

England Chinese Cancer Awareness Series
英格蘭華人認識癌症系列



Primary Liver Cancer
原發性肝癌

全國華人保健中心
CHINESE NATIONAL
HEALTHY LIVING CENTRE

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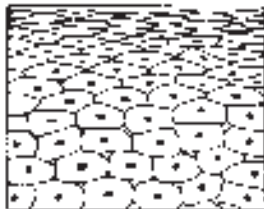
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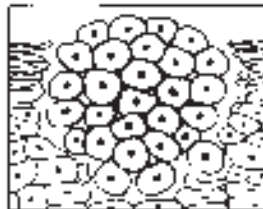
What is cancer?

The organs and tissues of the body are made up of tiny building blocks called cells. Cancer is a disease of these cells. It's important to realise that cancer is not a single disease with a single cause and a single type of treatment. There are more than 200 different kinds of cancer, each with its own name and treatment.

Although cells in different parts of the body may look and work differently, most repair and reproduce themselves in the same way. Normally, cells divide in an orderly and controlled manner. If for some reason the process gets out of control, the cells carry on dividing, and developing into a lump which is called a **tumour**. Tumours can be either **benign** or **malignant**. Cancer is the name given to a malignant tumour. Doctors can tell if a tumour is benign or malignant by examining a small sample of cells under a microscope. This is called a biopsy.



Normal cells



Cells forming a tumour

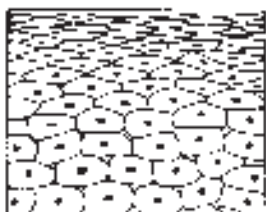
In a **benign tumour** the cells don't spread to other parts of the body and so are not cancerous. However, they may carry on growing at the original site, and might cause a problem by pressing on the surrounding organs.

A **malignant tumour** consists of cancer cells that have the ability to spread beyond the original area. If the tumour is left untreated, it may spread into and destroy surrounding tissue. Sometimes cells break away from the original (primary) cancer. They may spread to other organs in the body through the bloodstream or lymphatic system. The lymphatic system is part of the immune system - the body's natural defence against infection and disease. It's a complex system made up of organs, such as bone marrow, the thymus, the spleen, and lymph nodes. The lymph nodes throughout the body are connected by a network of tiny lymphatic tubes (ducts). When the cancer cells reach a new area they may go on dividing and form a new tumour. This is known as a secondary cancer or a metastasis.

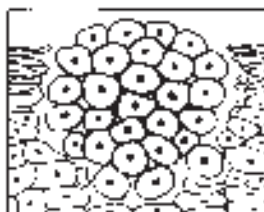
什麼是癌症？

身體的器官和組織是由微小的細胞組成。癌症是由這些細胞病變而來。很重要的一點，我們需要意識到，癌症不是只有一種療法的單一疾病，癌症的種類超過200種，每種癌症各自有其名稱和治療方法。

雖然身體不同部位的細胞可能樣貌和作用都不同，但是大部分都以同一種方式修復和再造。通常，細胞分裂的過程是有序和受控制的，如果因為某些原因，這個過程失控，細胞不斷分裂並發展成為塊狀，就會形成**腫瘤**。腫瘤可能是良性或是惡性的，惡性的腫瘤被命名為癌症。醫生會根據檢查顯微鏡下細胞的樣本，來判斷一個腫瘤是屬於**良性**還是**惡性**。這叫做活組織切片檢查。



正常的細胞



形成了腫瘤的細胞

良性腫瘤的細胞不會擴散到身體的其它部分，所以不會發生癌變。但是如果它們持續在原部位生長，則可能會因為腫瘤增大而壓迫周圍器官，引發問題。

惡性腫瘤則帶有癌細胞，有能力擴散到原發部位以外的組織。如果腫瘤不被治療，它可能會擴散並破壞周圍的組織。有時癌細胞更會從原發性癌中脫離出來，隨着血液或淋巴系統擴散到身體其它器官。淋巴系統是免疫系統的一部分 - 是身體對付感染和疾病的自然防禦。它是一個由器官，例如骨髓、胸腺、脾和淋巴結所組成的複雜系統。全身的淋巴結由微小的淋巴管網絡連接。當癌細胞到達一個新的區域時，它們可能會持續分裂並形成一個新的腫瘤。這就叫做**繼發性癌症**或**腫瘤轉移**。

The liver

The liver is the largest organ in the body. It is surrounded by a fibrous capsule and is divided into two lobes – left and right. It is in the upper part of the abdomen on the right-hand side of the body and is surrounded and protected from injury by the lower ribs.

The liver is an extremely important organ that has many functions. These include regulating sugars and fats in the body so that they can be used for energy. It also produces proteins that circulate in the blood. Some of the proteins help the blood to clot and prevent excessive bleeding, while others are essential for maintaining the balance of fluid in the body. The liver also destroys harmful substances such as alcohol and drugs, and also gets rid of waste products. It does this by breaking down substances not used by the body so that they can be passed out in the urine or stools (bowel motions).

The liver stores glucose and vitamins so that they can be used by the body when needed. It also produces bile, which breaks down the fats in food so that they can be absorbed by the bowel (intestine). The liver is connected to the first part of the small bowel (duodenum) by a tube called the bile duct. This duct takes the bile produced by the liver to the intestine. The liver is very good at repairing itself. It can function normally with only a small part of it in working order.



The liver and surrounding organs

肝臟

肝臟是身體中最大的器官。它被纖維囊所包圍，由兩個肝葉組成 - 左葉和右葉，位於身體腹部右上端，被下肋骨包圍及保護以免受到傷害。

肝臟具有很多的功能，是極為重要的器官，包括調節身體中的糖和脂肪，從而對身體提供能量。它同時能合成血液循環中的蛋白質，其中的一些蛋白質幫助血液凝結，防止流血過多；另外一些則是保持體液平衡的要素。此外，肝臟分解例如酒精和藥品之類的有害的物質，並清除體內垃圾產物。肝臟同時將身體無用的物質分解，讓它們能夠隨着尿液或糞便排出。

肝臟儲存葡萄糖和維他命，供身體有需要時之用。肝臟同時也分泌膽汁，膽汁則用來分解食物中的脂肪，使它們能夠被腸道吸收。肝臟通過一條叫做膽管的管道與小腸的前端（十二指腸）連接，膽管把肝臟分泌的膽汁輸送到腸道。肝臟有很好的自我修復能力，即使只有一小部分工作正常仍能正常地運作。



肝臟及周圍的器官

Primary liver cancer

Cancerous (malignant) tumours of the liver can be primary or secondary cancer. Primary cancer is cancer that has started in the liver, while secondary/metastatic cancer started in another part of the body and has spread to the liver. This booklet is about primary cancer of the liver.

Primary liver cancer is quite rare in the UK and the rest of the Western world, but the number of people developing it is increasing. Around 2,800 people in the UK are diagnosed with this type of cancer each year. In other parts of the world, such as some parts of Africa and Asia, it's one of the most common cancers. It is twice as common in men as in women.

Types of primary liver cancer

There are different types of primary liver cancer. They are usually named after the types of cells from which it is thought the cancer has developed. Knowing the exact type of cancer helps the doctors to decide on the most appropriate treatment.

Hepatocellular carcinoma (HCC)

Hepatocellular carcinoma (HCC) is the main type of primary liver cancer and approximately 85 out of every 100 (85%) primary liver cancers are this type. It's sometimes known as **hepatoma** and arises in the main cells of the liver called hepatocytes. HCC is usually confined to the liver, although occasionally it spreads to other organs. It's more common in men and occurs mostly in people with a type of liver disease called cirrhosis.

There is a rarer sub-type of HCC called **fibrolamellar HCC**, which usually occurs in younger women and isn't related to previous liver disease.

Cholangiocarcinoma

This type of cancer starts in the cells that line the bile duct and is sometimes called bile duct cancer. Cholangiocarcinoma is more common in women.

Rarer types of liver cancer

There are two rare types of primary liver cancer:

- **Angiosarcomas** are very rare. They develop in the blood vessels of the liver and are sometimes known as **haemangiosarcomas**. They tend to occur in people over 70.

原發性肝癌

肝臟部位的癌性(惡性)腫瘤可能是原發性或繼發性肝癌。原發性肝癌是從肝臟開始長出的癌，繼發性/轉移性肝癌是從身體的其它部位開始生長並擴散到肝臟的癌。本手冊只介紹原發性肝癌的相關內容。

原發性肝癌在英國和其他西方國家較少見，但患者的人數卻在增加中。英國每年大約有2800人被診斷為肝癌。全球其它地區，例如部份非洲和亞洲地區，肝癌是最普遍的癌症之一。此外，男性患者的數目是女性患者的兩倍。

原發性肝癌的種類

原發性肝癌有不同的種類，通常按照癌細胞的種類命名。明確知道肝癌的種類有助醫生決定最適合的治療方法。

肝細胞癌(HCC)

肝細胞癌(HCC)是一種主要的原發性肝癌，大約100個原發性肝癌患者中有85個(85%)屬於這種類型。肝細胞癌有時也稱肝細胞瘤，是從肝臟的主要細胞(肝細胞)開始發病的。肝細胞癌雖然偶爾會出現擴散到其它器官的情況，但通常只在肝臟發病。此類肝癌在男性中較常見，並且大部分出現在有肝硬化的患者中。

肝細胞癌另外有一種更罕見的分支類型癌症叫**纖維板層肝癌**，這種癌症通常在年輕的女性中發病較多，但卻跟以前患有的肝臟疾病無關。

膽管細胞癌

這種癌症開始出現於膽管的細胞內，所以有時也叫膽管癌。膽管細胞癌在女性中較常見。

較為罕見的肝癌種類

以下有兩種較為罕見的原發性肝癌：

- **肝臟血管肉瘤**是非常罕見的一種原發性肝癌。它從肝臟的血管開始發展，也叫**肝臟血管瘤**。患者趨向於70歲以上的老人。

- **Hepatoblastomas** are very rare and usually affect young children under three.

The information here is about hepatocellular carcinoma.

Benign liver tumours

Some primary tumours in the liver are non-cancerous (benign) and do not spread to other parts of the body. They are usually small and may cause no symptoms. They are often discovered by chance during operations or investigations for other conditions. Unless they are causing symptoms they do not usually need to be removed.

Risk factors and causes

The exact cause of primary liver cancer isn't known. Like other cancers, it isn't infectious and can't be passed on to other people. Some factors may slightly increase a person's risk of developing primary liver cancer and these are described here.

Cirrhosis

This is scarring throughout the liver which can be due to a variety of causes. These include infection, heavy alcohol drinking over a long period of time, and a few rare conditions, such as haemochromatosis and primary biliary cirrhosis. Cirrhosis of the liver increases the risk of developing hepatocellular carcinoma (HCC), and the risk varies depending on the cause of the cirrhosis. However, only a small number of people with cirrhosis of the liver develop primary liver cancer.

Infection

Infection with either the hepatitis B or hepatitis C virus can lead to liver cancer and can also cause cirrhosis, which increases the risk of HCC. People with hepatitis B or C should avoid excessive amounts of alcohol, as this can further increase their risk of primary liver cancer.

Inherited medical conditions

Primary liver cancer is not caused by an inherited faulty gene, and so members of your family are highly unlikely to be at an increased risk of developing it because you have it.

However, people who have an inherited condition, such as haemochromatosis

- 肝胚細胞瘤也是非常罕見的癌症，患者通常是3歲以下的兒童。

本手冊只提供有關肝細胞癌的內容。

良性的肝臟腫瘤

一些肝臟部位的原發性腫瘤是沒有癌性（良性）的，不會擴散到身體的其它部位。它們通常很小且不會引發症狀，一般是無意中於其它手術或檢查中被發現出來。除非它們引發症狀，通常都不需要切除。

風險因素和病因

引起原發性肝癌的確切原因目前仍未有定論。跟其它癌症類似，肝癌是沒有傳染性的，不會傳染給別人。以下將會介紹一些可能會稍為增加人們罹患原發性肝癌風險的因素。

肝硬化

肝硬化是肝細胞纖維化的疾病，其成因有多方面，包括感染、長期過量飲酒，和一些罕見的疾病，例如血色素沉著症和原發性膽汁性肝硬化。肝硬化增加形成肝細胞癌的風險，風險的大小取決於肝硬化的病因。然而，只有一小部分肝硬化患者會衍生出原發性肝癌。

感染

感染乙型或丙型肝炎病毒可能會導致肝癌，同時亦可能引起肝硬化，從而增加形成肝細胞癌的風險。乙型或丙型肝炎病人應該避免飲酒過度，因為這會進一步增加原發性肝癌的風險。

遺傳病的情況

原發性肝癌不是由遺傳基因的缺陷引起的，所以家庭成員不會因為其中一人患病而增加患病風險。

然而，有遺傳疾病的人，例如有血色素沉著症（導致身體內過量的

(which causes excess deposits of iron in the body), or tyrosinaemia, (where people have too much of an amino acid called tyrosine in their blood), have a higher chance of developing cirrhosis and HCC.

Aflatoxin

In Africa and Asia a poison called aflatoxin is a major cause of HCC. The poison is found in mouldy peanuts, wheat, soya and grain.

Other risk factors

People who take anabolic steroids over a long period of time have a slightly increased risk of developing primary liver cancer. Anabolic steroids are mainly used by body-builders as they can increase muscle bulk.

Signs and symptoms

In the early stages of primary liver cancer there are often no symptoms, or symptoms may be vague. If you have any symptoms that could be caused by liver cancer it's important to have them checked by your GP, but remember they are common to many other conditions and most people with these symptoms won't have cancer.

Jaundice

Jaundice can occur if the liver isn't working properly because of cancer or an underlying disease such as cirrhosis. It can also happen if the bile duct becomes blocked by cancer, which causes bile produced by the liver to flow back into the bloodstream. Jaundice makes the skin and the whites of the eyes go yellow and may make the skin very itchy. Other signs of jaundice are dark-coloured urine and pale stools (bowel motions).

Ascites

Sometimes fluid builds up in the abdomen and causes swelling known as ascites. There may be different possible reasons for this to happen.

If the liver is affected by cancer cells, this can cause an increase in pressure in the veins that lead into the liver and sometimes the main veins can become blocked by a clot (thrombosis). Fluid from the abdomen can't pass quickly enough through the liver, so it starts to collect in the abdomen.

- If the liver is damaged, it may produce less blood protein. This can upset the body's fluid balance, which causes fluid to build up in the body

鐵質沉積)，或酪氨酸血症(病人血液中有過多名為酪氨酸的氨基酸)，則會較高機會引發肝硬化和肝細胞癌。

黃曲霉毒素

在非洲和亞洲，有一種叫黃曲霉的毒素是形成肝細胞癌的主要肇因，這種毒素出現在發黴的花生、小麥、黃豆和穀物中。

其他風險因素

長期服用合成代謝類固醇的人會稍微增加罹患原發性肝癌的機會。合成代謝類固醇主要被健身人士拿來增加肌肉用。

症狀

原發性肝癌的早期通常沒有症狀，或者症狀並不明顯。如果你發現有任何可能會引發肝癌形成的症狀出現，請盡快向家庭醫生求診及給你做檢查，這是致為重要的。但是請記住很多疾病也有類似的症狀，大部分有這些症狀的人都不是有癌症的。

黃疸

如果肝臟因為癌症或其它疾病例如肝硬化而運作不良，黃疸則會出現。黃疸的出現是由於膽管被囊腫堵塞，從而令肝臟分泌的膽汁無法經膽管排泄而回流到血液中。黃疸出現時可表現為皮膚和眼白變黃，並且可能引起皮膚瘙癢。黃疸的其它症狀可能是尿液呈深色和糞便灰白。

腹水

有時體液在腹部堆積引起腫脹，這叫做腹水。引起腹水有不同可能的原因。

如果肝臟被癌細胞感染，這會增加對通向肝臟的靜脈血管的壓迫，主要的靜脈有時也會被凝塊堵塞(血栓)。腹部的體液不能夠及時地通過肝臟排泄，就開始在腹部堆積。

- 如果肝臟受損，它可能合成較少的血液蛋白，這會影響體液的

tissues, including the abdomen.

- Cancer cells may block the lymphatic system. The lymphatic system is a network of fine channels that runs throughout the body. One of its functions is to drain excess fluid, which is eventually passed out of the body in the urine. If some of these channels are blocked, the system can't drain efficiently and fluid may build up.
- If cancer cells have spread to the lining of the abdomen, they can irritate it and cause fluid to build up.

If ascites develops, a tube can be put into the abdomen to drain the fluid away.

Whatever the cause, jaundice or ascites will always indicate a condition that needs medical attention and should not be ignored. Always have these symptoms checked by your GP.

Pain

People sometimes notice a vague discomfort in the upper abdomen that may become painful. This is due to enlargement of the liver. Pain can sometimes also be felt in the right shoulder. This is known as **referred pain** and is due to an enlarged liver stimulating the nerves beneath the diaphragm (the sheet of muscle under the lungs) which are connected to nerves in the right shoulder.

Other symptoms

Vague symptoms that might occur include:

- loss of appetite
- weight loss
- feeling sick (nausea)
- weakness and tiredness (lethargy).

Some people may also develop a high temperature and feel shivery.

How it is diagnosed

Usually, you begin by seeing your family doctor (GP) who will examine you and arrange any tests that may be necessary. Your doctor may arrange some blood tests to check your general health.

平衡，從而導致體液在身體組織中堆積，包括在腹腔內。

- 癌細胞可能會堵塞淋巴系統。淋巴系統是分佈於全身細管的網絡，它其中的一個作用是通過排尿來排出多餘的體液。如果有些細管被堵塞，這個系統就不能夠有效排出體液而造成堆積。
- 如果癌細胞擴散到腹壁，可能會刺激腹壁及造成體液堆積。

腹水一旦形成，可以在腹壁插入一條導管排出體液。

無論什麼病因，黃疸或腹水都表示需要就醫，不能忽略。一有這些症狀便須讓你的家庭醫生幫你檢查。

疼痛

有時患者會發現上腹部隱約不適，也可能會變成疼痛，這是因為肝臟增大的關係。疼痛有時會出現在右邊的肩膀，這屬於牽涉性疼痛，因為增大的肝臟壓迫橫膈膜(肺部下方的隔膜)下方的神經，而這些神經跟右肩的神經相連。

其他症狀

一些不明顯的症狀可能包括：

- 食欲不振
- 體重下降
- 噁心(反胃)
- 虛弱和疲倦(昏睡)

有些人可能會發燒並覺得冷。

如何作出診斷

通常由看家庭醫生開始。家庭醫生將會對你做出診斷，以及安排任何有需要的檢查。你的家庭醫生可能會安排驗血來了解你一般的健康狀況。

If your GP isn't sure what the problem is, or thinks that cancer may be present, you will be referred to hospital for specialist advice. If your GP suspects that you might have a cancer you should be seen at the hospital within two weeks.

At the hospital, the specialist will ask you about your symptoms and your general health. You'll also be asked if you have any other health problems. The doctor will examine you by feeling your abdomen (tummy area). You may have a blood test and a chest x-ray to check your general health.

Several tests may be used to diagnose primary liver cancer. The tests may also show the stage of the cancer (see pages 20 & 22). These tests help your doctor to know the best way to treat the cancer. It can help to have a friend or relative with you when you go for any tests or to get your results.

Blood tests

As well as blood tests to check your general health you will have other blood tests, known as liver function tests (LFTs) to see how well your liver is working.

Another blood test checks the amount of a chemical called **alphafetoprotein** (AFP) in your blood. The amount of AFP in the blood can be higher than normal in people with hepatocellular cancer – HCC. The doctors may monitor the level of AFP before and after treatment of HCC as it can show how well treatment is working.

Liver ultrasound scan

A liver ultrasound scan uses sound waves to make up a picture of the liver. It's done in the hospital scanning department. You'll be asked not to eat anything for at least four hours before your appointment. This is a painless test and only takes a few minutes.

Abdominal CT (computerised tomography) scan

This is a sophisticated type of x-ray which builds up a three-dimensional picture of the inside of the body. The scan is painless but takes longer than an x-ray (approximately 10 – 30 minutes). It may be used to identify the exact site of the tumour, or to check for any spread of the cancer. Most people who have a CT scan are given a drink, or injection, that allows particular areas to be seen more clearly. Before having the injection or drink, it is important to tell the person doing this test if you are allergic to iodine or have asthma. You will probably be able to go home shortly after the scan is over.

如果你的家庭醫生不能確定出現了什麼問題，或者覺得有可能是癌症，他將會轉介你到醫院的專科醫生去尋求建議。如果家庭醫生懷疑你可能患有癌症，你應該在兩周內得到醫院的預約。

在醫院，專科醫生將會詢問你的症狀和一般健康狀況，你也會被問及你的其他健康問題。醫生會按壓檢查你的腹部，並安排驗血和胸部X光來診斷你的健康狀況。

診斷原發性肝癌可能需要幾項檢查。這些檢查能夠診斷出癌症的階段（參看21和22頁）。這些檢查幫助醫生找出最適合的治療方法。在做檢查和領取結果時，有朋友或親人陪同將會有幫助。

驗血

除了驗血檢查一般健康狀況之外，你亦會進行另外一些驗血測試，名為肝功能測試 (LFTs)，是用來檢查你肝臟的功能是否健康。

此外，還有一種血液檢驗是用來檢查血液中的一種化學成分的含量，名為 α -胎甲球蛋白 (AFP)。肝細胞癌患者的AFP在血液中的含量可能比正常人要高。醫生可能會觀察治療前後的AFP值來確定治療方法的有效性。

肝臟超聲波掃描

肝臟超聲波掃描是用超聲波來組成肝臟的圖像。檢查在醫院的掃描部門進行，你會被要求至少在掃描前4個小時不能進食。這個檢查是完全無痛的，並且只需要幾分鐘時間。

腹部CT(電腦斷層)掃描

這是一種精密的X光掃描，可以造出體內三維立體圖像。這種掃描是無痛的，但比一般的X光掃描時間要長(大約要10 - 15分鐘)。這種檢查被用來確定腫瘤的具體位置或檢查癌是否有擴散的情況。大部分做電腦斷層攝影掃描之前都會服用藥水或作注射，從而能夠讓特定的部位被看得更清楚。但緊記一件重要的事情，就是在注射和服用藥水之前，先告訴為你做檢查的人員你是否對碘有敏感或患有哮喘。你可能在掃描後不久就可以回家。

MRI (magnetic resonance imaging) scan

This test is similar to a CT scan but uses magnetism instead of X-rays to build up a detailed picture of areas of your body.

Before the scan you may be asked to complete and sign a checklist. This is to make sure that it's safe for you to have an MRI scan (because the scanner is a powerful magnet). The checklist asks about any metal implants you may have, for example a pacemaker, surgical clips, bone pins etc. You should also tell your doctor if you have ever worked with metal or in the metal industry (as very tiny fragments of metal can sometimes lodge in the body). If you do have any metal in your body it's likely that you won't be able to have an MRI scan. In this situation another type of scan can be used.

Before having the scan, you'll be asked to remove any metal belongings including jewellery. Some people are given an injection of dye into a vein in the arm, which doesn't usually cause discomfort. This is called a contrast medium and can help the images from the scan to show up more clearly. During the test you will be asked to lie very still on a couch inside a long cylinder (tube) for about 30 minutes. It is painless but can be slightly uncomfortable, and some people feel a bit claustrophobic during the scan. It's also noisy, but you'll be given earplugs or headphones. You will be able to hear, and speak to, the person operating the scanner.

Liver biopsy

The only way to be sure of the diagnosis is to take some cells or a small piece of tissue from the affected area to look at under a microscope. This is called a biopsy. A biopsy isn't always done and sometimes the diagnosis is confirmed after an operation to remove the tumour (see page 26).

After the area has been numbed using a local anaesthetic injection, a fine needle is passed into the tumour through the skin. CT or ultrasound may be used at the same time, to make sure that the biopsy is taken from the right place. You will need to stay in hospital for a couple of hours after a liver biopsy, and possibly overnight. This is because there is a risk of bleeding afterwards.

If your cancer hasn't already spread, and if there is a chance your tumour can be removed, you may not have a biopsy. This is because there is a small risk that the cancer can spread along the pathway of the needle when the biopsy needle is removed.

磁共振顯像掃描(俗稱MRI)

這種掃描跟CT掃描類似，不同的是它利用磁力來代替X光組成一系列身體內部的切面圖。

掃描之前，你會被要求填寫一張清單並簽名，這是為了確保對你進行磁共振顯像掃描是安全的(因為掃描儀是強力的磁鐵)。清單會詢問你體內是否有植入金屬，例如心律調整器、外科植入固定器、骨針等等。你應該甚至告訴醫生，你是否曾經在工作中使用金屬或者在金屬工業工作(因為非常小的金屬碎片可能殘留在身體中)。如果你的身體裏有金屬，將不能夠進行磁共振顯像掃描。這種情況下，你會被安排做其它的掃描。

掃描之前，你會被要求除去身上任何金屬物品，包括首飾。有些人會在手臂的靜脈注射入染色劑，這一般不會引起不舒服。這個染色劑叫做對比媒介，是幫助掃描的圖像更清晰的顯示。掃描的過程中，你將會被要求躺在診治臺上不動，然後送入一個圓柱體(管道)儀器中大約30分鐘，整個過程是完全無痛的，但可能會不舒服，有些人會有幽閉的感覺。儀器的噪音也有點大，但你將被給予耳塞或耳機來降低噪音，你可以聆聽及講話，並可以跟操作掃描儀的工作人員交流。

肝臟活組織切片檢查

唯一能夠完全確診肝癌的方法是抽取一些細胞或一小片有病變的組織在顯微鏡下觀察。這個過程叫做活組織切片檢查。活組織切片檢查不是一定要做，有時只會在手術切除腫瘤之後用來確定腫瘤的性質(參見第27頁)。

在注射局部麻醉針之後，一根很細的針會通過皮膚穿刺到腫瘤。這個過程可能會在CT或超聲波掃描協助下同時進行，以確保活組織切片從正確的部位取得。在活組織切片檢查之後你將需要留院幾個小時，或可能要過一晚。這是因為檢查之後可能會有出血的風險。

如果你的癌症還沒有擴散，又如果你有機會可以切除腫瘤，你將不會進行活組織切片檢查。因為進行活組織切片檢查時存在一個很小的風險，就是癌細胞可能會在穿刺後隨着針的路徑擴散。

Laparoscopy

A laparoscopy is a small operation that allows the doctors to look at the liver and other internal organs in the area. It's done under a general anaesthetic and will mean a short stay in hospital. While you are under anaesthetic the doctor will make a small cut (incision) in the front of your abdomen and insert a thin tube containing a light and a camera (laparoscope). Using the laparoscope, the doctor is able to look at the liver and can take a small sample (biopsy) for examination under a microscope.

It will probably take several days for the results of your tests to be ready and a follow-up appointment will be made for you.

Further tests

If the tests described above show that you have primary liver cancer your doctor may need to do some further tests. These will tell the doctor more about the cancer and show whether it has begun to spread.

Hepatic angiogram

This test allows the doctors to see how the tumour is affecting the main blood vessels around the liver. A fine tube is inserted into an artery in your groin and a dye is injected through the tube. The dye circulates in the arteries to make them show up on x-ray. An angiogram is carried out in a room within the x-ray department.

Sometimes an MRI scan can be used to show up the blood vessels of the liver (which means that an angiogram will not be necessary).

Staging of primary liver cancer

The stage of a cancer is a term used to describe its size and whether it has spread beyond its original site. Once your doctor knows the type and stage of the cancer they can decide on the most appropriate treatment for you.

A commonly used staging system is described here.

Stage 1 The cancer is no bigger than 2cm in size and hasn't begun to spread to the blood vessels of the liver, nearby lymph nodes or other parts of the body.

Stage 2 The cancer hasn't begun to spread to the lymph nodes or other parts of

腹腔鏡檢查

腹腔鏡檢查是允許醫生檢查肝臟和腹腔內其他器官的小手術，它是在全身麻醉的狀態下進行，所以需要短暫留院。當你被麻醉之後，醫生會在你的腹部正面開一個小口，然後插入一條裝有燈和攝像機（腹腔鏡）的細管。這樣，醫生就可以看清你的肝臟，並取出組織的樣本（活組織切片）在顯微鏡下檢查。

檢查結果可能要在幾天之後才能拿到，你需要預約時間復診。

進一步檢查

如果以上的測試顯示你患有原發性肝癌，醫生可能需要做進一步檢查。這些檢查會讓醫生了解你的癌症病況，顯示癌症是否已經擴散。

肝動脈造影檢查

這個檢查允許醫生看清腫瘤是怎樣影響肝臟周圍主要血管的。一條細管會被插入到腹股溝的動脈，而一些染色劑將會透過這條細管注射入體內，讓染色劑在動脈中循環，令它們在X光中顯現出來。動脈造影檢查在醫院X光部門的一個房間內進行。

有時候磁共振掃描亦會用來檢查肝臟的血管（這意味肝動脈造影檢查就不須要了）。

原發性肝癌的分期

癌症的分期是用來描述癌的大小和是否擴散到原發部位以外的專有名詞。當醫生知道病人所患的癌症種類和分期，這將有助他們決定最適合的治療的方法。

以下是普遍應用的分期劃分方法：

第一期 癌的大小不超過2厘米(¾英寸)並且沒有開始擴散到肝臟的血管、淋巴結或身體其它部位。

第二期 癌沒有擴散到淋巴結或身體的其它部位，但大小超過

the body, but is bigger than 2cm in size, **or** the cancer is affecting the blood vessels in the liver, **or** there are multiple tumours in one of the lobes of the liver – each tumour is no bigger than 2cm in size.

Stage 3 This stage is divided in two:

- **Stage 3A** The cancer is affecting the blood vessels in the liver but hasn't spread to lymph nodes or other parts of the body. Or the tumour is bigger than 2cm in size, or there are multiple tumours in one lobe of the liver.
- **Stage 3B** The tumour can be of any size and the blood vessels of the liver may or may not be affected, but the cancer has spread to nearby lymph nodes.

Stage 4 The cancer has spread to parts of the body further away from the liver, such as the lungs.

If the cancer comes back after initial treatment this is known as **recurrent** cancer.

TNM staging system

Another staging system known as the TNM system is also used. This can give more precise information about the extent of the cancer.

- **T** describes the size of the tumour.
- **N** describes whether the cancer has spread to the lymph nodes.
- **M** describes whether the cancer has spread to another part of the body (secondary or **metastatic** cancer).

Your specialist can tell you more about the TNM system. However, it is more common for doctors to talk about primary liver cancer in terms of stages 1 to 4.

Treatment

The type of treatment you are offered will depend on the type of liver cancer you have, the stage of the cancer, its size and your general health.

Planning your treatment

In most hospitals a team of specialists will meet to discuss and agree on the plan of treatment they feel is best for your situation. This **multidisciplinary team** (MDT) will include:

2厘米，或影響到肝臟的血管。或在一葉肝臟內形成有多個腫瘤，每個都小於2厘米。

第三期 此階段分為兩個部分：

- **第三期A** 癌細胞影響到肝臟的血管，但沒有擴散到淋巴結或身體的其它部位。或腫瘤大於2厘米，或一邊肝葉有多個腫瘤。
- **第三期B** 腫瘤可以是任何大小，肝臟的血管可能被感染或未被感染，但癌細胞已經擴散到鄰近的淋巴結。

第四期 癌已經擴散到離肝臟較遠的器官，例如肺。

如果癌症在第一次治療之後復發，就叫做復發性癌。

TNM分期系統

另外一個TNM的分期劃分也普遍被採用。這個劃分能提供更精確的癌症擴散程度資料。

- T描述腫瘤的大小。
- N描述癌細胞是否已經擴散到淋巴結。
- M描述癌細胞是否已經擴散到身體的其他部位(繼發性或轉移性癌)。

專科醫生能夠告訴你更多有關TNM分期的信息。但是在原發性肝癌中，醫生更常使用第一到第四期的劃分方法。

治療

你的治療方法會根據肝癌的種類、階段、大小和你的健康狀況來決定。

計劃你的治療方法

在大部分的醫院中，一組專科醫生將開會討論並協議針對你病情的最佳治療計劃。這個由各個專科組成的小組(MDT)成員包括：

- a surgeon experienced in liver surgery
- a bowel and liver specialist (gastroenterologist/ hepatologist)
- a clinical or medical oncologist (to advise on chemotherapy)
- a radiologist (who analyses x-rays)
- a pathologist (who advises on the type and grade of the cancer, and how far it has spread).

The MDT may also include a number of other healthcare professionals such as a:

- nurse specialist
- symptom control specialist
- dietitian
- physiotherapist
- occupational therapist
- psychologist or counsellor.

The MDT will plan your treatment by taking into consideration a number of factors. This will include your age, general health, the type and size of the tumour, what it looks like under the microscope and whether it has spread beyond the liver (the stage).

The benefits and disadvantages of treatment

Many people are frightened at the idea of having cancer treatments, because of the side effects that can occur. Some people ask what would happen if they did not have any treatment.

Although many of the treatments can cause side effects, these can usually be effectively controlled with medicines. Treatment can be given for different reasons, and the potential benefits will vary depending upon each person's situation.

Early-stage liver cancer

In people with early-stage liver cancer, surgery is often done with the aim of curing the cancer.

Advanced liver cancer (metastatic)

If the cancer is at a more advanced stage, the treatment may only be able to control it, leading to an improvement in symptoms and a better quality of life. However, for some people, the treatment will have a limited effect upon the

- 一名資深的肝臟外科醫生
- 一名腸和肝臟專科醫生(胃腸病學家 / 肝臟病學家)
- 一名臨床或醫療的腫瘤科專科醫生(提供化學療法的意見)
- 放射科專科醫生(負責分析X光片)
- 一名病理學專科醫生(提供癌症種類和分級及擴散程度的意見)

MDT小組也可能包括一些其他的醫護專業人員，例如：

- 專科護士
- 症狀控制專家
- 營養師
- 物理治療師
- 職業治療師
- 心理學專家或心理輔導員

MDT小組將會考慮一系列因素來制定你的治療方法，包括你的年齡、健康狀況、腫瘤的種類和大小、腫瘤在顯微鏡下的顯像以及是否已經擴散到肝臟以外(癌症的分期)。

治療的好與壞

很多人因為治療的副作用而對癌症治療產生恐懼。也有一些人想知道，如果不對腫瘤做出治療會有什麼樣的結果？

雖然很多治療方法會產生副作用，但副作用通常可以被藥物有效地控制。使用某種治療方法基於不同的原因，至於潛在的好處則會因人而異。

初期肝癌

外科手術常常會用來治療早期肝癌的病人，以達到治愈的目的。

末期肝癌（轉移）

如果癌症已擴散到較嚴重的階段，治療方法可能只是用來控制，達到減輕症狀和提高生活質量的目的。但對有一些人來說，治療將對

cancer and they will get the side effects with little benefit.

Giving consent

If you have been offered treatment with the aim of curing your cancer, deciding whether to accept the treatment may not be difficult. However, if a cure isn't possible and the treatment is being given to control the cancer for a period of time, it may be more difficult to decide whether to go ahead with treatment.

Before you have any treatment, your doctor will explain its aims to you. They will usually ask you to sign a form saying that you give your permission (consent) for the hospital staff to give you the treatment. No medical treatment can be given without your consent. Before you are asked to sign the form you should have been given full information.

Second opinion

Usually a number of cancer specialists work together as a team using national treatment guidelines to decide on the most suitable treatment for you. Even so, you may want to have another medical opinion. Either your specialist or your GP should be willing to refer you to another specialist for a second opinion, if you feel it will be helpful. The second opinion may cause a delay in the start of your treatment, so you and your doctor need to be confident that it will give you useful information.

Surgery

Surgery is the most effective treatment for primary liver cancer, but isn't always possible due to the size and position of the tumour. It's also not possible to operate if the cancer has spread beyond the liver. If the liver is severely damaged by cirrhosis it may not be safe to have surgery. Unfortunately only a small number of people with primary liver cancer will be able to have surgery.

There are different types of surgery, depending on the position and size of the tumour and whether the liver is damaged by cirrhosis. Before any operation it's important to discuss it fully with your doctor so that you understand what it involves.

Liver resection

If only certain areas of the liver are affected by cancer and the rest of the liver is healthy, it may be possible to remove the affected part. This is called a liver resection. If the operation involves the removal of a whole lobe of the liver, it's

癌症的影響不大，他們將面臨治療的副作用而對病情改善不大。

簽署同意書

如果治療可以達到治愈癌症的目的，決定是否接受治療就可能不怎麼困難。但是如果沒法治愈，而所作的治療只是在一定時期內控制癌症，做出是否治療的決定就比較困難了。

在你做任何治療之前，你的醫生會跟你解釋治療的目的。他們通常會讓你簽署一份表格，讓你允許(同意)醫院的工作人員對你進行治療。在沒有得到你的同意之前是不會進行任何治療的。在你簽署表格之前，你應被提供完整的信息。

第二意見

通常由幾個癌症專業人員組成小組，根據國家治療指引來決定最適合你的治療方法。即使這樣，你也可能希望得到其他的醫療意見。如果你覺得這樣對你有幫助，你的專科醫生或家庭醫生都將樂意轉介你到另外的專科醫生處聽取第二意見。第二意見可能會造成治療的推遲，所以你和你的醫生都需要考慮到第二意見一定能給你有用的信息。

外科手術

外科手術是原發性肝癌最有效的治療方法，但基於腫瘤大小和位置的不同，並不一定可行。如果癌症擴散到肝臟之外，手術就不能夠進行；如果肝臟被硬化嚴重損害，外科手術也可能會不安全。故此只有小部分原發性肝癌的患者能夠做外科手術。

外科手術有不同的種類，取決於腫瘤的位置、大小和肝臟是否被肝硬化損害。做任何手術之前，跟醫生進行全面地討論，這樣你才能了解手術涉及的內容，這點非常重要。

部分肝臟切除手術

如果肝臟受癌症影響僅限於一個特定範圍，其餘的部位仍然健康，則只切除受影響部位的手術就是可行的：這個手術稱為部分肝臟切除手術。如果手術包括切除整個肝葉，叫做肝葉切除手術。肝臟有

called a **hemi-hepatectomy**. The liver has an amazing ability to repair itself. Even if up to 80% of the liver is removed it will start to re-grow very quickly, and may be back to normal within a few weeks.

Liver transplant

It may be possible to remove the whole liver and replace it with a liver from another person – a donor. In the treatment of Hepatocellular carcinoma (HCC) a liver transplant can only be done if you have:

- a single tumour that is between 3–5cm
- a single tumour that is between 5–7cm that hasn't changed in size for six months
- a maximum of five tumours, all smaller than 3cm in size.

Your specialist may suggest a liver transplant if you have cirrhosis of the liver. However, if your cirrhosis is severe you may not be well enough to go through this major operation.

Most liver transplants are taken from people who have died (organ donors). In some situations it may be possible to have a **living-donor liver transplant** operation. The donor has surgery to remove either the right or the left lobe of their liver, which is immediately transplanted into the patient. This is a newer type of operation and is not available in many hospitals.

Most people with primary liver cancer won't be suitable for a liver transplant. This is because they will not be well enough or because the cancer has already begun to spread beyond the liver. There is also likely to be a wait for a suitable donor to become available, which can take many months. The cancer will continue to grow during this time and you will be given other treatments to control it.

If there is any risk that cancer cells may have spread, a liver transplant won't cure the cancer and usually won't be recommended. After a transplant operation you will need to take drugs so that your body doesn't reject the new liver. These drugs, known as immunosuppressants, dampen down the immune system making it less effective at fighting against any cancer cells. So if the cancer had spread before the surgery you will have gone through a major operation only to have the cancer come back.

Your specialist can discuss if a transplant is suitable for you.

驚人的恢復能力。即使在百分之八十的肝臟被切除的情況下，它仍能夠迅速再生，並在幾個星期之後恢復正常。

肝臟移植手術

將整個肝臟切除並換上他人(肝臟捐贈者)的肝臟的手術是可行的。不過，在治療肝細胞癌(HCC)中，肝臟移植手術只能在下面的情況下使用：

- 只有一個腫瘤，大小在3 - 5厘米之內
- 只有一個腫瘤，大小在5 - 7厘米之內，並且在6個月之內腫瘤大小沒有變化
- 最多不超過5個腫瘤，大小全部都在3厘米以下

如果你患有肝硬化，你的專科醫生可能會建議進行肝臟移植。但是如果你的肝硬化已很嚴重，你的身體可能承受不了這樣的大手術。

大部分肝臟移植都是從死去的人(器官捐贈者)身上摘取的。在一些情況下，也可能進行**活體肝臟捐贈者移植手術**。器官捐贈者通過外科手術切除左邊或者右邊的肝葉，然後立刻移植給病人。這是一種較新的手術，所以不是很多醫院都提供。

大部分原發性肝癌患者都不適合肝臟移植，原因是身體可能無法承受，或肝癌已經開始擴散到肝臟之外的地方。也可能是需要等待多月的時間來找到合適的器官捐贈，然而在等待期間，肝癌會繼續生長，所以需要其他的療法來控制。

如果癌細胞可能已經擴散，肝臟移植就無法治愈肝癌，醫生亦不會建議這樣做。至於在移植手術之後，你需要服用藥物，令你的身體不排斥新的肝臟。這些藥物，叫做免疫抑制劑，會減慢免疫系統，令其降低抵抗癌細胞的能力。所以如果癌症在手術前已經擴散，即使進行一次大手術，最終癌症亦會復發。

你的專科醫生會跟你討論肝臟移植是否適合你。

After your operation

For about 24 hours after your operation you may be nursed in the intensive care ward or high-dependency unit, until you have fully recovered from the anaesthetic. The liver has a really good blood supply and there is a risk that it may bleed after surgery so the doctors and nurses will keep a very close check on your blood pressure.

You will have a dressing over the operation site on your abdomen, and if necessary one or more drainage tubes will drain fluid and blood from the wound site into drainage bags. The nurses will regularly measure the amount of blood (if any) in these bags. When the drainage has almost stopped, the tube(s) will be removed. This usually takes place after a few days.

You will have a drip (intravenous infusion) going into a vein in your arm to give you fluids and essential nutrients. This will be removed once you're drinking and eating again – usually within 1–2 days.

A small tube called a catheter will be put into your bladder to drain urine into a collecting bag. This will save you having to get up to pass urine. It's usually removed after a few days.

It's normal to have some pain or discomfort after an operation on the liver. You'll be given regular injections of painkillers for several days after the operation to prevent and relieve pain. Some people feel sick after an operation. You may be given injections of anti-sickness drugs (anti-emetics) to help prevent and relieve this.

Most people are able to go home 6–12 days after their operation and will need painkillers for the next few weeks. It may take up to six weeks before you start getting back to normal.

If you think you might have problems when you go home (for example, if you live alone or have several flights of stairs to climb), let the nurse or social worker know when you are admitted to the ward so that help can be arranged.

Your nurse specialist can offer or arrange support or counselling for you and your family. Social workers are often available to give practical advice. Many are also trained counsellors. If you would like to talk to a social worker you can ask your specialist nurse to arrange it for you.

手術之後

手術之後大約24小時內，你可能會被安排在加護(或稱深徹治療)病房或高護病房，直到你完全從麻醉中甦醒過來。由於肝臟提供豐富的血源，所以手術之後會有出血的風險，醫生和護士將會緊密監測你的血壓。

腹部的手術傷口將會被紗布包住，有必要的話，會有一條或多條引流管從傷口引流體液和血液到一個收集袋內。護士將會定期的測量收集袋中的血量(如果有血)。通常在手術後大約幾天時間，如果血液停止流入引流管，引流管將會被摘除。

你亦會透過在手臂插入的靜脈點滴(靜脈輸液)輸送液體和需要的養份進入體內，直到你能夠開始喝水和進食為止 - 這通常在 1-2 日內。

此外一條叫輸尿管的小管，也會插入你的膀胱，將尿液引流到一個收集袋，讓你不用起床排尿。輸尿管通常也會在幾天之後摘除。

肝臟手術之後出現疼痛或不適是正常的。在手術後幾天，你將會定期注射止痛針來防止和減輕痛楚。有部分人會在手術之後會覺得噁心，你可能會被注射抗嘔藥(止吐藥)來幫助防止和減輕這個症狀。

大部分病人在手術後 6 - 12 日就可以回家，並在接下來的幾個星期需要使用止痛藥。要完全恢復正常可能需要6個星期。

如果你覺得回家的生活可能會出現困難(例如，如果你是獨居的或有很多樓梯要爬)，在入院時讓護士或社工知道，他們可以幫助安排。

你的專科護士可以提供或安排支援或輔導你和你的家人。社工可以提供切合實際的意見。他們當中很多都是受過訓練的輔導員。如果你想跟社工見面，可以讓你的專科護士幫你安排。

Before you leave hospital you'll be given an appointment to attend an outpatient clinic for your post-operative check up. This is a good time to discuss any problems you may have. If you have any problems or worries before this time, you can speak with your ward nurses or hospital doctor.

Chemotherapy

Chemotherapy is the use of anti-cancer (cytotoxic) drugs to destroy cancer cells. It is sometimes used to treat primary liver cancers that can't be removed by surgery, although in adults chemotherapy will not usually cure the cancer. It can help to shrink the tumour and slow its progression, which can help to control symptoms.

Chemotherapy drugs are sometimes given as tablets, or more usually, as injections into a vein (intravenously) or by injection directly into the hepatic artery (the main blood vessel that takes blood to the liver). Chemotherapy can sometimes be given as part of a treatment called chemoembolisation (see page 38).

There is no standard chemotherapy drug for the treatment of hepatocellular carcinoma. The most commonly used chemotherapy drug is doxorubicin. Other chemotherapy drugs that may be used are:

- cisplatin
- fluorouracil (5FU)
- gemcitabine (Gemzar®).

A combination of chemotherapy drugs may be used. Not everyone is suitable for chemotherapy treatment as it can only be given if the liver function is good enough.

How chemotherapy is given

Chemotherapy is usually given as a session of treatment called a cycle. Each cycle lasts a few days and is followed by a rest period of a few weeks to allow the body to recover from any side effects of the treatment. The number of cycles you have will depend on the type of liver cancer you have and how well it is responding to the drugs.

Chemotherapy is usually given in the hospital outpatient department or chemotherapy unit. Sometimes the chemotherapy is injected slowly into a vein

在你離開醫院之前，你會被安排到門診部的複診時間，進行手術後的檢查。這是討論你在這期間可能遇到的困難的好機會。如果你在這之前，有任何問題或憂慮，你亦可以向病房的護士或醫院的醫生諮詢。

化學療法

化學療法(簡稱化療)是使用抗癌(細胞毒素)藥物來破壞癌細胞。它通常用來治療不能夠透過手術切除的原發性肝癌。雖然成人的化療通常不能治愈癌症，但它能夠幫助縮小腫瘤並減緩它的生長，這能幫助控制症狀。

化療的藥物有時是藥片，或者更普遍的是通過注射到靜脈中(靜脈注射)，或直接注射到肝臟的主動脈(把血液輸送到肝臟的主要血管)。化療有時亦是作為肝動脈血管栓塞術(參見39頁)的一部分治療過程。

治療肝細胞癌沒有標準的化療藥物。最常用的化療藥物是多柔比星(或叫阿霉素，英文名: doxorubicin)。其他可能使用的化療藥物有：

- 順氯氨鉑(順鉑)
- 氟尿嘧啶(簡稱5FU)
- 吉西他濱(或叫健擇)

化學療法的藥物可能會混合使用。但不是每個人都適合使用化療，通常是根據肝功能的好壞來決定。

化學療法怎樣進行

化學療法通常是按期作出治療，每期治療叫一個療程。每個療程持續幾天，並接着休息幾個星期，允許身體從治療的副作用中恢復過來。要進行多少個周期的療程則根據肝癌的種類和它對藥物的反應來決定。

化療通常由醫院的門診部或化學療法部門提供。有時化療藥物會以緩慢注射到靜脈(靜脈注射)的方式，或者用上幾個小時打點滴(輸

(intravenously), or it may be given as a drip (infusion) over a few hours. You may need to stay a few days in hospital. Occasionally it is given as a continuous infusion through a small pump that you take home with you. Your doctor or nurse will explain all about your chemotherapy.

A number of research trials are being carried out to try to improve the results of treatment for primary liver cancer. You may be asked to take part in a trial. See pages 44 for more information about trials.

Side effect

Chemotherapy can sometimes cause unpleasant side effects, but it can also make you feel better by relieving the symptoms of the cancer. Most people have some side effects, but these can often be well controlled with medicines. The possible side effects are described here, along with some of the ways in which they can be reduced.

Lowered resistance to infection (neutropenia)

While the chemotherapy is acting on the cancer cells in your body, it also temporarily reduces the number of white blood cells. When there are fewer white blood cells, you're more likely to get an infection. During chemotherapy, your blood will be tested regularly and, if necessary, you'll be given antibiotics to treat any infection.

Bruising or bleeding (thrombocytopenia)

Chemotherapy can reduce the production of platelets, which help the blood to clot and stop any bleeding. Let your doctor know if you have any unexplained bruising or bleeding, such as nosebleeds, blood spots or rashes on the skin, or bleeding gums.

Low number of red blood cells (anaemia)

You may become anaemic. This can make you feel tired and breathless.

Sore mouth

Some chemotherapy drugs can make your mouth sore and cause small ulcers. Regular mouthwashes are important and your nurses will show you how to do these properly. If you don't feel like eating during treatment, you could try replacing some meals with nutritious drinks or a soft diet.

Feeling sick

Some of the drugs may make you feel sick (nauseated) and you may be sick.

液)的方式注入你的體內。你可能需要在醫院住幾日。偶爾也可能會讓你拿一個小泵回家進行連續的輸液。醫生或護士會向你解釋所有有關你化療的事項。

為了改善對原發性肝癌的治療結果，一些研究實驗會伴隨病人的治療同步進行，你可能會被邀請參與試驗。更多研究試驗的資料可參看第45頁。

副作用

化療有時會引起令人討厭的副作用，但治療的同時可以減輕癌症的症狀，讓你感覺舒服些。化療對大部分人都會產生一些副作用，但一般可以通過藥物控制。以下將會陳述一些可能出現的副作用，以及一些減輕副作用的方法。

抵抗感染的能力降低(嗜中性白血球減少症)

當化療的藥物在身體中跟癌細胞對抗的時候，也會暫時降低白血球的數量。當白血球低至一定數量時，身體也就容易受到感染。故在化療期間，需要定期驗血，如果有必要時需用抗生素來治療感染。

淤青或流血(血小板減少)

化療會降低血小板的生成，血小板幫助血液凝結並止血。如果你有來歷不明的淤青或流血，例如流鼻血、血斑或皮疹、或牙齦出血，要讓醫生知道。

紅血球數量減少(貧血)

你可能會出現貧血症狀。這會讓你感到疲倦和呼吸困難。

口瘡

一些化療藥物會使口腔疼痛並引起小潰瘍(飛滋)。定期使用漱口藥很重要，你的護士會教你怎樣正確的漱口。如果你在治療期間沒有食欲，可以嘗試把一些正餐換成營養飲料或糊狀食物。

噁心

一些藥物會讓你感覺噁心(反胃)，並且可能會引起嘔吐。目前已有

There are now very effective anti-sickness drugs (anti-emetics) to prevent or greatly reduce nausea and vomiting.

Your doctor can prescribe these for you. Let your doctor or nurse know if your anti-sickness drugs aren't helping, as they can change it to a different type. Some anti-emetics can cause constipation. Let your doctor or nurse know if this is a problem.

Tiredness

You are likely to find that you become very tired and have to take things much more slowly. Just do as much as you feel like and try not to overdo it.

Hair loss

Ask your doctor whether the drugs you are taking are likely to make your hair fall out. Not all drugs cause hair loss. If your hair does fall out, it will start to grow back once your treatment is over.

Diarrhoea

Some drugs used to treat cancer of the liver can irritate the lining of the digestive system and cause diarrhoea for a few days. Your doctor can give you medicine to slow down the bowel and reduce the diarrhoea. You may also be able to help to control it by eating a low-fibre diet, avoiding wholemeal bread and pasta, raw fruit, cereals and vegetables for a few days after each treatment.

Skin

Chemotherapy can affect the skin and nails, causing dryness and flaking. Some drugs make your skin more sensitive to the sun, so it is important to cover up and use a high-factor sun cream (SPF 15 or greater).

Numbness or tingling in hands or feet

Some chemotherapy drugs can affect the nerves causing numbness and tingling. This is known as peripheral neuropathy. Tell your doctor if you notice these side effects. This problem usually improves slowly a few months after the treatment has finished.

Your kidneys may be affected

Some chemotherapy drugs can affect the way your kidneys work. Usually this does not cause any symptoms and the effect is normally mild. Rarely, it may cause permanent damage to the kidneys unless the treatment is stopped. Before and after each treatment, your kidneys will be checked by a blood test and you'll

很多有效的止吐藥用來防止或減輕反胃或嘔吐的情況。

你的醫生可以為你開這些藥方。如果你的止吐藥無效，請讓醫生或護士知道，他們可以給你開另一種藥物。有些止吐藥也會引起便秘，如果這令你造成困擾，也應讓醫生或護士知道。

疲倦

你可能會發覺自己變得非常疲倦，做事情比以前緩慢。那就量力而為，不要勉強。

脫髮

詢問醫生你所服用的藥物是否會引起脫髮。不是所有藥物都會引起脫髮的，但如果你的頭髮脫落，在治療結束後也會重新生長。

腹瀉

一些治療癌症的藥物會刺激消化系統的表面造成幾天的腹瀉。你的醫生可以給你藥物來減緩腸道的消化從而降低腹瀉。這時低脂肪的飲食會對你有幫助，治療後幾日亦要避免進食全麥麵包和意粉、生果、麥皮和蔬菜。

皮膚

化療會影響皮膚和指甲，引起乾燥和脫皮。一些藥物也會讓皮膚對陽光敏感，所以身體要被覆蓋及遮擋好並使用防曬霜（SPF值15或以上）。

手腳麻木或刺痛

一些化療的藥物影響神經，引起麻木和刺痛，這被叫做末梢神經病變。如果你發現這些症狀要告知醫生。這個問題一般在化療之後幾個月會慢慢改善。

腎臟可能會受影響

一些化療的藥物會影響腎臟的工能。通常情形下這不會引起任何症狀，而影響也是非常小的。很罕見的情況下，除非停止治療，否則會引起對腎臟永久性的損害。在治療的前後，都會透過驗血來檢查

be given plenty of fluid through a drip to keep your kidneys working normally. It is important that you also drink plenty of fluids during and after your treatment. Your urine may also be measured (to check that your kidneys are working properly).

Changes in hearing

Chemotherapy can cause ringing in the ears (tinnitus) and you may be unable to hear some high-pitched sounds. This usually improves when the treatment is over. Tell your doctor if you notice any loss of hearing or ringing in your ears.

Although these side effects may be hard to bear at the time, they will gradually disappear over a few weeks once your treatment has finished.

Chemoembolisation

Chemoembolisation treatment aims to get rid of the cancer by giving chemotherapy directly into the affected part of the liver and by cutting off the blood supply to the tumour (a process known as embolisation). Chemotherapy drugs are injected directly into the tumour in the liver. The chemotherapy drugs will be mixed with a substance called lipiodol that helps the chemotherapy stay in the liver for longer. This makes the treatment more effective.

You will be given a local anaesthetic and possibly a mild sedative to make you feel relaxed. The doctor then puts a fine tube called a catheter into a main blood vessel in your groin (femoral artery). The catheter is passed along the femoral artery until it reaches the main blood vessel that carries blood to the liver (hepatic artery).

The chemotherapy and lipiodol mixture is then injected into the liver through the catheter. Sometimes the doctor will also inject something to block the blood flow to the tumour, such as a gel or some tiny plastic beads. Blocking the blood supply (embolisation) will starve the tumour of oxygen, which can help to destroy it.

Chemoembolisation is carried out in the x-ray department at the hospital. You will usually need to stay in hospital overnight and possibly longer. The treatment can be repeated several times.

Chemoembolisation is sometimes combined with radiofrequency ablation (see page 40) and your doctor can explain if this would be helpful for you.

腎臟，並且會透過點滴輸入大量液體來保證腎臟運作正常。在治療期間及治療後飲用大量液體至為重要。你的小便可能也會被測量（從而檢查腎臟是否工作正常）。

聽力的改變

化療可能會引起耳朵內的響聲（耳鳴），你因此可能無法聽到高音頻的聲音。通常治療結束之後情況就會舒緩。告訴醫生如果你發現聽力下降或耳鳴。

雖然這些副作用可能在當時很難忍受，但這些情況會在化療結束後幾個星期內慢慢地消失。

肝動脈血管栓塞術

肝動脈血管栓塞術是直接於肝臟受影響的部位注射化療藥物的方法，並切斷腫瘤的血液供給（這個過程叫做栓塞），來達到治療癌症的目的。化療藥物會混合一種叫碘化油的物質，然後直接注射到肝臟的腫瘤內，幫助化療藥物在肝臟停留更久，令治療效果更佳。

治療會在局部麻醉下進行，並可能使用少量鎮靜劑來令你感到放鬆。之後醫生會在你的腹股溝主要血管（大腿動脈）插入一條名為導管的細管。這條導管將順着大腿動脈直至伸展到負責輸送血液到肝臟的主要血管中（肝動脈）。

那些化療藥物和碘化油混合物會通過導管注射到肝臟。有時，醫生也會注射例如一種膠質或微小的塑料珠來堵塞通向腫瘤的血管，從而切斷血液供給（栓塞），令腫瘤失去氧氣，從而協助消滅腫瘤。

肝動脈血管栓塞術會在醫院的X光部門進行，你將需要留院一晚或可能更長時間。治療程序也可能會重複幾次。

肝動脈血管栓塞術有時會和射頻消融治療（參看41頁）一同使用。如果這能夠有助你的治療，醫生會為你解釋。

Chemoembolisation can cause side effects such as sickness, pain and a raised temperature. You will be given anti-sickness (antiemetic) drugs and painkillers to help control any side effects.

Tumour ablation

Ablation means to destroy. There are two different ways of ablating primary liver tumours, using either alcohol or heat.

Percutaneous ethanol injection

This type of treatment is used for tumours less than 5cm (2in) in size. Alcohol (ethanol) is injected through the skin and into the tumour in the liver. The alcohol can destroy the cancer cells. This procedure is usually done in the scanning department so that ultrasound can be used to guide the needle directly into the tumour. You will be given a local anaesthetic. If the tumour grows again, the treatment can be repeated.

Side effects of percutaneous ethanol injection are usually mild and include pain and fever. Let your doctor know if you develop any side effects as they can usually be controlled with medication.

Radiofrequency ablation (RFA)

This treatment uses laser light or radio waves to destroy the cancer cells by heating them to a very high temperature. A fine needle is passed through the skin into the tumour in the liver. Powerful laser light or radio waves are then passed through the needle and into the tumour. These heat the cancer cells.

Like percutaneous ethanol injection this treatment is done in the scanning department using ultrasound or CT (computerised tomography) scanning so that the doctor can guide the needle directly into the tumour. You may be given a local anaesthetic or a general anaesthetic.

Side effects of RFA include pain and fever, but they are usually very mild and can be controlled with medicines.

The National Institute for Health and Clinical Excellence (NICE), which advises doctors about treatment, has issued guidance on the use of RFA for primary liver cancer. The guidance states that RFA can be helpful at destroying hepatocellular carcinoma, which may improve survival. The guidance also recommends that RFA is given using ultrasound or CT scanning, and that people

肝動脈血管栓塞術會產生一些副作用，例如噁心、疼痛和體溫升高。止吐藥和止痛藥會助你控制這些副作用。

腫瘤消融療法

消融的意思是消滅。有兩種不同的方法來消滅原發性肝癌，分別可使用酒精或熱力兩種。

經皮酒精注射

這種治療方法僅用於直徑5厘米(2英寸)以內的腫瘤。酒精(乙醇)通過皮膚注射到肝臟的腫瘤，從而消滅癌細胞。這個過程會在掃描部門進行，因超聲波能夠幫助引導針管直接到達腫瘤。進行這個療法時你需要進行局部麻醉。如果腫瘤再次生長，則治療可以重複進行。

經皮酒精注射的副作用通常很輕微，症狀包括疼痛和發燒。如果有任何的副作用產生，告訴你的醫生，他們能夠透過藥物來控制。

射頻消融治療(亦稱RFA)

這個治療使用鐳射光或無線電波令腫瘤溫度升高，從而消滅癌細胞。一根細針會通過皮膚插入肝臟的腫瘤，強力的鐳射光或無線電波通過細針傳送到腫瘤，從而以熱力消滅癌細胞。

跟經皮酒精注射類似，這個治療也在掃描部門進行，透過超聲波或電腦斷層攝影掃描(CT)的協助，讓醫生能將針管在引導下直接插入腫瘤內。進行這個療法時你需要局部或全身麻醉。

RAF治療的副作用包括疼痛和發燒，但通常很輕微，能夠透過藥物來控制。

國家健康和臨床卓越協會(NICE)，是向醫生建議治療方法的組織，它們出版了使用RFA治療原發性肝癌的指引。該指引指出RFA可以有效消滅肝細胞癌，提高存活率。指引同時建議RFA要在超聲波或CT掃描協助下進行，手術由包括肝臟外科醫生的多部門專科小組(參看第22頁)進行。

having the treatment are cared for by a multidisciplinary team (see page 21) that includes a liver surgeon.

Biological therapies

Biological therapies use substances that are produced naturally in the body, to destroy cancer cells. A biological therapy called sorafenib (Nexavar®) may be used to treat hepatocellular carcinoma. Sorafenib is a cancer growth inhibitor. In order to grow and divide cancer cells 'communicate' with each other using chemical signals. Cancer growth inhibitors interfere with this process and so affect the cancer's ability to develop.

Sorafenib is a tablet that is usually taken twice a day. Side effects include tiredness, diarrhoea, feeling sick (nausea), high blood pressure and muscle pains. Although sorafenib is licensed and can be prescribed in the UK, it has not yet been assessed by the National Institute for Health and Clinical Excellence (NICE). NICE gives advice on which new drugs or treatments should be available on the NHS. As a result, sorafenib may not be widely available on the NHS.

Radiotherapy

Radiotherapy treats cancer by using high-energy rays to destroy the cancer cells, while doing as little harm as possible to normal cells. It is not often used to treat primary liver cancer because the liver can't tolerate very high doses of radiotherapy. It's sometimes used to treat cholangiocarcinoma, but not usually hepatocellular cancers.

Other treatments

The following treatment is still being evaluated as part of research trials. Your cancer specialist will be able to discuss with you whether it may be helpful in your situation, and can refer you to a hospital that carries out this treatment.

Cryosurgery or cryotherapy

This treatment may be possible if you can't have surgery. A device called a cryoprobe is inserted into the centre of the tumour. Liquid nitrogen is then passed through the probe. This freezes the surrounding area and destroys the cancer cells. The treatment may be done during an operation or a laparoscopy (see page 20).

生物療法

生物療法使用身體自然生長的物質來破壞癌細胞。治療肝細胞癌可能會用到一種叫索拉菲尼(或叫蕾莎瓦)的生物藥物。索拉菲尼是癌症生長抑制劑。為了生長和分裂，癌細胞之間需要用化學信號相互“交流”。生長抑制劑能干預這個過程，並影響癌細胞生長的能力。

索拉菲尼是一種藥片，通常一天服用兩次，副作用包括疲倦、腹瀉、噁心(想吐)、高血壓和肌肉痛。雖然索拉菲尼是有許可證的藥物，並能夠憑處方在英國購買，但國家健康和臨床卓越協會(NICE)還沒有對其進行評估。由於NICE會向國民保健服務(NHS)提供哪些新藥和治療方法可以在國民保健服務下進行的建議，因此索拉菲尼在國民保健服務(NHS)中沒有被廣泛使用。

放射療法

放射療法通過高能量的放射綫破壞癌細胞從而治療癌症，同時對正常的細胞作最小的傷害。這種方法在原發性肝癌中並不常用，因為肝臟不能忍受大量的放射綫。通常用來治療膽管癌，而不常用在肝細胞癌。

其他治療方法

以下的治療方法仍然在研究試驗中進行評估。你的癌症專科醫生將會跟你討論這些方法是否對你的情況有幫助，並可轉介你到有關醫院進行這些治療。

冷凍手術或冷凍療法

如果你不能夠進行切除手術，這種療法可能會有幫助。一個叫冷凍探針的裝置將會插入腫瘤的中心，然後通過探針輸送液態氮，冷凍周圍的部位並消滅癌細胞。這個療法可能在手術或腹腔鏡檢查(參看21頁)的協助下進行。

Cryotherapy can be painful and you can be given painkillers if you need them. Some people also develop a fever. Let your doctor know if you notice any side effects.

Research – clinical trials

You may be asked to take part in a treatment research trial. There can be many benefits in doing this. Trials help to improve knowledge about cancer and develop new treatments. You will also be carefully monitored during and after the study. Usually, several hospitals around the country take part in these trials. It is important to bear in mind that some treatments that look promising at first are often later found not to be as good as existing treatments, or to have side effects that outweigh the benefits. If you decide not to take part in a trial your decision will be respected and you don't have to give a reason. There will be no change in the way that you are treated by the hospital staff and you will be offered the standard treatment for your situation.

After treatment – follow up

After your treatment has ended, you may have regular check-ups (which will include a physical examination) and possibly scans or x-rays. These check-ups will probably continue for several years. The appointments are a good opportunity to discuss with your doctor any worries or problems you may have. However, if you notice any new symptoms or are anxious about anything else between your appointments, you can contact your doctor or nurse for advice.

Your feelings

You are likely to experience a number of different emotions, from shock and disbelief to fear and anger. These feelings may be overwhelming and difficult to control, particularly if you have experienced changes in your appearance because of surgery and feel self-conscious. These feelings are quite natural and it is important for you to be able to express them.

Each individual has their own way of coping with difficult situations; some people find it helpful to talk to friends or family, while others prefer to seek help from people outside their situation. Some people prefer to keep their feelings to themselves. There is no right or wrong way to cope; but help is there if you need it. You may wish to contact our cancer support service for information about counselling in your area (see page 47).

冷凍手術可能會有點痛，如有需要，醫生會提供止痛藥。也有一些患者會發燒。如你發現任何副作用，告訴你的醫生。

研究 - 臨床試驗

你可能會被詢問是否願意在治療期間參與研究試驗。參與試驗有很多益處，這些試驗能幫助改善有關癌症的知識並發展出新的治療技術。在試驗的期間及之後，你會被小心的監測。通常，全國幾間大醫院會參與這些試驗。但你同時要緊記很重要的一點，可能有些方法開始看起來很有希望，但結果卻可能並沒有現存的治療方法好，或者副作用比療效更大。如果你決定不參與試驗，你的決定也會得到尊重，你不需要提供任何理由。醫院的工作人員對你的待遇也不會有什麼不同，你會得到正常的服務。

治療之後 - 跟進

在你的治療結束之後，你可能會被安排定期的復診(包括物理檢查)，或可能是掃描或X光檢查。這個復診過程可能會持續幾年。復診時是跟醫生討論你的憂慮和問題的好機會。但是如果在下次復診之期間你發現任何新的症狀或有擔心其他的問題，你可以聯絡醫生或護士作出諮詢。

你的感覺

你很可能會經歷很多不同的情緒起伏，從震驚和難以置信到害怕和憤怒。這些感受可能會讓人不知所措並且難以控制，特別是在你因完成手術後所出現的外貌改變及自我意識轉變。這些感受都是非常自然的，重要的是你要能夠表達出來。

每個人面對困難情況時都有他自己的處理方式，一些人覺得跟家人或者朋友聊天有幫助，另外一些人則喜歡從外界那裏獲得幫助。還有一些人喜歡將自己的感受隱藏。這是沒有對或錯的處理方式的，但如果你有需要的話，可以尋求幫助。你可能想在你居住的當地聯絡麥美倫癌症支援的心理輔導(詳見47頁)。

Useful Organisations

相關組織

British Liver Trust 英國肝臟信託

2 Southampton Road, Ringwood, BH24 1HY

Free Helpline 免費求助熱綫: 0800 652 7330

Tel 電話: 01425 481320

Fax 傳真: 01425 481335

Email 電郵: info@britishlivertrust.org.uk

Website 網站: www.carersuk.org

The British Liver Trust is the national charity working to reduce the impact of liver disease in the UK through support, information and research.

英國肝臟信託是全國性的慈善團體，通過支援、資訊和研究，從而降低肝臟疾病在整個英國的影響。

Citizen Advice Bureau (CAB) 市民諮詢處

For contact details for your nearest CAB, phone 020 7833 2181. Contact details will also be in your local phone book.

如欲查詢閣下最附近的市民諮詢處資料，可致電020 7833 2181查詢。又或可以參閱閣下居住當地的黃頁電話簿。

Website 網站: www.citizensadvice.org.uk

An independent network that provides free, impartial information and advice to help anyone with money, legal & other problems.

市民諮詢處是個獨立的網絡部門，旨在為任何人士在金錢、法律和其它問題上提供免費和中肯的資料及建議。

Macmillan Cancer Support 麥美倫癌症支援

89 Albert Embankment, London, SE1 7UQ

Macmillan Cancer Line 麥美倫癌症熱綫: 0808 808 2020

Macmillan Cantonese Helpline 麥美倫廣東話熱綫: 0808 800 0132

Email 電郵: cancerline@macmillan.org.uk

Website 網站: www.macmillan.org.uk

Provides specialist advice and support through Macmillan nurses and doctors, and financial advice and grants for people with cancer and their families.

旨在透過麥美倫轄下的護士和醫生服務，向有需要的人士提供專業意見和支援，並給予癌症患者及其家人在經濟上的建議和資助。

Marie Curie Cancer Care 瑪麗·居禮夫人癌症護理

89 Albert Embankment, London, SE1 7TP

Tel 電話: 020 7599 7777

Email 電郵: info@mariecurie.org.uk

Website 網站: www.mariecurie.org.uk

Runs a number of hospice centres for cancer patients throughout the UK, and a community nursing service, which works with the district nursing service to support cancer patients and their carers in their homes.

在英國各地設有多個癌症病人善終服務中心，並提供社區護理服務，同時與當地護理部門一同合作，為癌症病患者及其在家中照顧他們的照料者提供支援。

The Chinese National Healthy Living Centre (CNHLC) was founded in 1987 to promote healthy living and facilitate access to health services for the Chinese community in the UK. The Centre aims to reduce the health inequalities experienced by the Chinese community. Language difficulties and cultural differences present major obstacles to many Chinese people accessing mainstream health and social care services. CNHLC works closely with both statutory and community organisations to deliver its mission.

全國華人保健中心成立於1987年，旨在推廣健康生活模式及協助英國華人社群更有效地採用英國的健康服務。由於語言上的困難加上文化上的差異，構成了華人享用主流醫療和社會福利服務的主要障礙，導致他們得不到應有的服務及被社會孤立。故本中心的宗旨是希望減少華人社群在享用健康服務方面的不平等。全國華人保健中心一直以來均與政府及社區組織緊密合作實踐中心的使命。

Chinese National Healthy Living Centre

全國華人保健中心

29 – 30 Soho Square

London

W1D 3QS

Tel 電話: 020 7534 6546 / 020 7287 0904

Fax 傳真: 020 7534 6545

Email 電郵: general@cnhlc.org.uk

Web 網站: www.cnhlc.org.uk

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