

## COMBINED TREATMENT OF TRANSARTERIAL EMBOLIZATION (TAE) AND RADIOFREQUENCY (RF) FOR LARGE HEPATOCELLULAR CARCINOMA (HCC)

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**Purpose:** To describe the effectiveness of a combined treatment of TAE and RF for large HCC (> 5 cm).

**Materials and Methods:** Over the last year we treated 10 patients (mean age 72 years), affected by unresectable HCC (mean diameter of nodule 5,8 cm; range 5-7 cm) with TAE and RF. Embolization was performed through a superselective catheterism of afferent branches of hepatic artery and injection of polyvinyl alcohol particles (PVA) in 6 cases and an emulsion of Lipiodol plus doxorubicin in 3; RF of the same lesion was carried out under ultrasound guidance (LeVeen needle in 6 cases; Invatec needle in 3).

**Results:** All patients underwent CT at 1, 3, 6, 12 months (range 3-12). In 5 cases we obtained a complete necrosis of the nodule. We reported 2 cases of persistence of disease at 1 month, re-treated with TAE with complete success after 6 months. In 3 cases at 6 months, we documented a relapse of the lesion that was retreated with TAE. A hepatic abscess developed in 1 patient.

**Conclusions:** TAE before RF increases the area and amount of necrosis. In our experience, this combined treatment is effective and promising in patients affected by large HCC.