New Trends in Treatment of Hilar Cholangiocarcionma.

Essay .
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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

﴿ وَقُلْ رَبِّ زِدْنِي عِلْمًا ﴾

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List of Abbreviations

ALT…….Alanine aminotransferase
AST**……...**Aspartate aminotransferase
BilIN……...Biliary intraepithelial neoplasia
CA……...Carcinogenic antigen
CBD……... Common bile duct
CEA……Carcinoembryonic antigen
CT ……Computerized tomography
DIA……... Digital image analysis
EBRT……..External beam irradiation therapy
ERCP…….Endoscopic retrograde cholangiopancreatography
ESMO……European Society of Medical Oncology
EUS ……...Endoscopic ultrasound
FISH……...Fluorescence in situ hybridization
FNA……Fine needle aspiration
HBV……..Hepatitis B virus
HCV……..Hepatitis C virus
HC……..Hilar cholangiocarcinoma
IDUS…….Intraductal ultrasound
IMRT……Intensity modulated radiation therapy
MHA……..Middle hepatic artery
MRCP……... Magnetic resonance cholangiopancreatography
MRI……Magnetic resonance imaging
NCCN……National Comprehensive Cancer Network
OLT……Orthotopic liver transplantation
PDT……..Photodynamic therapy
PET…….Positron emission tomography
PSC……..Primary sclerosing cholangitis
PVA……..Portal vein arterialization
PVE……portal vein embolization
PVR…….portal vein resection
RT……Radiation therapy
R0……..Radical resection with a microscopically negative margin
SMA…….Superior mesenteric artery
THC……Transhepatic cholangiography
UP…….umbilical portion
US…….. ultrasound

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Introduction

Cholangiocarcinomas arise from the epithelial cells of the intrahepatic and extrahepatic bile ducts. Although these cancers are rare, they are highly lethal because most are locally advanced at presentation. Cholangiocarcinoma has been used to refer to bile duct cancers arising in the intrahepatic, perihilar, or distal (extrahepatic) biliary tree, exclusive of the gallbladder or ampulla of Vater. **(De Groen et al, 1999)**

Cholangiocarcinomas have an extremely poor prognosis, with an average five-year survival rate of 5 to 10 percent. Surgery provides the only possibility for a cure. Distal cholangiocarcinomas have the highest resectability rates while proximal (both intrahepatic and perihilar) tumors have the lowest. In one large series, the resectability rates for distal, intrahepatic, and perihilar lesions were 91, 60, and 56 percent, respectively**. (Nakeeb et al, 1996)**

Substantial progress has been made in curative resection for perihilar cholangiocarcinomas. In selected series, five-year survival rates are between 20 and 50 percent, with the best results reported from Japan. (Hidalgo **et al, 2008)**.

Cholangiocarcinomas usually become symptomatic when the tumor obstructs the biliary drainage system, causing painless jaundice. Common symptoms include pruritus (66 percent), abdominal pain (30 to 50 percent), and weight loss (30 to 50 percent), and fever (up to 20 percent). The pain is generally described as a constant dull ache in the right upper quadrant. Cholangitis is an unusual presentation. (**Nakeeb et al, 1996).**