

Metastatic Liver (Cancer)

Liver metastases occurs when cancerous tumors spread to the liver from another part of the body. These tumors often appear shortly after the primary tumor develops, or months or years later.



The liver is largest organ inside our body. It's located below the right lung and divided into two lobes (right and left). Most liver metastases start as cancer in colon or rectum. Nearly 70% of patients with colorectal cancer develop liver metastases. This happens in part because blood from intestines is connected directly to liver through the portal vein. Although much less common, liver metastases can start from breast, esophageal, stomach, pancreatic, lung, kidney or skin cancer.

Metastatic Liver, Path of Progression

The progression of metastatic liver is quite severe and abrupt, so treatment must commence as soon as possible after first diagnosed:

- Jaundice: enlarged liver will block flow of bile, causing seepage into bloodstream, resulting in dark urine, pale stools and itchy skin.
- Delirium affects sleep patterns, with difficulty concentrating, with possible amnesia leading to possible coma.
- Severe abdominal pain- tumor cells begin to expand throughout surrounding area destroying healthy tissue. This leads to massive organ damage. Patient will have a very swollen abdomen, with incredibly hardened and enlarged liver resulting in severe pain. Morphine is usually prescribed.
- Ascites- Fluid will begin to build inside abdomen area. Ascites is excess fluid with floating cancer cells with current standard of care requiring draining fluid through abdomen wall.
- Systemic Organ malfunctions:
 - Kidney begin to fail causing weight gain, swelling and less urine output.
 - Lungs fail making it more complicated and difficult to breath. Lungs begin to fill with fluid.
 - Confusion from the toxicity affects the brain causing mood swings, decision-making, drowsiness, sluggish speech.
 - Overall liver failure causing nausea, vomiting, fatigue, loss of appetite, and easy bleeding

Conventional Standard of Care Treatment Options

Treatments are based upon several determining factors; stage of cancer, primary cancers and other metastases, age of patient, coexisting diseases, etc. For many, treatments are intended to relieve pain when absent the likelihood of a cure, with some treatments designed to slow tumor growth or more spreading of the primary cancer.

Most treatments are systemic, wherein chemo medicines are given orally or IV to promote circulation throughout the body. Other more common treatments may include 1) biologics, 2) radiation, 3) conventional surgery, or some combination thereof. Few liver cancers undergo surgery because of late stage. However, when confined to a single lobe and no cirrhosis, jaundice, or ascites, is present, surgery is a possibility. A



newer technique that is reported to be safe and effective is laparoscopic radiofrequency ablation, wherein a special needle electrode is placed in the tumor under Ct guidance. A radiofrequency current is then passed through, heating the tumor and killing the cancer cells. RFA is used to treat tumors that too small or inaccessible for conventional surgery.

Liver Transplantation

Removal of the entire liver and liver transplantation can be used to treat liver cancer. However, there is a high risk of tumor recurrence and metastases after transplantation. In addition, most patients have cancer that is too far advanced at the time of diagnosis to benefit from liver transplantation.

Novel Therapeutic Options

- Hepatic artery embolization with chemotherapy (chemoembolization).
- Alcohol ablation via ultrasound-guided percutaneous injection.
- Ultrasound-guided cryoablation.
- Immunotherapy with monoclonal antibodies tagged with cytotoxic agents.
- Gene therapy with retroviral vectors containing genes expressing cytotoxic agents.

If a metastatic cancer cure is impossible, then the goal is to help patient live as well as possible and for as long as possible. Getting more specific, the goal can be broken down into four parts:

- Fewest effects from the cancer
- Enhanced quality of life
- Fewest effects from the treatment
- Enhanced quantity of life

If the cancer stops responding to treatment, many therapies can ease the side-effects and improve quality of life. Palliative treatments, which may be the same treatments used to treat cancer, aim to help relieve the symptoms and side effects.

Conexus Intratumoral Debulking

Integrative Cancer Centers of America physicians provide personalized treatment programs and advanced technologies developed to destroy (debulk) advanced and complex cancers (often deem inoperable), followed with integrative oncology services formulated to improve overall quality of life. We offer specialized treatment programs for cancers that have spread to liver and other areas.

Conexus is an early 2016 introduced cancer treatment protocol developed for decreasing tumor mass, and contemporaneous enhancing of patient's immunological powers for maximizing suppression of metastases. Moreover, Conexus treatment is not restricted by size of tumor, tumor frequency, or its location(s) within the liver, which is often not the case when using conventional standards of care.

A second point is ICCA's ability to treat (debulk) all solid tumor with minimal invasiveness and minimal collateral tissue damage if any, even when the tumor is deemed "inoperable" by most well-intended



comprehensive cancer centers, regardless of locale! Why? Because Mexico is one of a handful of countries in the world that allows licensed physicians to adhere to a very special relationship that exists between patient and doctor, thus encouraging the treating physician to use whatever means is necessary to help facilitate favorable patient outcome and recovery.

Third, our physicians very often formulate at our own compound pharmacy, medicines and/or protocols unique to that particular cancer; and/or employ vast array of cancer fighting “tools” generally unavailable to US/Canada physicians.

Lastly, ICCA physicians offer safe and effective cancer treatments that have undergone rigorous clinical studies and trials undertaken such notable medical meccas as Germany, Cuba (outstanding cancer regiments), UK, South Korea, China, and of course America, among many other industrialized nations.