



Transcript Details

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HCC Surveillance: Evaluating Evolving Data & Impacts on Outcomes

Announcer:

Welcome to ReachMD. This medical industry feature, titled "HCC Surveillance: Evaluating Evolving Data & Impacts on Outcomes" is sponsored by Exact Sciences.

Here's Dr. Amit Singal.

Dr. Singal:

Hi, I'm Dr. Amit Singal, Professor of Internal Medicine and Chief of Hepatology at UT Southwestern Medical Center, and today, I'm going to be reviewing some of the emerging clinical data on the surveillance of hepatocellular carcinoma, or HCC for short.

A large, randomized, controlled trial from China among patients with chronic hepatitis B provided some of the highest quality data supporting HCC surveillance. In this trial, surveillance significantly improved early tumor detection and overall survival. Although we don't have a similar RCT among patients with cirrhosis, there have been several cohort studies that have shown an association between surveillance receipt and improved outcomes, including overall survival. There are evolving data on screening-related harms, although most data suggest that HCC surveillance is of high value and should be performed in at-risk patients including those with HBV infection or cirrhosis.

Of course, accurate tests with high sensitivity and specificity are needed for any cancer screening program to be beneficial. HCC surveillance is currently performed using ultrasound with or without AFP, and increasing data suggests that this strategy has variable sensitivity between centers, with ultrasound averaging a sensitivity less than 50% and missing one-third of early-stage HCC even when used with AFP. There has been increasing interest in alternatives such as abbreviated MRI protocols and blood-based biomarkers, which do appear more accurate for early-stage HCC detection.

While these tools are promising, they still require validation in phase III and phase IV cohort studies.

Unfortunately, HCC surveillance is underused in clinical practice.

According to a systematic review, nearly three-fourths of at-risk patients do not receive HCC surveillance. Survey studies have identified key patient- and provider-level barriers that must be addressed to increase HCC surveillance use in clinical practice.

Fortunately, available data suggests that in-reach and outreach interventions can significantly increase HCC surveillance.

To learn more, please visit the related content section to view my webinars.

I'm Dr. Amit Singal and thank you for joining me!

Announcer

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