中文題目:經由篩檢診斷的肝細胞癌:確診時間與預後的相關性

英文題目: Hepatocellular carcinoma detected by regular surveillance: does timely confirmation of diagnosis matter?

作者: 葉人豪¹, 洪肇宏¹, 王景弘¹, 郭垣宏¹, 戴維震¹, 盧勝男¹

服務單位: 高雄長庚紀念醫院內科部肝膽胃腸科系1

Background:

Despite active surveillance of hepatocellular carcinoma (HCC), a minority of patients were still diagnosed at later stage. In addition, some suspicious nodules noted by ultrasonography (US) were proved to be after prolonged follow-up due to initial negative recall procedures; In this study, we aim to examine explore factors associated with advanced disease in patients under US surveillance and if delayed confirmation impacts outcome.

Methods:

During 2010-2012, 198 patients were diagnosed of HCC in this single center via US surveillance. These patients were subdivided into three groups: (A) immediate diagnosis after positive ultrasonography, (B) enhanced follow-up: diagnosis was made later due to initial negative recall procedures, and (C) beyond ultrasonography: the tumor had never been detected by ultrasonography during surveillance.

Results:

The follow-up time from positive ultrasonography to confirmation of HCC in group B was 8 (2-67) months (median), but the stage distribution and 3-year survival rates were indifferent among three groups. A high proportion of patients with curative stage (N=162, 81.8%) had shorter surveillance interval than patients with non-curative stage (N=33, 18.2%) (p = 0.009). In the patients with high alpha-fetoprotein upon diagnosis, 23.2% (53 of 69) had abrupt elevation compared to baseline. 10 patients were diagnosed as BCLC stage C despite surveillance.

Conclusion:

Our study suggested the time lag from ultrasonography detection to confirmation did not affect the outcome of HCC under current diagnostic criteria, and later stage diagnosis during surveillance might be only partly explained by the interval of exam and rapid tumor growth.

內科醫學會104年年會「海報展示」 報名表

姓 名: 葉人豪 單位科別:高雄長庚紀念醫院內科部肝膽胃腸科系

聯絡電話: 091231799 傳 真:07-7322402