

Transcatheter arterial embolization (TAE) combined with recombinant adeno-viral human p53 gene in treatment of patients with unresectable hepatocellular carcinoma (HCC).

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Abstract:

**Background:** To evaluate the response rate and safety of TAE combined with rAd-p53 in treatment of unresectable HCC. **Methods:** Patients with unresectable HCC affecting one lobe, and with Child-Pugh score A or B, was treated by TAE combined with rAd-p53. The tumor artery was embolized using Gelatin sponge particles (GSPs) with a diameter of 350–560  $\mu\text{m}$ , which degrade in 14 days. The  $1-4 \times 10^{12}$  rAd-p53 viral particles (VP) diluted in 10 ml of saline solution was mixed with GSPs. The study endpoints were liver function, adverse effects, and response rate. **Results:** Fifteen patients received 1–2 times of TAE plus rAd-p53 in two months. After 3–5 days of treatment, CT scan showed decreased tumor density in all these cases and gas formation inside of tumor in 6 cases. Three months after the first time of treatment, CT scan showed three cases achieved a complete response (CR), nine partial response (PR) and three stable disease (SD). The response rate was 80%. The average reduction in tumor diameter was 72.5%. Liver function restored to normal level in 7–10 days after treatment. Fever was observed in all case. No severe complications, such as cholangitis or liver abscess were observed. **Conclusions:** GSPs embolization combined with rAdp53 was safe and effective in the treatment of unresectable HCC. Response rate is much higher than GSPs embolization alone, which was 48% based on historical data.