

## Clinical Impact Of Surgical Treatment For The Spontaneously Ruptured Resectable Hepatocellular Carcinoma

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**Background** : Spontaneously ruptured hepatocellular carcinoma (srHCC) is a fatal complication of hepatocellular carcinoma (HCC). In addition, emergency treatment is frequently fraught with difficulties. The aim of this study was to investigate the prognosis and recurrence pattern in patients undergoing hepatectomy for the srHCC.

**Methods** : This retrospective study included 11 patients with srHCC treated using either emergency hepatectomy or emergency transarterial embolization (TAE) followed by staged hepatectomy between January 2015 and December 2019. The patients visited the emergency room because of sudden rupture of HCC without being diagnosed with HCC. We analyzed the prognosis, recurrence rate and survival in patients after hepatectomy.

**Results** : Four of the 11 patients in this study were classified as Child-Pugh class A and 7 as Child-Pugh class B. Nine patients were visited for sudden onset of abdominal pain, and two for sudden onset of shock. The median hemoglobin level at the time of the visit was 11.5 g/dL (interquartile range: 9.8–12.7). Five patients underwent one-stage hepatectomy and six underwent emergency TAE hemostasis followed by staged hepatectomy. Median survival and disease-free survival were 23 and 15 months, respectively. Recurrence occurred in seven patients (four in the one-stage group and three in the staged group). Among patients with recurrence, six had intrahepatic recurrence and three peritoneal metastases.

**Conclusions** : Hepatectomy for srHCC could achieve compare good prognostic outcomes, especially for staged hepatectomy. The most common locations of recurrence after hepatectomy are intrahepatic and peritoneal. Peritoneal metastases are more likely to occur after one-stage hepatectomy

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