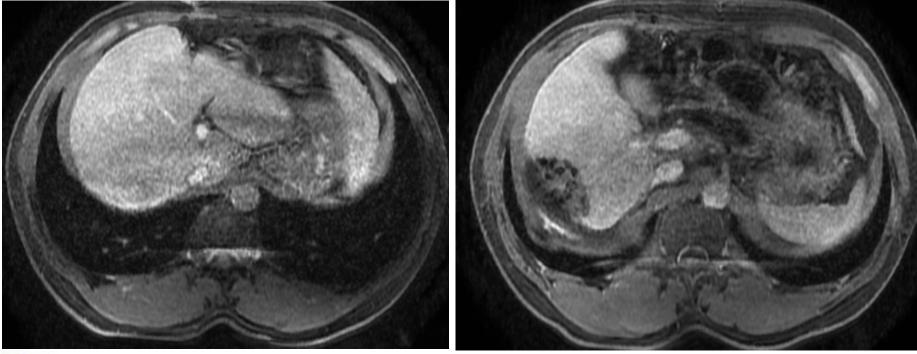
Listing Patient for Liver Transplantation





MRI - before transplant

NO suspected HCC recurrence







<u>June 2008:</u>



<u>Histopathology:</u>

No tumor

<u>Hepatitis B treatment post transplant:</u>

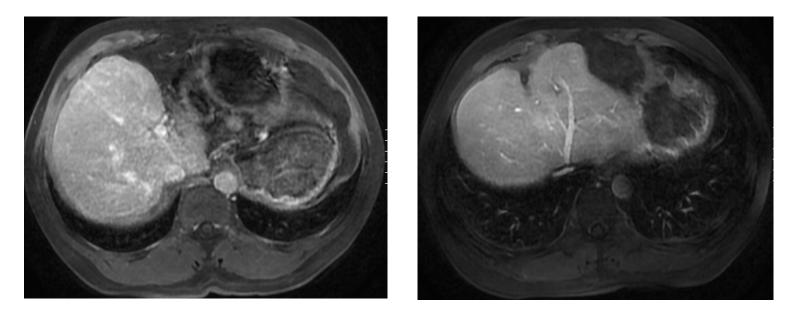
Hepatect - Dosage: 10.000 IE / 12 weeks + Telbivudine



§ HBV DNA negative



Last follow up: January 2011



52 year old male in good general conditions NO Hep B and HCC recurrence 2.5 years after OLT



42 year old male

Liver cirrhosis CHILD A

Hepatitis B: known since 6 years

Liver biopsy 2 years ago: mild active Hepatitis B with

portal fibrosis and coinfection with Hepatitis D

<u>Therapy:</u> alpha Interferon 3x9 Mio units s.c.



Interruption of treatment after 2 weeks due

to severe side effects



- July 2007: Liver cirrhosis CHILD B, 8 Points
 - uncorrected MELD Score 13

suspicion of HCC Segment VII AFP 112.4 μ g/l

CT arterial phase









Bridging Therapy

August 2007:



with Doxorubicin

Listing patient for liver transplantation

Looking for potential living donor



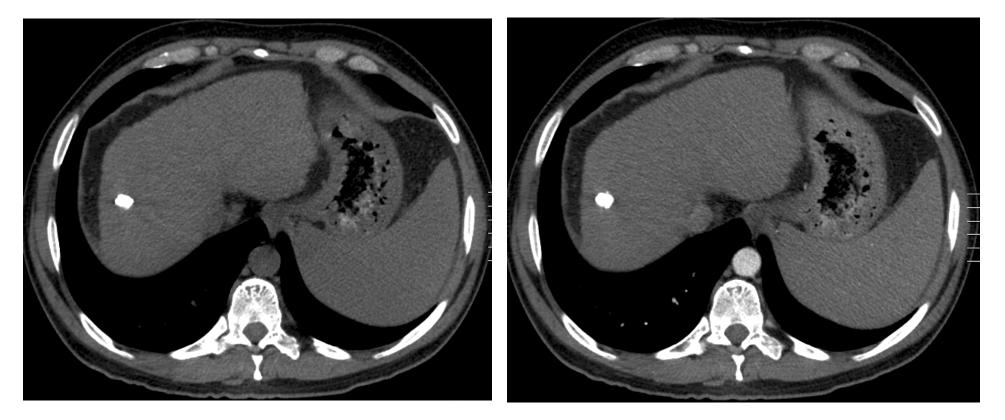


CT scan - 8 weeks after the intervention

complete embolisation

native phase

arterial phase





January 2008:

Living donor liver transplantation

Right liver lobe; 3 veins

Histopathology of the explanted liver:

Nodule of 1.2 cm - completely necrotic No microvascular invasion







Last follow up: December 2010

45 year old male in good general conditions NO Hepc B and HCC recurrence 3 years after LDLT

<u>Hepatitis B Treatment post transplant:</u>

Hepatect 10.000 IE/12 weeks +

Lamivudine









69 year old male, 81 kg

Liver cirrhosis CHILD A

Hepatitis C: known since 5 years

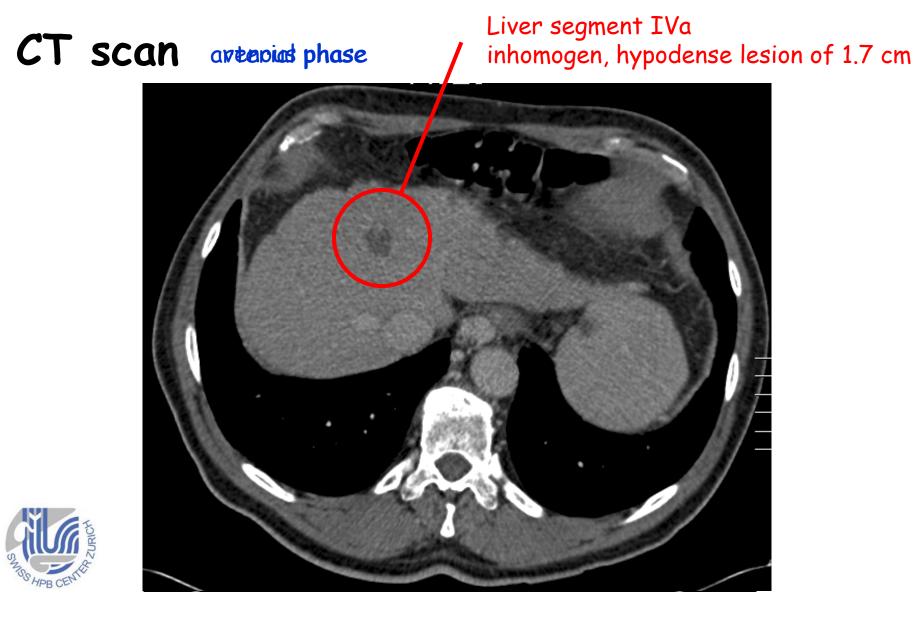
treated by Peginterferon and Ribavirin

(responder)













Bridging Therapy

January 2006



with Doxorubicin

Liver Segment IV

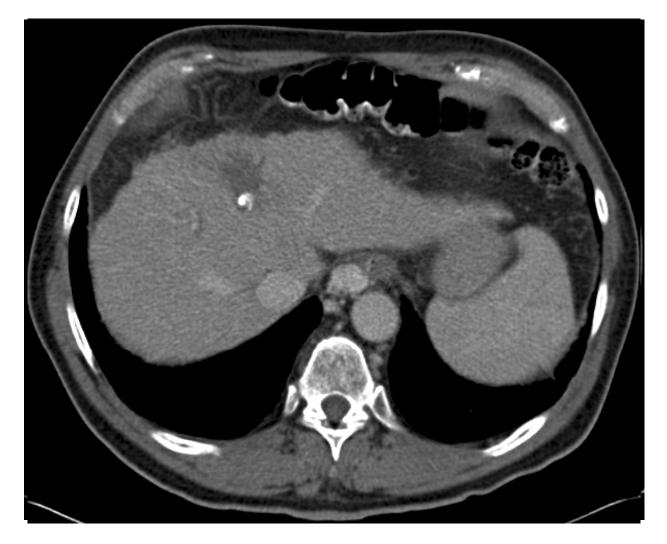
Patient included into a study, therefore <u>February 2006</u>







CT scan - 8 weeks after the intervention









February 2006

Listing patient for liver transplantation

October 2006



Histopathology of the explanted liver:

Nodule of 2.3cm – completely necrotic No microvascular invasion

Postoperative uneventful course Length of hospital stay: 13 days





<u>Last follow up:</u> November 2010

69 year old male in good general conditions NO Hep C and HCC recurrence 4 years after OLT









46 year old female, kg

Liver cirrhosis CHILD A

Hepatitis C: kown since 11 years due to transfusion after

cesarean; NO medical treatment

2000 Nov. 1st decompensation spontaneous bacterial peritonitis







November 2000 - February 2002

regular ambulant follow up - liver function stable

<u>March 2002</u>

CHILD B: 12 points

Decision: Listing patient for liver transplantation







December 2004

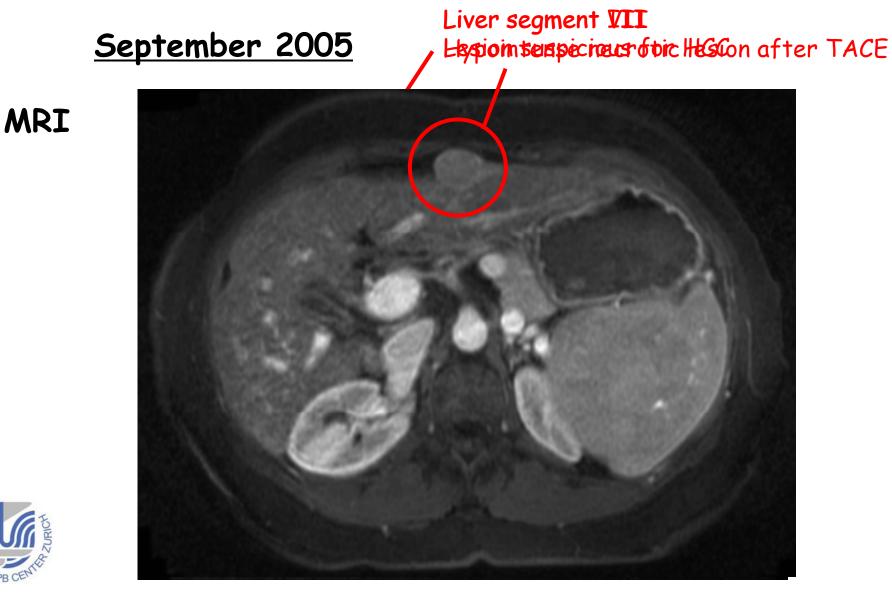
Patient still on waiting list

On regular controls: AFP > 50 yg/l New lesions suspicious for HCC in segment VII



Liver Segment VII - single lesion 15 mm











October 2005



with Doxorubicin

Liver Segment III

November 2005



Histopathology of the explanted liver:

Two nodules of 2.3cm and 0.8 cm – completely necrotic

No microvascular invasion





Last follow up: October 2010

55 year old female in good general conditions NO Hepc C and HCC recurrence 5 years after OLT







