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# MEDIA RELEASE

## **HEPATOCELLULAR CARCINOMA: RUPTURE LESS CRUCIAL THAN PREVIOUSLY THOUGHT**

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AUSTRALIAN patients with ruptured hepatocellular carcinoma (HCC) should be treated with the aim of long-term survival, even though mortality caused by rupture in Asian countries is 25-75%, according to the authors of a research letter published online today by the *Medical Journal of Australia*.

The 5-year survival rate for HCC is about 16%, the authors wrote. Tumour rupture is a life-threatening complication and the third most common cause of death for people with HCC.

The Melbourne researchers, led by Dr Natassia Tan, from Alfred Health, and colleagues from Monash University, Austin Hospital, Royal Melbourne Hospital, and Eastern Health, set out to investigate the impact of spontaneous HCC rupture on survival. Data from all adult patients who presented with spontaneous HCC rupture to six tertiary referral hospitals in Melbourne between January 2007 and July 2018 were compared with data from patients with non-ruptured HCC.

“Median survival time was 1.3 years in the non-rupture group and 1.7 years in the rupture group,” Tan and colleagues found.

“The longer survival for our cohort of patients with ruptured HCC than in other studies may be explained by their having greater hepatic functional reserve and less evidence of vascular thrombus and extrahepatic invasion than reported for other study cohorts.

“Curative surgical management may also have improved survival. For 26 of 33 patients in the rupture group (79%), spontaneous rupture was the first indication of HCC; lead time bias or earlier consideration of therapy after managing the rupture were therefore possible.”

Tan and colleagues concluded that “given the potential for median survival times of more than 12 months, patients with ruptured HCC should be treated with the aim of long-term survival”.

“Larger prospective studies of the impact of HCC rupture on prognosis are warranted.”

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