

# Liver Cancer: Surgery



Surgery offers the best chance to cure liver cancer. But only a small portion of people with liver cancer can have surgery. Different kinds of surgery may be done. It depends on the size of the cancer, where it is, how much it has spread, how well the rest of the liver is working, your overall health, and other factors.

## When might surgery be used for liver cancer?

Surgery is often the treatment of choice, if it can be done. But surgery may not be a choice if you have cirrhosis or other liver damage. It may also not be a choice if the tumor takes up too much of your liver, you don't have enough healthy liver, or both. Surgery isn't used if the cancer has spread outside your liver to other parts of your body. You might be able to have surgery if:

- **Your cancer is in only one part of the liver and has not grown into a major blood vessel.** The rest of your liver must be fairly healthy, and you must be otherwise healthy enough to have major surgery. In this case, you might be able to have surgery to remove the part of the liver containing the tumor.
- **Your cancer is only in the liver, but it's big or in many places.** You may be able to have surgery to remove your entire liver, followed by a liver transplant.

## Types of surgery for liver cancer

Below are two choices for liver cancer surgery.

### Partial hepatectomy (tumor resection)

The surgeon removes the part of the liver that contains the tumor. This is the preferred surgery if it can be done. But not many people with liver cancer can have this surgery. This is usually because the cancer is too big, it's in many parts of the liver, the tumor has spread into a major blood vessel, the cancer has spread to other parts of the body, or because the rest of the liver isn't working well enough.

The surgeon usually will use a long cut (incision) in the belly (abdomen). But sometimes it can be done laparoscopically. This is when the surgeon makes several small incisions in the abdomen. Long, thin surgical tools are put into the incisions to remove part of the liver. One of these tools (called a laparoscope) has a tiny video camera on the end to let the surgeon see inside your body and do the surgery.

### Liver transplant

This is when the surgeon removes the entire liver and replaces it with part or all of a liver from a donor. More people might be able to have this type of surgery, but its use is limited because it's hard to find a donor liver for transplant.

## Possible risks, complications, and side effects of surgery

Surgery for liver cancer is a major operation. It's important that you're healthy enough for it and that the healthcare provider thinks the benefits outweigh the risks. All surgery has risks. Some of the risks of any major surgery include:

- Reactions to anesthesia
- Blood clots in the legs or lungs
- Damage to nearby organs
- Pneumonia

- Infection
- Bleeding
- Pain, which gets better as your body heals

## Other risks from liver surgery

Along with the general risks above, liver surgery can sometimes cause these problems:

- **Extra bleeding.** Bleeding is a risk with any type of surgery, but it's even higher with liver surgery. This is because a lot of blood passes through the liver. The liver also makes clotting factors that normally help stop bleeding, and surgery can affect this clotting process.
- **Infection.** This is especially a concern in people who get a liver transplant. This is because they need to take medicines to suppress their immune system to keep it from rejecting the donor liver. Infections in people taking these medicines can be very serious. The medicines themselves can also have their own side effects.
- **Rejection of the donor liver.** Even though people who have had a liver transplant take medicines to suppress their immune system, sometimes the body might still reject the new liver.
- **Return of the cancer.** This is possible with partial hepatectomy. If even a tiny number of cancer cells are in the remaining part of the liver, with time they can grow into a new tumor.

## Getting ready for your surgery

Before you have surgery, you'll meet with your surgeon to talk about the procedure. Ask any questions and discuss any concerns you may have. This is also a good time to review the possible side effects of the surgery and talk about its risks. You might ask if the surgery will leave scars and what those scars will look like. You might also want to ask when you can expect to return to your normal activities. After you've discussed all the details with the surgeon, you'll sign a consent form that says that the healthcare provider can do the surgery.

Tell your healthcare team about all the medicines you take, including over-the-counter medicines, vitamins, herbs, and any other supplements. You may be told to stop taking certain medicines a few days before the surgery. You may also be told to follow a special diet.

## What to expect during surgery

When it's time for your surgery, you'll be taken into an operating room. An IV (intravenous) line will be put in your hand or arm. Medical staff will watch your heart rate, blood pressure, breathing, and other vital signs during the surgery. You'll be given medicine (general anesthesia) to make you sleep through the surgery so you won't feel pain.

What your surgeon removes and where the incisions are depends on the type of surgery you have.

After surgery, you'll be moved to a recovery room. Staff will keep track of you for another hour or two. Once you are awake and stable, you'll be moved to a regular hospital room.

## What to expect after surgery

When you first wake up, you might have some pain. You'll be given pain medicine as needed for a few days to help you feel more comfortable. It's important to control pain, so you can take deep breaths, cough, and get up and walk soon after surgery. Walking and moving is important for your recovery.

It will take you time to get back to eating normally and having regular bowel movements. You may have to stay in the hospital for a few days. How long you stay will depend on the type of surgery you have. People who have a laparoscopic hepatectomy can often go home sooner than those who have an open hepatectomy. This is because they have smaller incisions that tend to heal faster.

You can slowly return to most normal activities once you go home. But don't lift heavy things for several weeks. Always follow the instructions you get from your healthcare provider or nurse.

After surgery, you may feel weak or tired for a while. This is normal. The amount of time it takes to recover is different for each person. But you'll probably not feel like yourself for several months. You likely won't be able to drive for a while, but your healthcare providers will let you know for sure what you can and can't do.

## When to get medical care

Talk with your healthcare provider about problems you should watch for. Call right away if you have any of the following:

- Fever of 100.4°F (38°C) or higher, or as advised by your healthcare provider
- Chills
- Cough or shortness of breath
- Rapid, irregular heartbeat
- New chest pain
- Signs of infection around the incision, such as redness, drainage, warmth, and pain
- Incision that open up or edges that pull apart
- Any unusual bleeding or bleeding that soaks the bandage
- Trouble passing urine or changes in how your urine looks or smells
- Pain, redness, swelling, or warmth in an arm or leg

Know what problems to watch for and when you need to call your healthcare provider. Also be sure you know what number to call to get help when the provider's office is closed.

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