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Post-resection prognosis of patients with hepatic epithelioid hemangioendothelioma

<u>Shin HWANG</u>, Byeong-Gon NA, Chul-Soo AHN, Ki-Hun KIM, Deok-Bog MOON, Tae-Yong HA, Gi-Won SONG, Dong-Hwan JUNG

Department of Surgery, Asan Medical Center, University of Ulsan College of Medicine, Korea

Introduction: Epithelioid hemangioendothelioma (EHE) is a rare borderline vascular tumor. This retrospective, single-center study evaluated the outcomes of hepatic resection (HR) in patients with hepatic EHE.

Methods: Over the 10-year period from 2009 to 2018, 11 patients with hepatic EHE underwent HR, accounting for 0.1% of the 11,979 adults who underwent HR at our center. Diagnosis of hepatic EHE was confirmed by immunohistochemical staining for CD34, CD31 and factor VIII-related antigen.

Results: The 11 patients included nine (82%) women and two (18%) men, of mean age 43.5 ± 13.6 years. Preoperative imaging resulted in a preliminary diagnosis of suspected liver metastasis or EHE, with nine patients (82%) undergoing liver biopsy. No patient presented with abnormally elevated concentrations of liver tumor markers. The extents of HR were determined by tumor size and location from trisectionectomy to partial hepatectomy. All patients recovered uneventfully from HR. Five patients showed tumor recurrence, with four receiving locoregional treatments for recurrent lesions. The 1-, 3- and 5-year disease-free survival rates were 90.9%, 54.5% and 54.5%, respectively. Currently, all patients remain alive and are doing well. Univariate analysis on tumor recurrence showed that tumor size \geq 4 cm was significantly associated with tumor recurrence (p=0.032), but tumor number \geq 4 was not related to tumor recurrence (p=0.24).

Conclusions: Hepatic EHE is a rare form of primary liver tumor often misdiagnosed as a metastatic tumor. Because of its malignant potential, HR is indicated if possible. HR plus, when necessary, treatment of recurrence yields favorable overall survival rates in patients with hepatic EHE.

Corresponding Author.: Shin HWANG (shwang@amc.seoul.kr)