HEPATOCELLULAR CARCINOMA BY THE NUMBERS

HEPATOCELLULAR CARCINOMA (HCC) IS THE MOST COMMON TYPE OF PRIMARY LIVER CANCER, ACCOUNTING FOR 90 PERCENT OF ALL LIVER CANCERS.

APPROXIMATELY 841,000 PEOPLE AROUND THE WORLD ARE DIAGNOSED WITH LIVER CANCER EACH YEAR.

NEARLY 1 IN 12 CANCER DEATHS ARE DUE TO HCC.

LIVER CANCER IS THE THIRD LEADING CAUSE OF CANCER MORTALITY WORLDWIDE AND OCCURS MORE OFTEN IN MEN THAN WOMEN.

597,000 CASES PER YEAR AT DIAGNOSIS
245,000 CASES PER YEAR AT DEATH

MEDIAN AGE 63 AT DIAGNOSIS
67 AT DEATH

LIVER CANCER “HOT SPOTS”

Source: GLOBOCAN 2018

SURVIVAL RATES

HCC IN ADULTS IS OFTEN DIAGNOSED IN LATER STAGES, WHICH RESULTS IN RELATIVELY LOW 5-YEAR SURVIVAL RATES.

ONLY 10% ARE DIAGNOSED IN THE EARLY STAGES WHEN SURGERY CAN HELP.

LIVER CANCER 5-YEAR RELATIVE SURVIVAL RATES BY STAGE AT DIAGNOSIS

LOCALIZED 31%
REGIONAL 11%
UNSTAGED 6%
DISTANT 3%

COMMON HCC RISK FACTORS

BETWEEN 80 AND 90 PERCENT OF ALL HCC CASES WORLDWIDE ARE CAUSED BY INFECTION WITH THE HEPATITIS B VIRUS (HBV) OR HEPATITIS C VIRUS (HCV).

GENDER
RACE/ETHNICITY
CERTAIN GENETIC SYNDROMES
TYPE 2 DIABETES
CHRONIC HCV/HBV INFECTION
CIRRHOSIS
HEAVY ALCOHOL USE
OBESITY
NON-ALCOHOLIC STEATOHEPATITIS (NASH)

SIGNS & SYMPTOMS

- UNINTENDED WEIGHT LOSS
- LOSS OF APPETITE
- NAUSEA OR VOMITING
- ENLARGED LIVER AND/OR SPLEEN
- ABDOMINAL PAIN AND/OR SWELLING
- ITCHING
- YELLOWING OF THE SKIN AND EYES

TREATMENT OPTIONS

A PATIENT’S TREATMENT OPTIONS ARE LARGELY DEPENDENT ON STAGE OF DISEASE & MAY INCLUDE:

SURGERY
TUMOR ABLATION OR EMBOLIZATION
RADIATION THERAPY
CHEMOTHERAPY
IMMUNOTHERAPY
TARGETED DRUG THERAPY

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