# The 13th International Single Topic Symposium (ISTS 2018)

Bridge over Posthepatectomy Liver Failure

# **E25**

# No evidence of cancer recurrence after multidisciplinary therapy for unresectable colorectal liver metastases (CRLM): a case report

Woo Young Kim and Yu Ni Lee

Surgical department, Presbyterian Medical Center, Jeon Ju, South Korea wykim104@naver.com

## **Purpose**

Over 50% of patients with colorectal cancer will develop liver metastases. Approximately 20% to 30% of patients have liver-only metastases on initial evaluation. Around 40% of those undergoing surgical resection has 5-year survival rate. Unresetable CRLM due to location, number and size can become resectable CRLM after chemotherapy. We report a case of initial unresectable CRLM which become resectable after multidisplinary therapy.

#### Methods

Sixty eight-year old gentleman had sigmoid cancer with unresectable multiple liver metastases in whole liver only. He underwent laparoscopic anterior resection showing 7.5 centimeter ulcerofungating sigmoid cancer with moderately differentiated adenocarcinoma, negative epidermal growth factor receptor and wild type K-RAS. He received 8 cycles of AVASTIN and FOLFOX with marked shrinkage of the liver metastases. He underwent right portal vein ligation, multiple wedge resections and RFAs in left hemiliver showing no tumor cell and necrosis. (First stage liver resection on 2.13.2017.) He underwent right hemihepatectomy (Second stage liver resection on 5.17.2017.) showing no viable cancer cell. He completed another 4 cycles of AVASTIN and FOLFOX.

### Results

He have had follow up every 3 months having no evidence of cancer recurrence.

## Conclusion

In that case, we should try multidisciplinary therapy for unresectable CRLM with good response to biologic agent and chemotherapy.