

# **Treatment: Ablation**

Thermal ablation of the liver



"Thermal ablation can completely destroy the tumour in 80% of cases" — Dr Louise MacDougall

#### What is thermal ablation?

Thermal ablation is a technique where heat is used to treat small tumours in the liver. A needle is placed directly into the tumour and heat, either in the form of radiofrequency or microwave, is used to destroy the cancerous cells within the tumour.

### Am I suitable for thermal ablation?

Not all tumours are suitable for ablation, generally it needs to be small in size and sometimes the position of a tumour in the liver means it is not possible to use ablation.

A patient also needs good liver function, as determined by liver blood tests, as there is a small risk of damage to the surrounding normal liver. In someone with a normal functioning liver this is not normally a problem, but if the liver function is impaired then this can make the liver function worse.

Additionally the patient must be generally fit enough to undergo a general anaesthetic.

# How is the procedure carried out?

The procedure is performed by a specialist doctor, an interventional radiologist, and imaging is used to ensure the correct site is located (normally ultrasound or CT).

The liver is accessed either through the skin (percutaneous) or using keyhole surgery (laparoscopically) and the procedure is performed under a general anaesthetic.

The procedure normally requires an overnight stay.

### How effective is ablation?

Thermal ablation can completely destroy the tumour in 80% of cases but sometimes can only partially treat the tumour and there is a risk that the cancer can recur.

In certain circumstances ablation can be repeated or combined with other treatments.









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## What are the risks of thermal ablation?

The risks of ablation are generally low with a risk of serious complications of less than 1%.

Patients may feel some discomfort at the site of the ablation and may have a mild fever or flu-like symptoms for several days.

There is a very small risk of damage to other structures and there is also the general risk that anyone undergoing a general anaesthetic faces.

Following an ablation a repeat scan is normally performed 4-8 weeks following the procedure to assess the effect.

# Personal experience:

If you have a personal experience that you would like to share, please get in touch with us, we would love to hear from you!

# Contact us:

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For more information, support and advice please visit:

www.livingwithlivercancer.com

If you have any questions or if you would like to display anything on the living with liver cancer website including artwork, poetry or personal experiences please email:

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