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The Impact Of Applying UCSF Criteria To Patients Underwent Liver Transplantation For Hepatocellular Carcinoma In A Low Volume Center

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Background: There are many studies in patients with hepatocellular carcinoma applying the expanded Milan criteria. The University of California San Francisco (UCSF) criteria are considered as the most promising expansion rules so far. Based on UCSF criteria, we selected the patients underwent liver transplantation for hepatocellular carcinoma since 2008. Here we reported the long-term outcomes of patients underwent liver transplantation for hepatocellular carcinoma to assess the validity of the UCSF criteria instead of Milan in a single center.

Methods: Methods: Between 2008 and 2020, a total of 201 liver transplantation were performed, of which 39 were liver transplantation for hepatocellular carcinoma patients. Among them, living donor transplantations were 29 cases and deceased donor transplantations were 10 cases. Based on radiologic examination prior to operation, patients were prospectively categorized into 2 groups: within Milan (n = 32) and beyond Milan within UCSF (n = 7). Clinical outcomes were reviewed retrospectively.

Results: Mean age of patients was 51.2 years, and 28 patients were male. Mean MELD score was 11.2 ± 8.7 . Mean follow-up period was 63.7 ± 54.6 months. The 5-year overall survival rates in 'within Milan' and 'within UCSF' groups were 84.4% and 74.7%, respectively (p < 0.041). The 5-year disease-free survival rates in 'within Milan' and 'within UCSF' groups were 94.7% and 76.0%, respectively (p < 0.001). Generally, 5-year disease-free survival rate in total patients was acceptable (n=39, 76.0%). However, 7 expanded patients from Milan were revealed very poor long term both 5-year overall survival rate and disease-free survival rate (n=7, 26.8%, 0%, respectively).

Conclusions: The Milan criteria are still optimal in seeking for long term good results in patients with hepatocellular carcinoma. When the UCSF criteria are applied to hepatocellular carcinoma patients, the overall long-term results are acceptable, however there is a higher risk of recurrence compared to the Milan criteria.

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