



Am I suitable for a liver transplant?

A transplant can be a potential cure for HCC in a select group of patients who also have cirrhosis; as the whole liver is replaced.

This can be an option for whom surgery might be considered but the severity of their liver disease means that surgery is not an option.

The size and number of tumours needs to be under a certain criteria and the patient must be generally fit enough to withstand a large operation.

What is a liver transplant assessment?

If the team is considering transplantation then the patient will need to be referred to a liver transplant centre who, if in agreement, will go on to organize an assessment for suitability for transplantation.

The assessment varies slightly from centre to centre; in some centres this is done as an outpatient on a single day whereas in some centres the assessment can last several days.

The assessment will include investigations to assess the patients liver function and tumour burden along with an assessment of the patients general health including heart and lungs.

How long will I wait for a transplant?

If the transplant assessment team believe a patient is appropriate for transplantation they are placed on the transplant waiting list.

The time a patient can wait on the waiting list is very variable, the average length of time awaiting an organ is 99 days in the UK but some patients can wait much longer than this.

What if my cancer progresses while I am waiting for a transplant?

Whilst on the waiting list a patient will undergo regular scans and clinic review.

In some instances a patient's cancer can progress whilst on the waiting list or their health can change making them no longer suitable for liver transplantation.

Can I have treatment while I wait for my liver transplant?

In certain cases it may be possible to offer other treatments such as TAE/TACE or ablation whilst on the waiting list.

This would be to try and slow progression enabling the patient to remain on the transplant list.

What are the risks of liver transplantation?

The biggest complication that can occur following a liver transplant is liver rejection and graft failure.

Liver rejection is when the body attacks the new liver and graft rejection occurs when the new liver is not working as it should.

Sometimes a leak or blockage can occur in one of the bile ducts. Bile is a fluid made by the liver to aid digestion. Bile passes from the liver into small tubes called bile ducts. A bile leak can lead to abdominal discomfort, fever and infection. Ultimately, a leak or blockage could result in graft failure.

It is also possible to have side-effects from the immuno-suppressant medication you take following a liver transplant. The side effects can include kidney problems and an increased risk of infections.



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For more information, support and advice
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If you have any questions or if you would
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