Hepatic Arterial Chemoembolization (HACE) For Uveal Melanoma Metastatic To The Liver

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Abstract:
Purpose: To assess outcomes to hepatic arterial chemoembolization (HACE) for patients with uveal melanoma with liver metastasis.

Methods: Retrospective case series of thirty-seven patients with uveal melanoma who received hepatic chemoembolization (HACE) for liver metastasis at a single institution. Hepatic angiography was reviewed by an interventional radiologist (JEG) and each case was classified at initiation of HACE as having either a nodular or infiltrative pattern of metastasis. Response to HACE was scored according to the Response Evaluation Criteria in Solid Tumors (RECIST) criteria.

Results: The mean number of HACE treatments per patient was 2.4 (range 1-5). Nodular angiographic pattern of metastasis was present in 20 (54\%) patients, an infiltrative pattern in 14 (38\%) patients, and undetermined pattern in 3 (8\%) patients. Overall mean survival after HACE was 9.7 months. Patients with a nodular pattern had a longer mean survival (14.4 months; range 1.9-70.3 months) than those with an infiltrative pattern (3.6 months; range 1.0-8.9 months)(P < 0.0001).

Conclusions: HACE is effective in treating hepatic metastasis from uveal melanoma when the metastatic disease is detected at an earlier stage before it has progressed from a nodular to an infiltrative pattern.

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