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## Magnetic Resonance Elastography Predicts De Novo Recurrence After Resection For Hepatocellular Carcinoma

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**Background** : Hepatocellular carcinoma (HCC) is one of the most common cancers in the world. The best curative treatment for hepatocellular carcinoma is liver resection. But, it has been known that there is a high possibility of recurrence if there is cirrhosis even after liver resection. Most HCC patients has liver fibrosis/cirrhosis. Magnetic resonance elastography (MRE) acquire images that can be referred for LSM and a larger sampling area.

**Methods** : Between January 2014 and December 2018, 603 patients underwent Hepatic resection (HR) for HCC. Among 603 patients, 245 patient checked MRE, but 5 cases had technical failure. We analyzed 241 patients. HCC recurrence was defined according to previous studies and the recent AASLD guidelines as early (if occurring <24 months) or late (if occurring >24 months). The follow-up protocol included a clinical assessment by physical examination, US and laboratory exams every 3 months. HCC recurrence was diagnosed according to modifications of alpha-fetoprotein levels and US appearance, confirmed either by multiphasic CT or multiphasic MRI. Clinical data were analyzed disease-free survival rate (DFS) according to serum alpha-fetoprotein (AFP) level, Magnetic resonance elastography (MRE).

**Results** : Between January 2014 and December 2018, HR for HCC group has incidence of recurrence is 40.2% (97/241). Early recurrence rate is 22.0% (53/241) rate recurrent rate is 18.3% (44/241).

**Conclusions** : Magnetic resonance elastography that measure liver fibrosis predict de novo recurrence after hepatic resection for hepatocellular carcinoma. So we consider liver transplantation in severe stiffness liver parenchyma

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