

Deciding to have a TACE procedure

Transcatheter Arterial Chemoembolization

What is TACE?

The TACE procedure is a treatment offered to patients with liver cancer. It is for patients when surgery is not an option. During this procedure chemotherapy is directly put into the liver, along with a substance to block the blood supply to the liver. This procedure is done to shrink the tumour in the liver and lessen the symptoms that you may be having related to the tumour growth.

Your surgeon has referred you to a doctor who is a Medical Oncologist. This type of doctor is a specialist in treatments for cancer, and can decide if the TACE procedure is an option for you.

The chemotherapy used is a drug called Doxorubicin. This drug can affect or damage the heart. If this procedure is an option, you will need to have blood work done as well as special tests to check your heart function. These tests include an electrocardiogram (ECG) and a heart echocardiogram. The echocardiogram is an ultrasound which shows images of the heart.

If you and your doctor decide that this procedure is an option for you, your doctor will make the arrangements. You will be contacted about the date and time of the procedure as well as how to safely prepare for it.

Where will I have this procedure?

You will have this procedure in Diagnostic Imaging at the Juravinski Hospital. The procedure is done by a doctor called an Interventional Radiologist.

You will be admitted to the hospital the day of the procedure. Expect to stay in the hospital for about 3 to 7 days.

What should I expect during the procedure?

- The Interventional Radiology Team will talk with you before the procedure and answer any questions you may have. The procedure and recovery period takes about 4 to 6 hours.
- You may have a blood test to make sure that your blood is clotting normally.
- A nurse will put an IV (intravenous) in your hand or arm. Medication to help you relax, a mild sedative, will be given through the IV. You are not given a general anesthetic.
- You will need to lie flat and still. There is a nurse to help you.
- The skin and the deep tissues will be numbed (in the groin area) with medicine so you will feel pressure during the procedure, but not pain.
- The doctor inserts a needle through the artery in the groin and then a rubber catheter will be guided over the needle into the artery. The catheter is moved through the artery leading up to the liver where the tumour is located.
- During the procedure pictures are taken so the doctor can see the catheter. You should not feel anything while this is happening.
- Once the catheter is in the right spot, which is in the artery supplying the tumour, the doctor injects the chemotherapy into the catheter as well as tiny particles which help to block the supply of blood flow to the tumour.
- Once this is done, the catheter is removed. Pressure is applied to the needle area in the groin for several minutes to prevent bleeding and bruising.

What should I expect after the procedure?

You will go to a recovery area, where the nurses will watch you. You will need to stay in bed for a few hours. You will also need to keep your leg straight for 3 hours after the procedure.

The nurses will check your blood pressure, heart rate, and breathing. The nurses will also check your groin area for bleeding, swelling and pain. The nurse will give you pain medication if needed.

From the recovery room, you will be taken to your hospital bed. Plan to stay in the hospital for 3 to 7 days.

Risks

- There is a risk of infection from the dying tumour cells, and possible side effects from the chemotherapy including pain, nausea and flu-like symptoms.
- Bruising in the groin area.
- Bleeding, damage to the artery
- Allergy to the contrast. The contrast is the dye used which allows the doctor to see the catheter as it moves up the artery into the liver.

Blood thinners

- If you are on any blood thinners please contact the doctor who prescribes your blood thinners.
- If you are taking blood thinners a blood test needs to be done 2 to 5 days before the procedure.

Follow-up

- You will need to have a scan of your liver to see how the procedure worked. You will be called about this appointment.
- Your Primary Team will inform you of your next clinic visit.