

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



APPROXIMATELY
1 IN 12 CANCER
DEATHS ARE DUE
TO LIVER CANCER

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



597,000

245,000

CASES PER YEAR



MEDIAN AGE

63

AT DIAGNOSIS

67

AT DEATH

LIVER CANCER “HOT SPOTS”

NORTH AMERICA
41,900

EUROPE
82,500

ASIA
609,600

CENTRAL AMERICA
11,200

AFRICA
64,800

SOUTH AMERICA
24,200

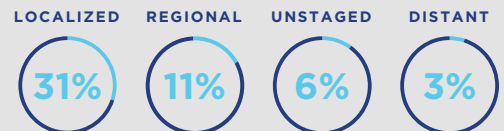
AUSTRALIA & NEW ZEALAND
2,900

Source: GLOBOCAN 2018

SURVIVAL RATES

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

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



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



OBEISITY



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