

Patient Journey

Approccio personalizzato al
paziente e esperienze a
confronto:
Epatocarcinoma e
Colangiocarcinoma

01 Febbraio 2024

VERONA
CROWNE PLAZA
Via Belgio, 16

Esperienza del GOM a Careggi -
Firenze

Dr.ssa Claudia Campani

AIGOM
ASSOCIAZIONE ITALIANA
GRUPPI ONCOLOGICI MULTIDISCIPLINARI

Hepato-biliary-pancreatic MDT composition

Cordinator: Dr. Ilenia Bartolini

Hepatobiliary-pancreatic surgeons

Prof. Gian Luca Grazi
Prof. Giacomo Batignani
Prof. Antonio Taddei
Prof. Maria Novella Ringressi
Dr. Luca Moraldi
Dr.ssa Ilenia Bartolini
Dr. Matteo Risaliti
Dr. Luca Tirloni



Hepato-biliary radiologists

Dr. Davide Beccani
Dr.ssa Antonella Masserelli
Dr.ssa Maria Cristina Bonini
Dr.ssa Ginevra Danti



Hepatologist

Prof. Fabio Marra
Dr. Paolo Forte
Dr.ssa Claudia Campani
Dr.ssa Erica Nicola Lynch

Interventional radiologist

Dr. Michele Citone



Gastrointestinal oncologist

Dr.ssa Elisa Pellegrini
Dr.ssa Agnese Vannini
Dr. Marco Brugia
Dr. Daniele Lavacchi
Dr. Daniele Rossini



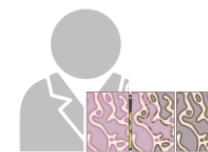
Nuclear medicine physician

Dr. Vittorio Briganti



Radiotherapist

Dr. Mauro Loi



Pathologist

Prof. Luca Messerini

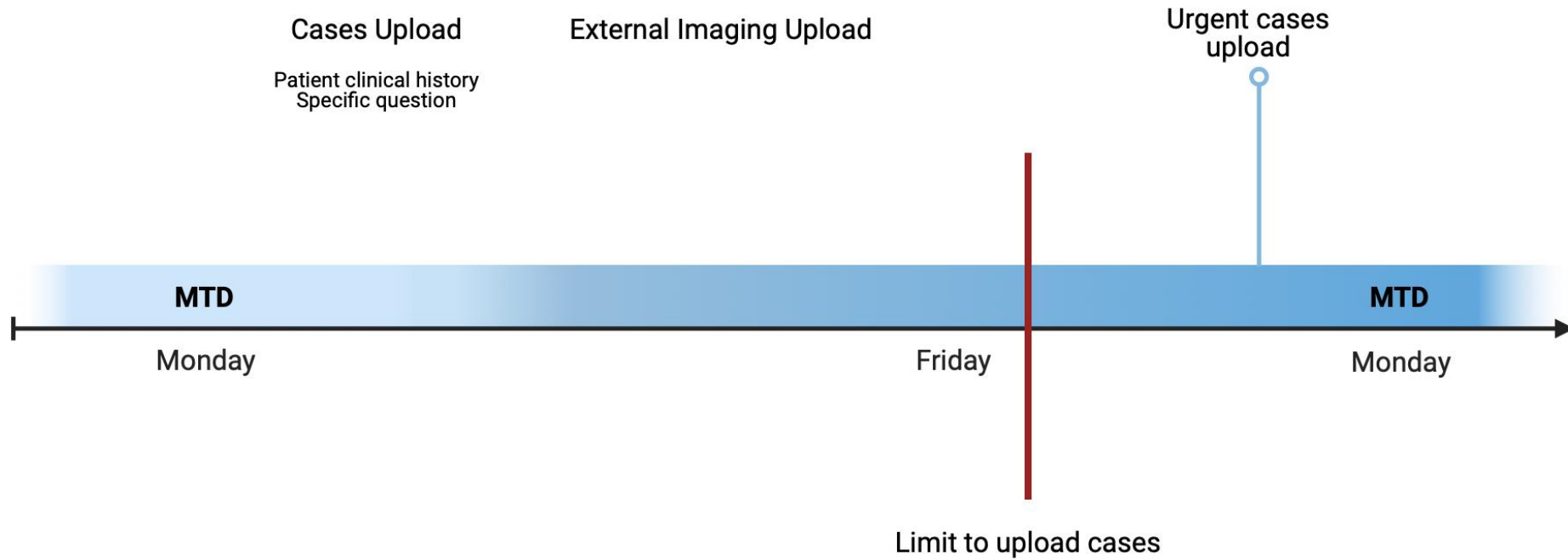
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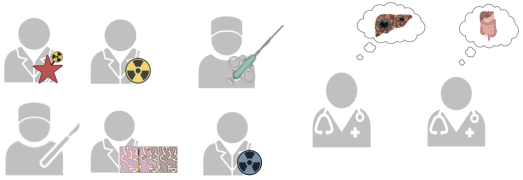
Hepato-biliary-pancreatic MDT meetings-timeline



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Hepato-biliary-pancreatic MDT meetings



GOM Tumori Epatobilio-pancreatico

Gennaio 2024

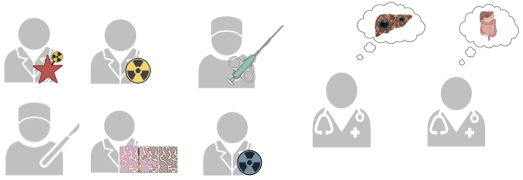


Lunedì	Martedì	Mercoledì	Giovedì	Venerdì	Sabato	Domenica
1 Primo dell'anno	2	3	4	5	6 Epifania	7
8 18	9	10	11	12	13	14
15 22	16	17	18	19	20	21
22 27	23	24	25	26	27	28
29 19	30	31	1	2	3	4

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Hepato-biliary-pancreatic MDT meetings



GOM Tumori Epatobilio-pancreatico Data

Richiedente

Struttura AOUC Altro

SOD/Azienda Medico

Tipo Nota

Anamnesi

Diagnosi

Data

Descrizione ICD

Tipo stadiazione Tipo TNM Clinico Patologico

Esame istologico

Esito consulto

Indicazione Altri accertamenti diagnostici Chirurgia Cure Palliative Follow Up
 Preabilitazione Preservazione Fertilità Radioterapia Stadiazione
 Terapia Medica Altro

Nota

Inviato a Nota

Disp. trial clinico Sì No SOD

Conclusioni

Operatori

Professione	Operatore	VDC
<input type="text" value="--Sel.--"/> <input type="button" value="Q"/>	<input type="text"/>	<input type="checkbox"/>

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Hepato-biliary-pancreatic MDT meetings 2023



52 meetings

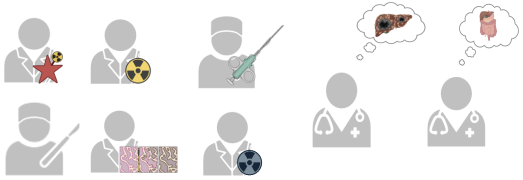
932 cases (ca. 18 cases/meeting)



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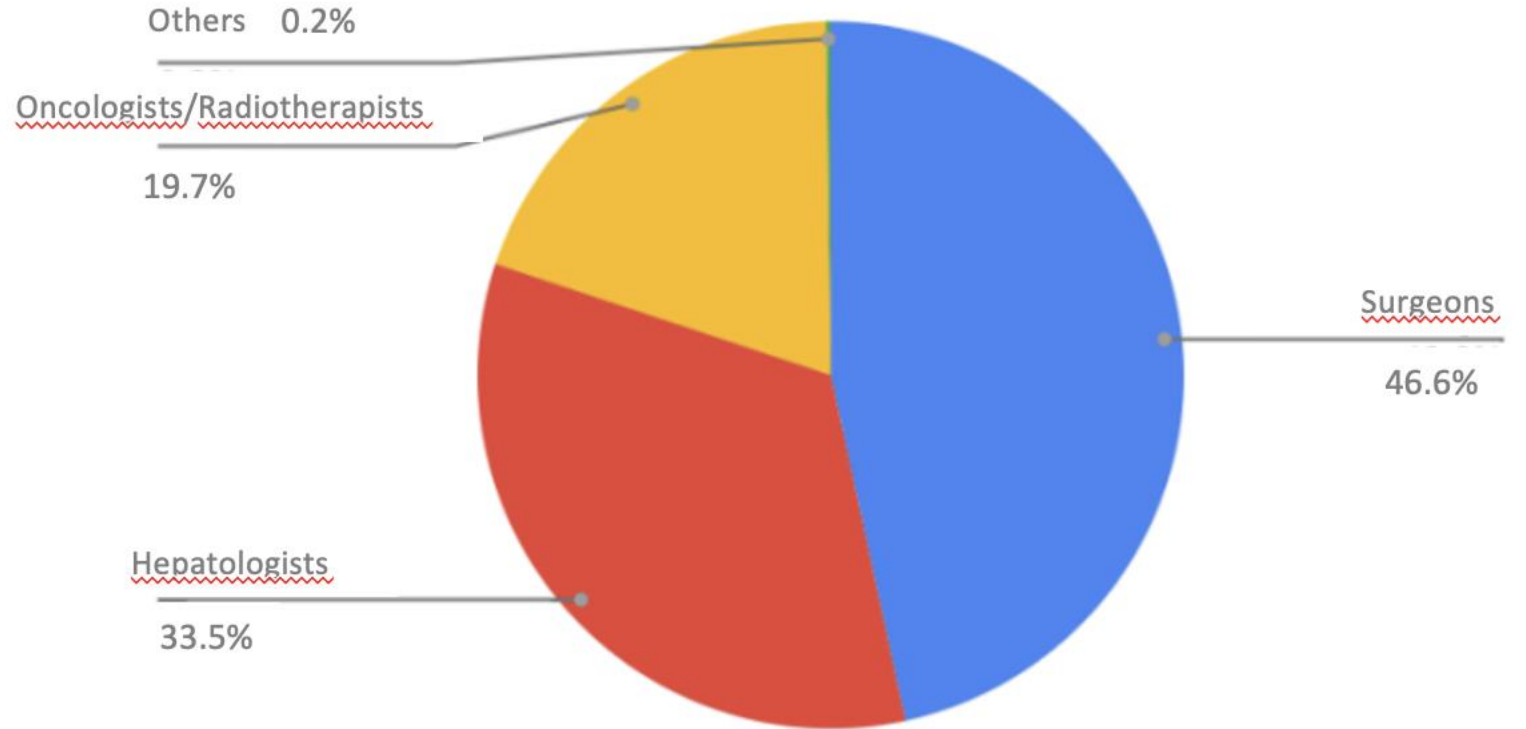
Hepato-biliary-pancreatic MDT meetings 2023



52 meetings

932 cases (ca. 18 cases/meeting)

Referent



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Hepato-biliary-pancreatic MDT meetings 2023



52 meetings

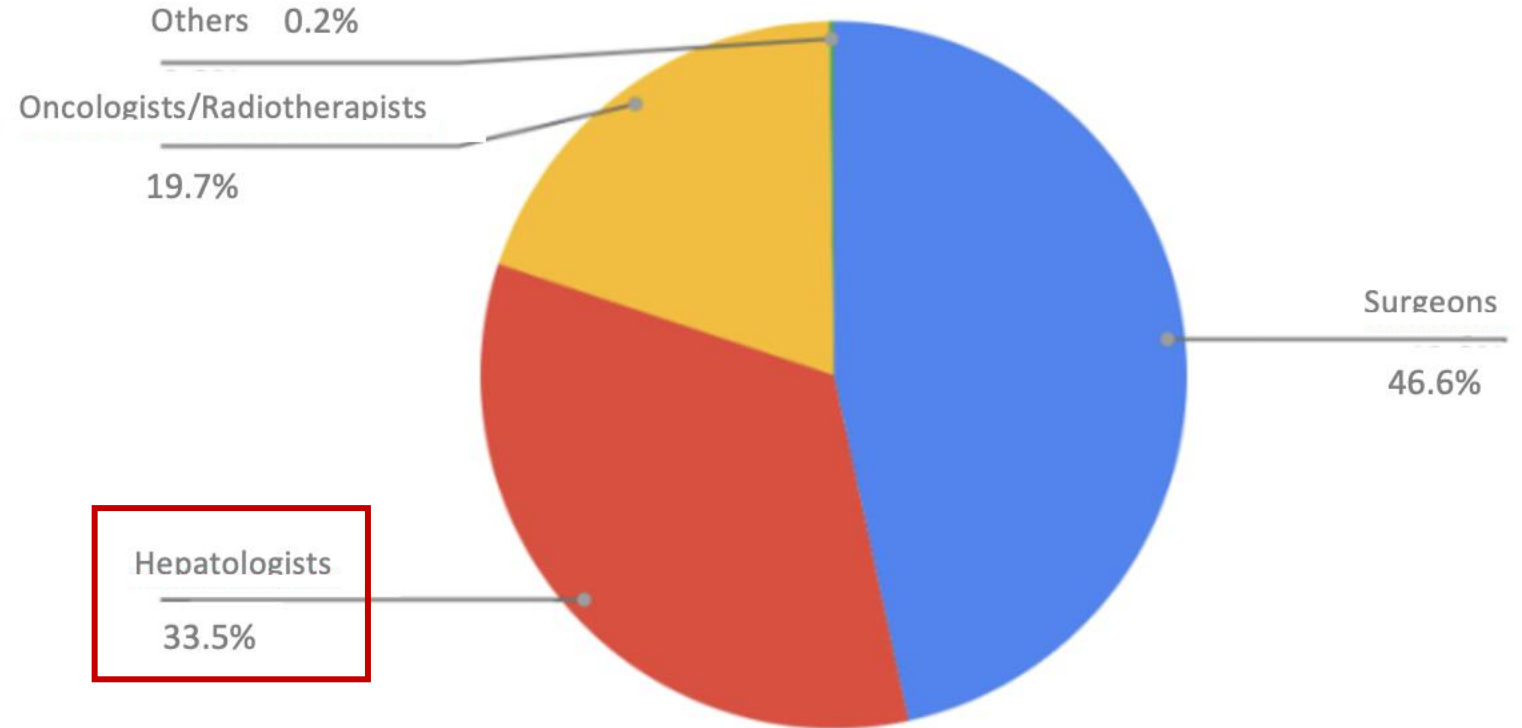
932 cases (ca. 18 cases/meeting)

January-June 2023

106/263

Internal Medicine and Hepatology Unit
(Prof. Marra)

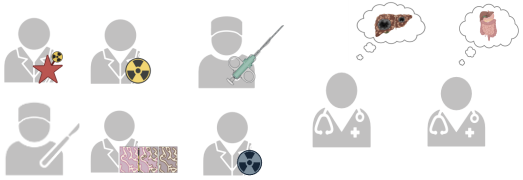
Referent



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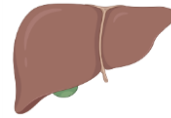


Hepato-biliary-pancreatic MDT meetings 2023

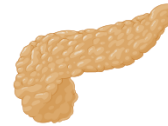


52 meetings

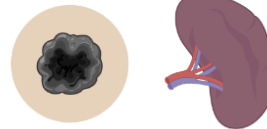
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544 Hepato-biliary



371 Pancreas



17 Other (spleen lesions, skin metastasis,...)

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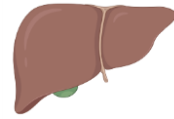


Hepato-biliary-pancreatic MDT meetings 2023

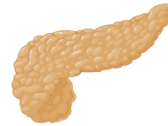


52 meetings

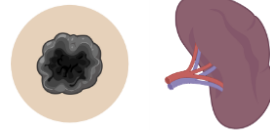
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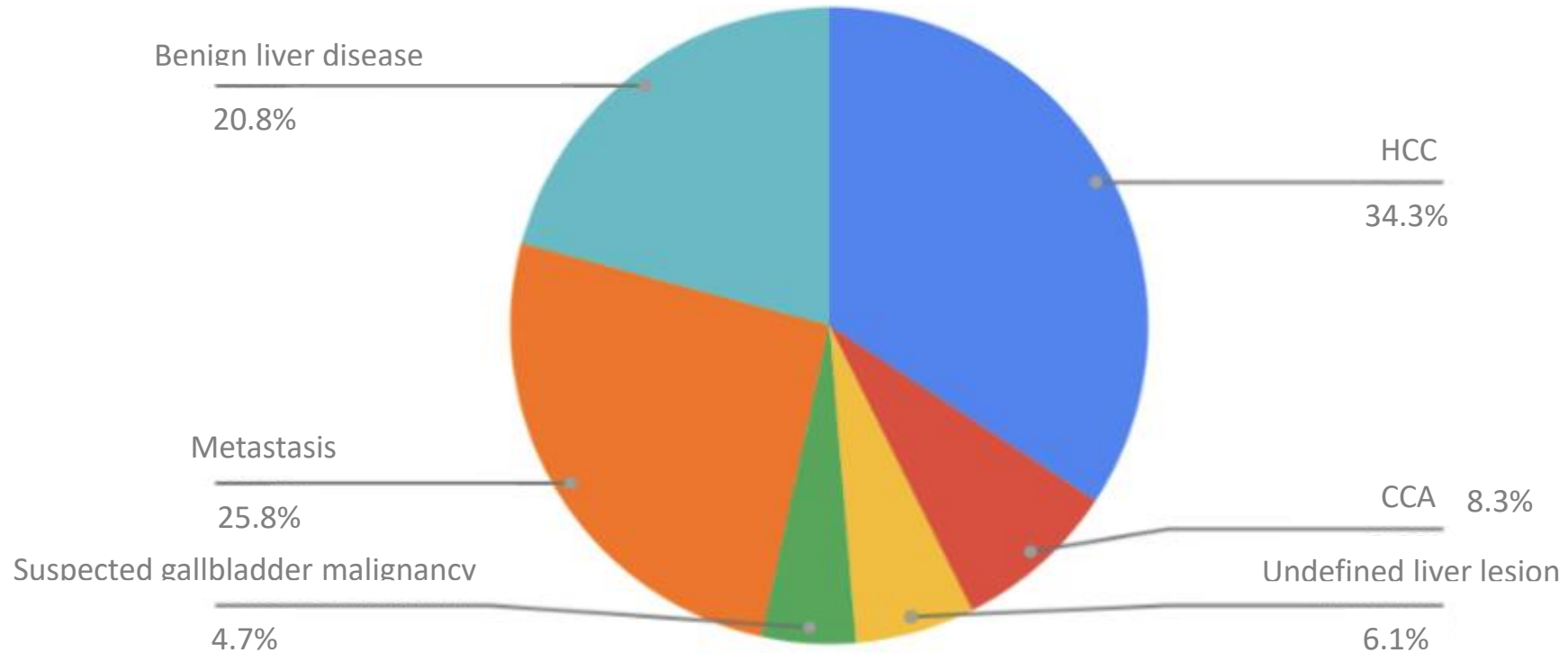
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Hepato-biliary cases

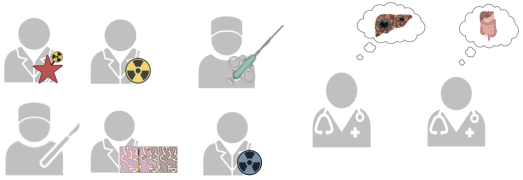
544 cases



Patient Journey

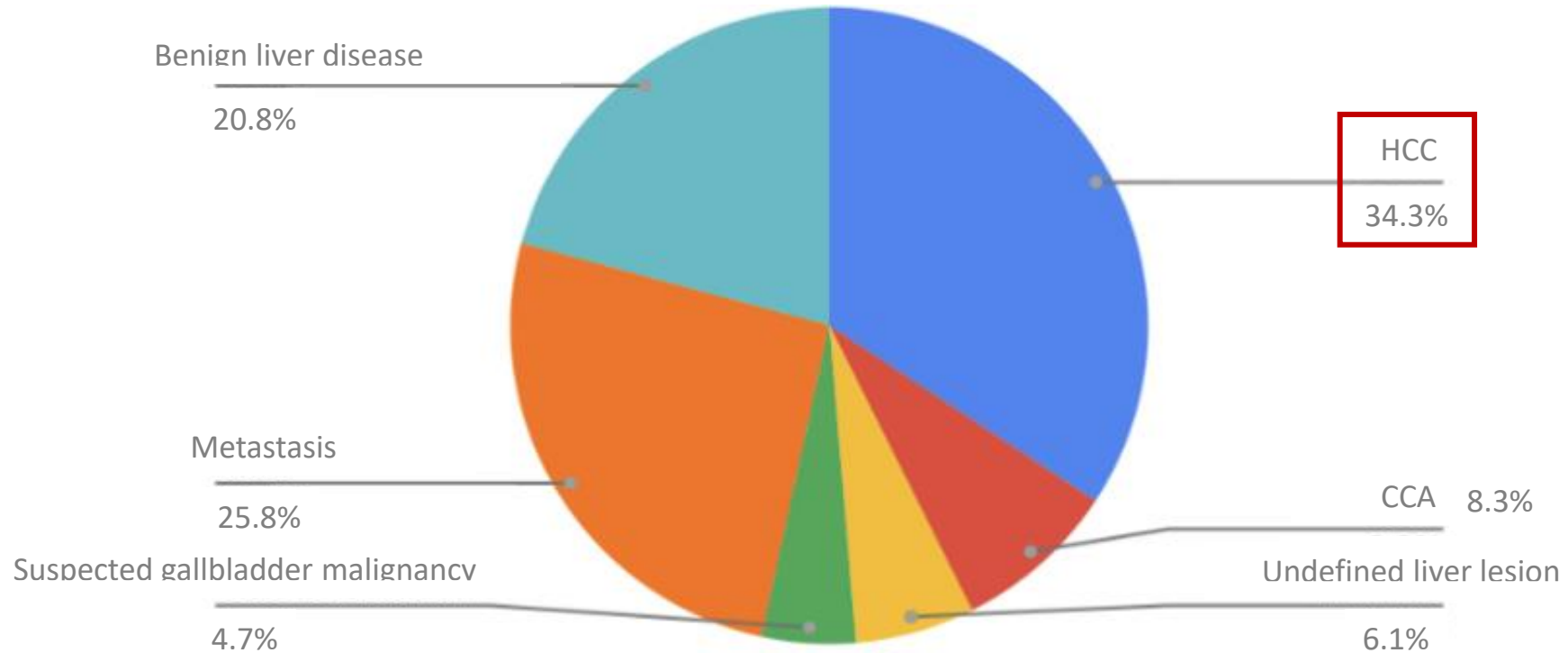
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Hepato-biliary cases

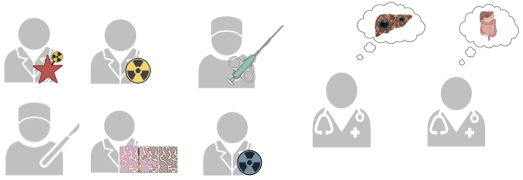
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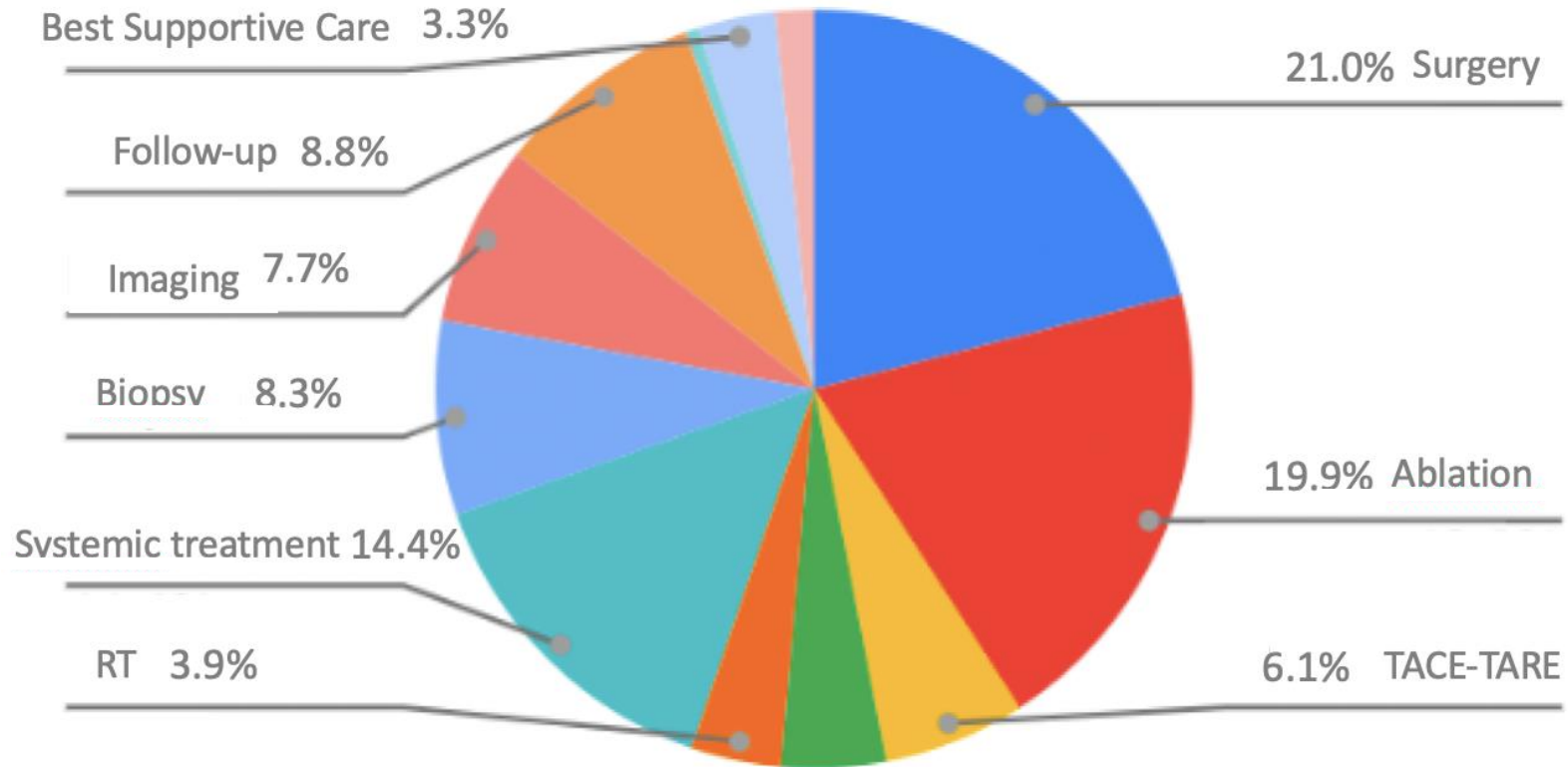
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Hepato-biliary cases

HCC



Patient Journey

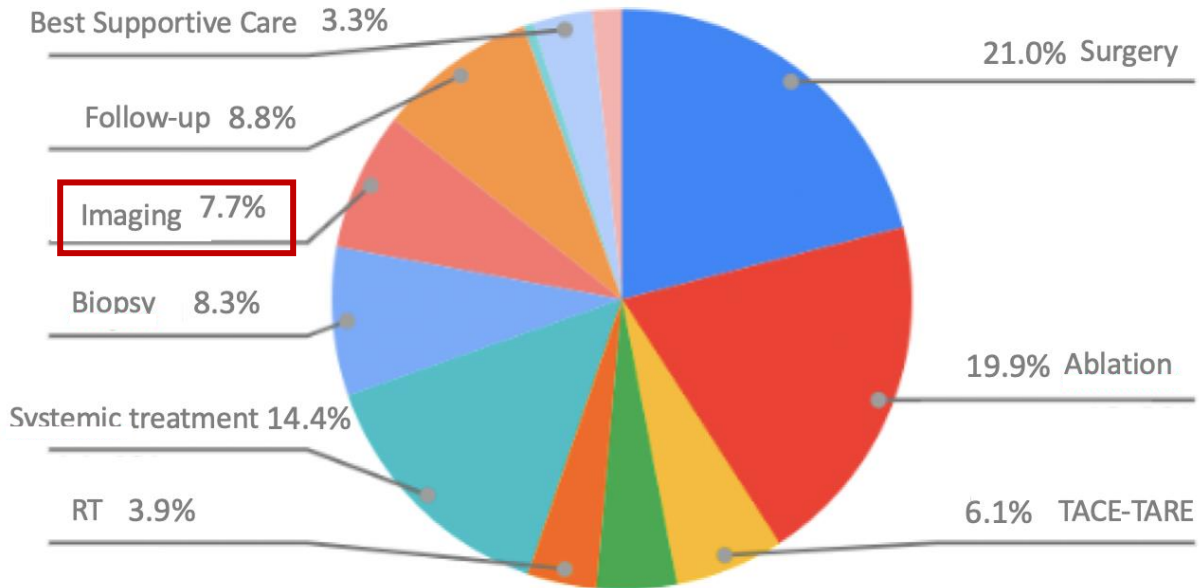
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Hepato-biliary cases

HCC

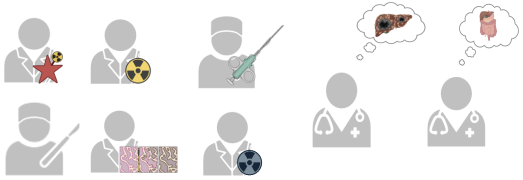


Re-evaluation of the images of all **doubtful nodules** to assess whether a **definite diagnosis of HCC** can be reached and discussion of **the best method** to be used to confirm HCC diagnosis based on the **patient's clinical features** (e.g. claustrophobia, pacemaker, high creatinine values)

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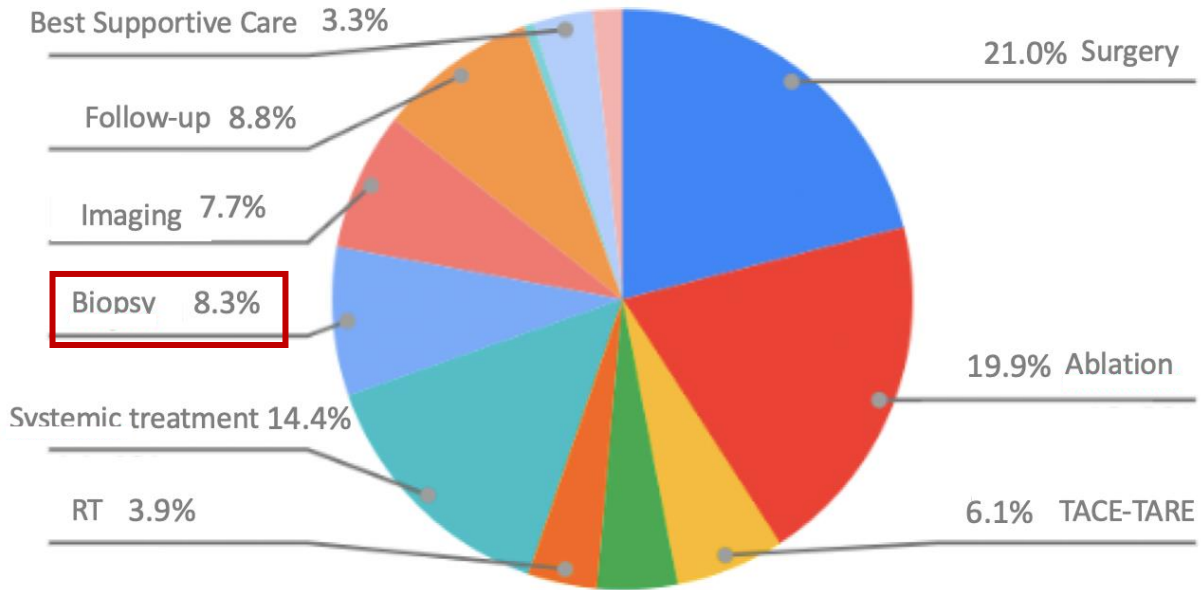
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Hepato-biliary cases

HCC



- **Non-cirrhotic patients**

- in doubtful case to exclude **HCC-CCA diagnosis**

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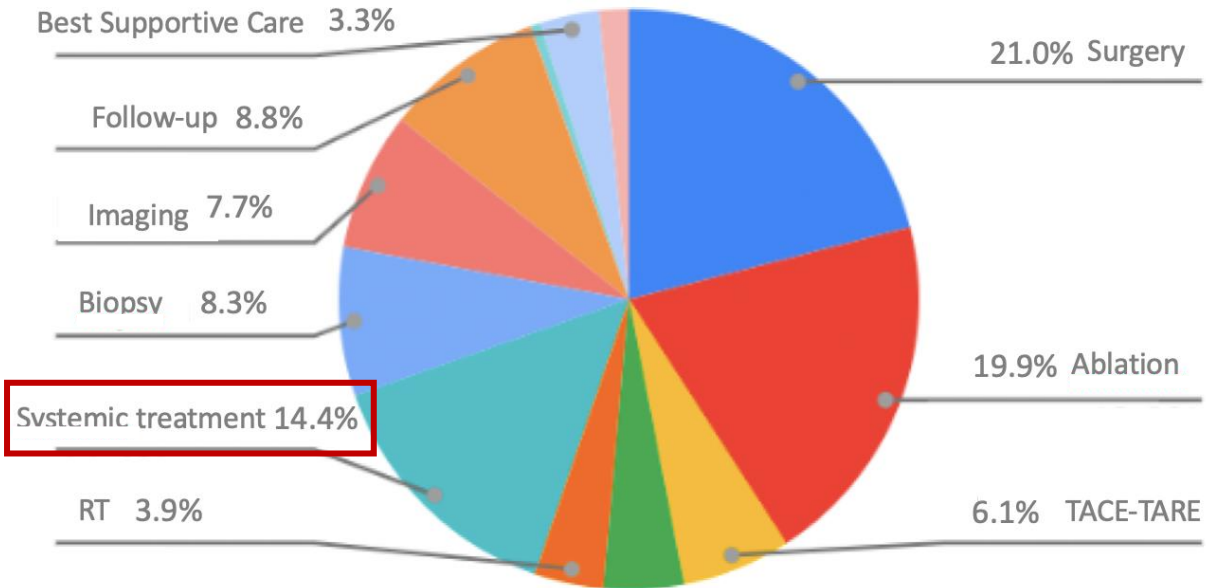
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Hepato-biliary cases

HCC



- Reassessment of **tumour burden** and agreement on the **need for systemic therapy**

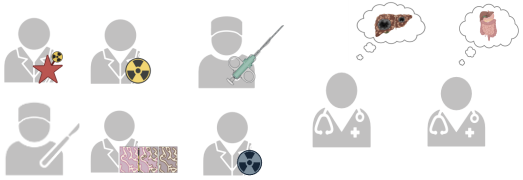
- Definition of **therapeutic response** during systemic therapy according to **mRECIST criteria** in cases where only dimensional increase is reported in the radiological report

- Information about **clinical trial** opportunities and evaluation request on **molecular tumor board**

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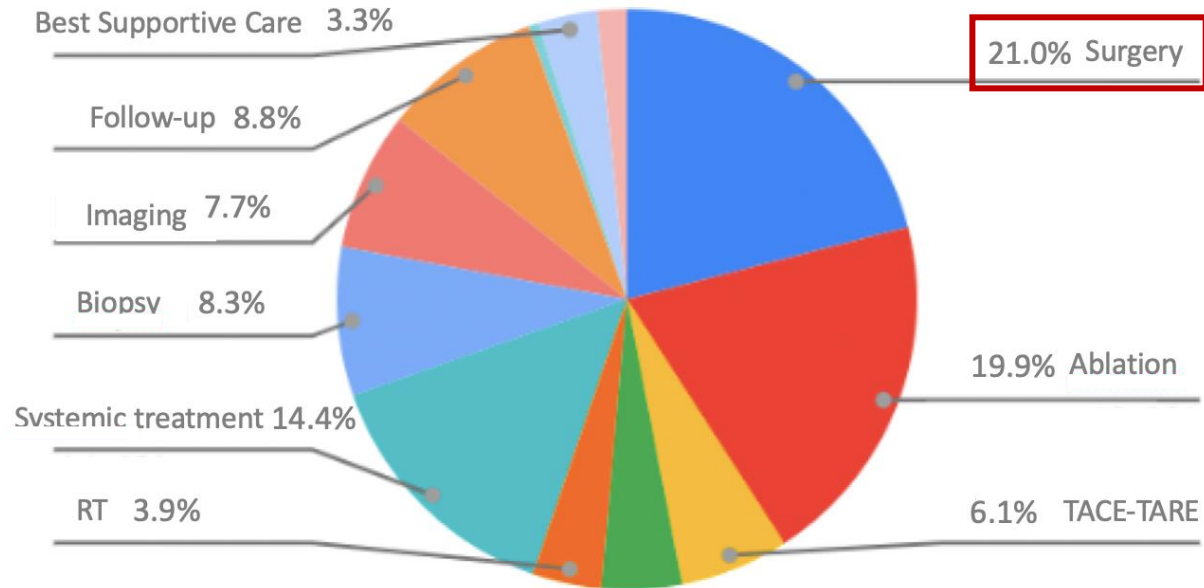
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Hepato-biliary cases

HCC



- Resection as **main treatment** +/- need for preliminary investigation (i.e. HVPG, prehabilitation)

- Resection possibility after **downstaging** treatment

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The role of MTD in patient management

♀ 68 yo

Hepatology consultation

August 2020

CT scan- October 2019

-> Simple cyst formation in the left hepatic lobe (10 cm)

-> Hepatic lesion of V-VI-VII segment (maximum diameter approx. 13 cm). Contrastographic features suggestive for **FNH** - intense arterial impregnation with central hypodensity, isodensity in late phase

The lesion had already been described as a **smaller FNH** on a previous **CT examination in 2015 (5x4.5x5 cm)**



Patient Journey

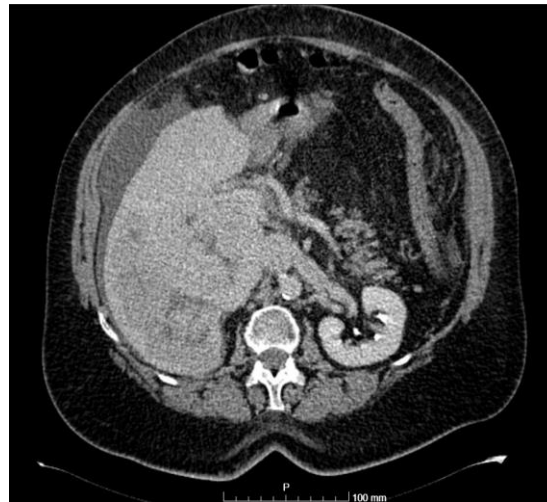
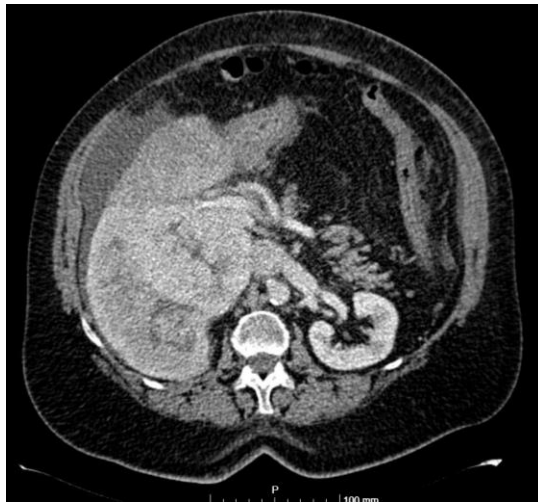
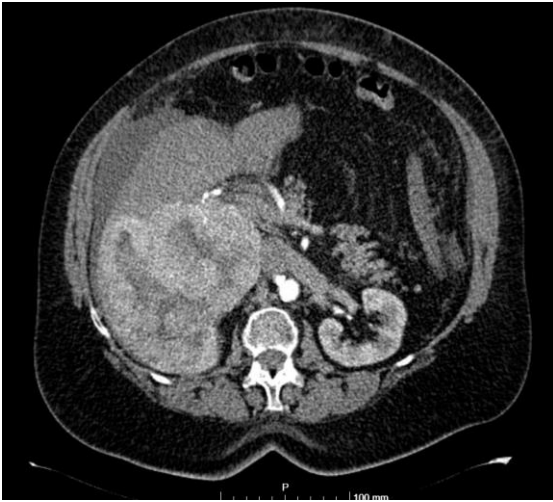
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The role of MTD in patient management

August 2020

Voluminous nodule V-VI and VII segment, with polylobate margins (13 x 14 x 18 cm). Arterial contrastographic impregnation, with some areas of weak wash-out with persistent hypodensity shoots of possible fibrotic significance.



Alfafetoprotein	ng/mL	23.2
CEA	ng/mL	2.9
Ca 19.9	U/mL	12.3

MTD HBP: *The lesion may be referred to giant FNH, but in relation to the wash-out areas, volumetric increase and aFP values, malignant nature cannot be excluded → **Biopsy***

Patient Journey

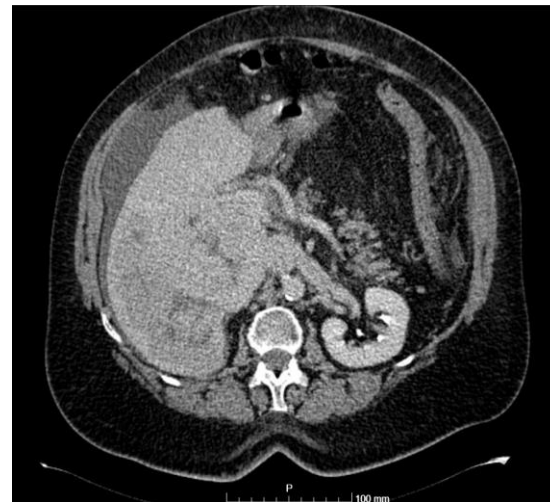
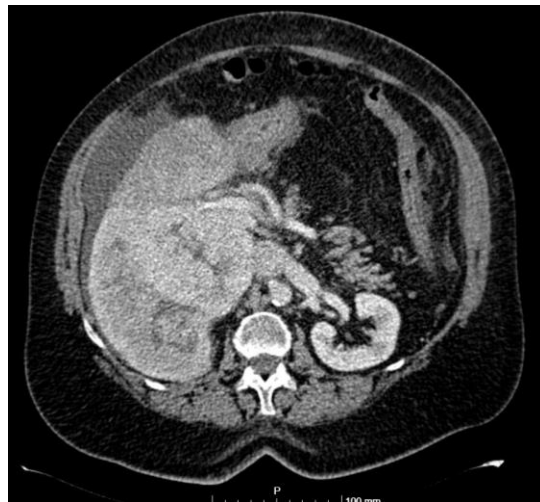
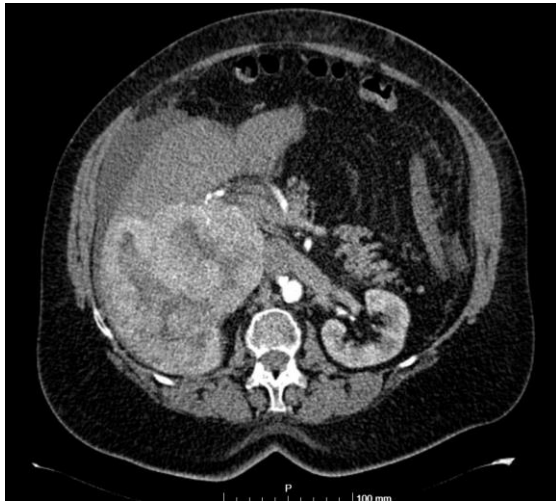
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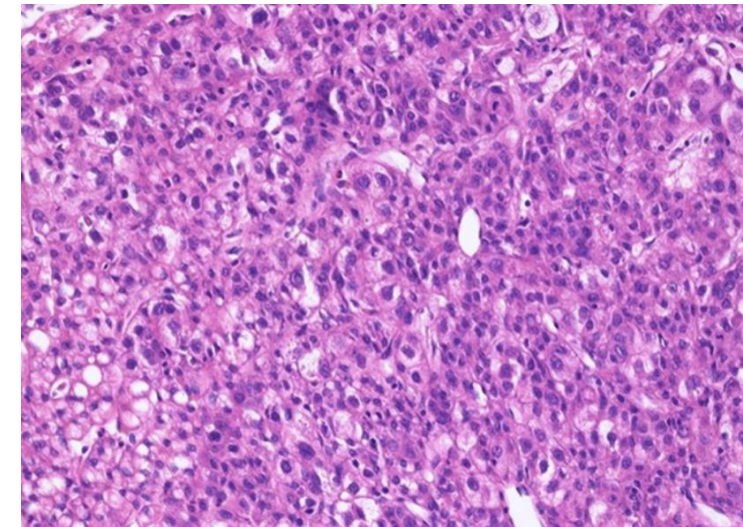
The role of MTD in patient management

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Voluminous nodule V-VI and VII segment, with polylobate margins (13 x 14 x 18 cm). Arterial contrastographic impregnation, with some areas of weak wash-out with persistent hypodensity shoots of possible fibrotic significance.



**Medium differentiated trabecular
hepatocellular carcinoma
(Edmondson's G2)**



MTD HBP: TARE

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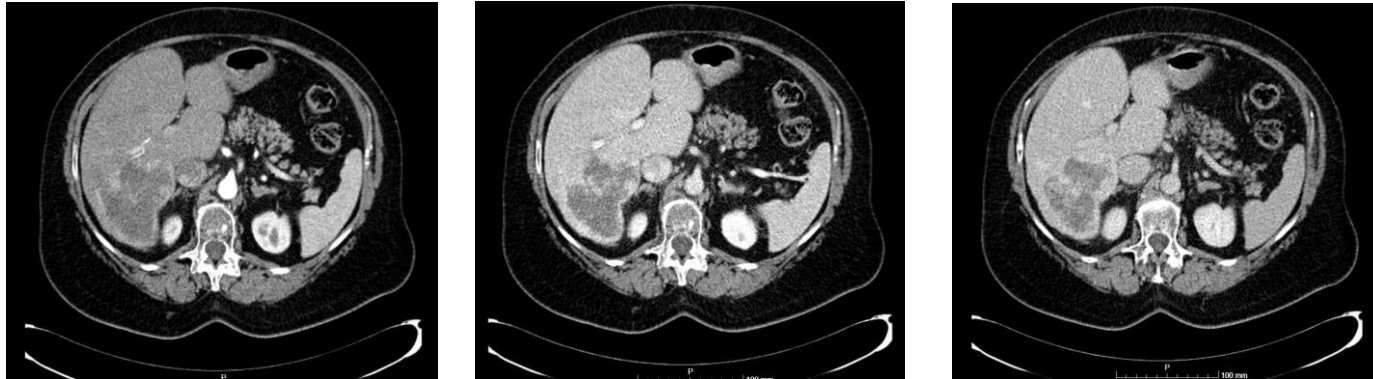
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TARE

TARE



Marked reduction of the hepatic mass with current dimensions of 8 x 7.5 x 6.5 cm, almost completely colliquated. Minimal residual "patchy-pattern" at the dome and in the Vs to be related to cardiac stasis. Ascites resolved.

Partial Responder.

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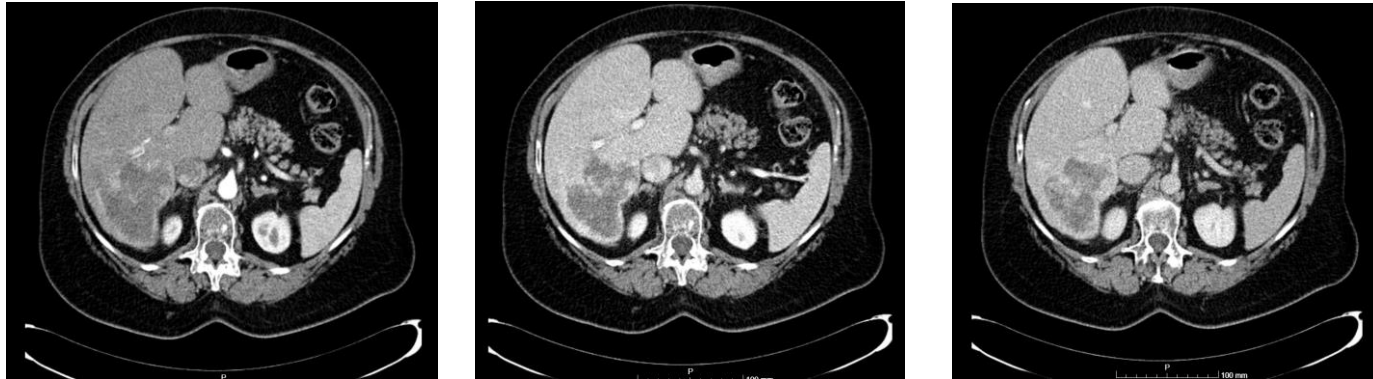
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Partial Responder.

MTD HBP: High risk of PHLF (post-hepatectomy liver failure) due to low RLV (remnant liver volume), evaluation for **systemic therapy**

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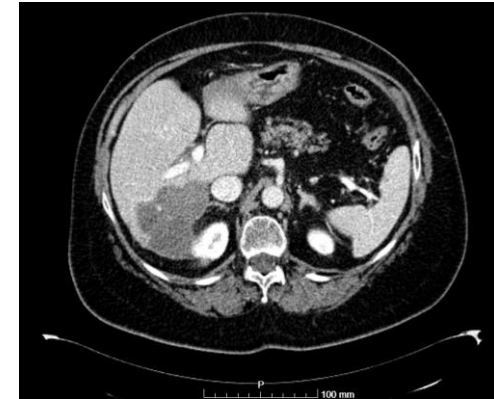
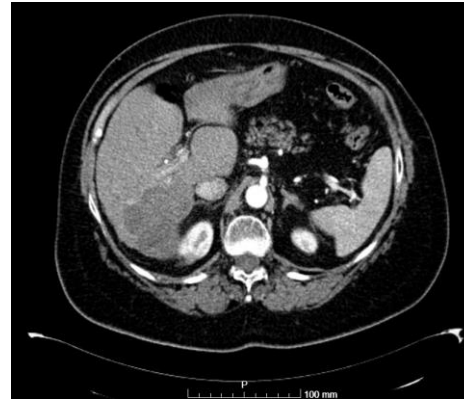
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TARE

TARE

Lenvatinib

Further reduction of the 7 x 6 x 6 cm hepatic lesion, which is almost entirely cleared, with only minimal residual impregnation at the periphery.



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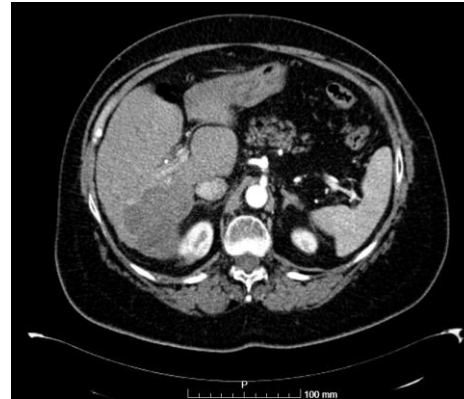
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TARE

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Further reduction of the 7 x 6 x 6 cm hepatic lesion, which is almost entirely cleared, with only minimal residual impregnation at the periphery.



MTD HBP: Surgery

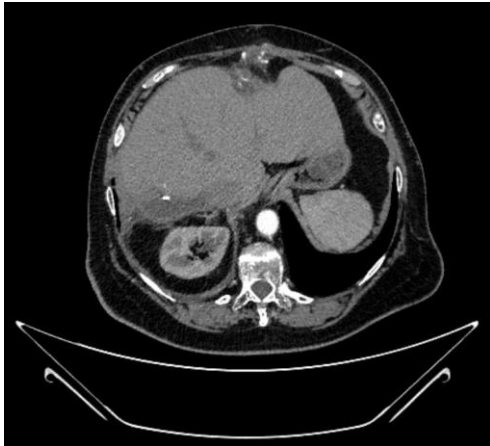
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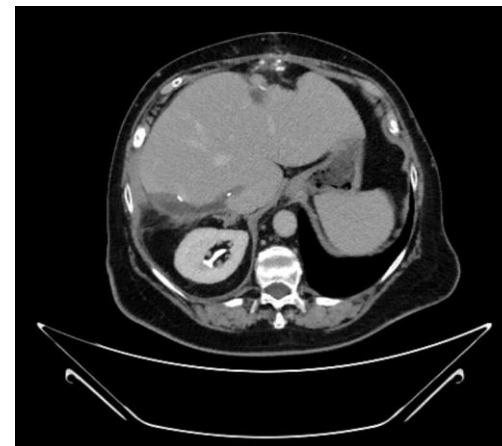
TARE



TARE



Lenvatinib



Surgery

No recurrence

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Advantages of MDT discussion

- **Patient prognosis**



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Advantages of MDT discussion

- **Patient prognosis**
- **Formation**
 - ✓ participation of **trainees** of all disciplines



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Advantages of MDT discussion

- **Patient prognosis**
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 - ✓ improvement of **overall knowledge** and more appropriate evaluation requests to colleagues



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- **Patient prognosis**
- **Formation**
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 - ✓ **retrospective discussion** of unsuccessful cases to understand how to improve our approach to the patient in **dedicated meetings**



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- **Research**



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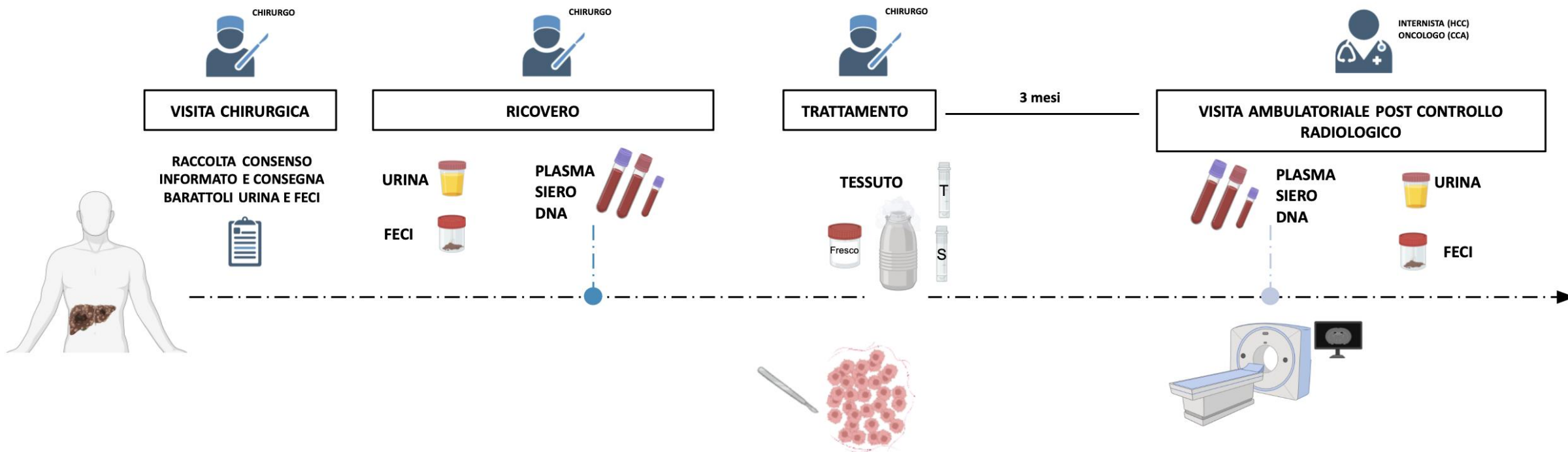
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Hepato-biliary tumor biobank

Collection of samples in patients with hepato-biliary tumors

PI Prof. Fabio Marra



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- **Costant participation of all disciplines**
- **Improvement in images management of radiological investigations performed elsewhere**

Acknowledgments

Multidisciplinary team members

Dr.ssa Ilenia Bartolini

Prof. Gian Luca Grazi
Prof. Giacomo Batignani
Prof. Antonio Taddei
Prof. Maria Novella Ringressi
Dr. Luca Moraldi
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Dr. Marco Brugia
Dr. Daniele Lavacchi
Dr. Daniele Rossini
Prof. Luca Messerini

Hepatology Fellows

Dr.ssa Arianna Toscano

Dr.ssa Lucia Ragozzino

Dr. Tancredi Vincenzo Li Cavoli

Dr. Armando Curto
Dr.ssa Valentina Adotti
Dr.ssa Martina Rosi
Dr.ssa Angelica Ingravallo
Dr.ssa Margherita Falcini
Dr. Filippo Biagi

Careggi University Hospital

All patients

A graphic for 'Patient Journey' featuring a central blue circle with a red and white target-like pattern, surrounded by three smaller red and white circles. The background is a dark blue gradient.

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