

Chemoembolization for Liver Cancer

What You Need to Know and Do

Chemoembolization is a way to treat cancer in the liver. It is only used to treat cancer in the liver. It can be used for cancer in the liver that began in the liver, or for cancer that spread to the liver from other parts of the body.

Chemoembolization is done by a specially trained doctor (interventional oncologist).

How does it work?

A tumor needs a supply of blood to grow. The large blood vessel (called the hepatic artery) sends blood to the liver. Chemoembolization puts medicine (chemotherapy) directly into the tumor and cuts off the tumor from the hepatic artery.

The goals of chemoembolization are to:

- block the tumor's blood supply
- deliver high doses of medicine to the tumor
- keep the medicine in the tumor for long periods of time
- reduce the side effects of the medicine to the rest of the body.

What should I do before my appointment?

You need to stop eating or drinking 6 hours before the test.

You may also need to stop taking your medicine before the test. Talk to us before your test to find out how you need to prepare.

When should I arrive for my appointment?

You will need to arrive at least 1 hour and 30 minutes before your appointment time to check in and complete paperwork.

What happens during my test?

We will insert an IV (intravenous) line in your arm. It will give you fluids and medicine to prepare your body for the procedure.

- You will get medicine to help you relax and for pain.
- A small catheter (long, flexible tube) is placed into an artery in your groin.
- Contrast dye (X-ray dye) is injected through the catheter. This helps the artery and catheter show up better on X-rays.

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- The doctor guides the catheter to the artery in your liver, moves it to the tumor, and injects the medicine (chemoembolization).
- A substance that blocks the artery from the tumor is then injected.
- The catheter is removed and the artery is plugged.
- You will lay flat for 2 to 6 hours to keep the artery from bleeding.

What happens after my test?

You will go back to the radiology outpatient care unit. We will watch over you for 3 hours. If you develop any symptoms that do not get better with medicines, you will likely need to stay in the hospital overnight. We want to make sure you are having a good recovery.

If you go home the same day:

- Your pain and nausea should be controlled with oral medicines.
- You should be able to drink fluids without getting sick.
- We will give you a prescription for pain, nausea and a Medrol dose pack (if you are not diabetic).

Once you are discharged, take your regular medicines unless we tell you something else. If you take Metformin, please wait 48 hours after your procedure before you take a dose.

You will have repeat medical scans 2 months after your procedure. The Interventional Oncology coordinator will arrange this, and they will contact you about your appointment.

What are the side effects?

It is normal for you to:

- have pain in the upper right side of your stomach (abdomen) for up to a week. The pain may move towards your shoulder and back. We will give you a prescription for pain medicine to help.
- feel tired and worn out for up to 3 weeks.
- have little appetite and lose weight. It is important to eat, even if you don't feel like it. Try eating smaller meals, more often.
- have a temperature up to 101°F (38.3°C) for up to 2 weeks after the procedure.
 - You can take 200 to 400 mg ibuprofen (Motrin or Advil) every 6 hours for fever.
 - If you have a history of bleeding or been told by a doctor not to take ibuprofen, take 500 mg acetaminophen (Tylenol) every 6 hours instead. But don't take more than 2000 mg a day.

You may feel sick to your stomach. We will give you a prescription for anti-nausea medicine to help. Drink 6 to 8 glasses of fluids every day. Water is best.

You may have a bruise or soreness where the catheter went in.

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How active can I be?

For 10 days:

- Do not do any hard activities or heavy exercise.
- Do not lift anything more than 5 pounds (a half a gallon of milk)

Most people can return to other normal activities within a week.

What should I do if I have problems?

Call your liver doctor right away if you have:

- a temperature more than 101°F (38.3°C) or chills
- pain that is not controlled by taking your prescribed pain medicine
- pain that suddenly gets worse or changes
- vomiting or you cannot keep down any food or liquids
- bleeding or swelling at the site where the catheter entered your body
- any questions about your treatment.

Who can I contact with questions?

For any problems, concerns, or questions, call Interventional Oncology at (615) 343-9206.

After hours (between 3:30 p.m. and 7:00 a.m. on weekdays, and on weekends and holidays), call (615) 322-5000. Ask for the Interventional Radiology Fellow on call.

If you have an emergency, go to the nearest Emergency Room or call 9-1-1.