

Gender: Female

Age: 43

MRN: 832187

Diagnosis: Hepatocellular Carcinoma

History and Physical:

Doctor:

Hello, I see youve been experiencing fever, nausea, and vomiting for the past 20 days, and abdominal pain developed shortly after that. Youve received some treatment from a local hospital, is that right?

Patient:

Yes, thats correct. I had those symptoms, and I took medication from the local hospital. But it didnt seem to improve much.

Doctor:

Alright, Ill review your history. You were feeling fine around 30 days ago, but then these symptoms started. You had an ultrasound of your abdomen which showed a hepatic nodule and a dilated portal vein. We also did some tests for Hepatitis C and B. Your Hepatitis C test came back negative, and though one of your reports showed Hepatitis B as positive, the latest PCR test for Hepatitis B from Aga Khan showed "not detected." Have you been on any treatment for these conditions?

Patient:

No, I havent been on any treatment before.

Doctor:

Understood. Lets move on to your review of symptoms. You have not had hematemesis, ascites, or jaundice, which are good signs. Theres no history of significant weight loss, and you haven't needed

blood transfusions. Also, no fever or night sweats, correct?

Patient:

Thats right. I havent had any of those symptoms.

Doctor:

Thats reassuring. Now, Im going to review your past medical and surgical history. Youve had a hysterectomy two years ago, but there are no other significant medical issues or allergies.

Patient:

Yes, the hysterectomy was two years ago. No other health issues.

Doctor:

Alright. Lets move on to your family history. You mentioned that you have a history of diabetes and hypertension in your family. Is that correct?

Patient:

Yes, both my parents had diabetes and hypertension.

Doctor:

Thanks for sharing that. Now, regarding your social and psychological history, it looks like theres no history of depression, suicidal thoughts, or self-harm. Youre a housewife and have one daughter. You do not have any addictions to smoking, alcohol, or other substances. There are also no religious or cultural needs we need to consider, and no financial or educational issues reported.

Patient:

Yes, thats correct.

Doctor:

On your physical exam, you're conscious and well-oriented with a Glasgow Coma Scale of 15. Your heart sounds are normal, and there's no tenderness or distention in your abdomen. Now, let's go over your investigations. Your ultrasound on 4th September showed a hepatic nodule, coarse liver, and dilated portal vein. We did a CT scan on 7th September, and it showed an ill-defined lesion in your left hepatic lobe. The lesion was 5.8 x 4.7 x 5.9 cm, with peripheral enhancement and a central necrotic component. There was also a hepatic cyst and some small abdominal and mediastinal lymphadenopathy, but no pulmonary or osseous metastases.

Patient:

That sounds serious. What does it mean?

Doctor:

It indicates a significant abnormality in the liver, and based on your biopsy results from 21st September, the lesion is a poorly differentiated carcinoma, which means it's a type of cancer. We also performed lab tests, and your MELD score is 6, which indicates a relatively better liver function. Your AFP levels were normal, but we will continue monitoring them closely.

Patient:

I see. What's the next step?

Doctor:

Your case was discussed in the multidisciplinary team meeting on 15th October. Given the lesion's location and size, we're considering a left lateral segmentectomy, which is a surgery to remove part of the liver. We will need to do more tests, such as blood group and serum electrolytes, and review the CT scan from PKLI.

Patient:

Okay, I understand. What should I do now?

Doctor:

We will proceed with the necessary tests, and once the team meets again, we will have a clearer plan. Please follow up after the MDT discussion.

Follow-up Visit (21st October 2024)

Doctor:

Good to see you back. How have you been feeling since our last visit?

Patient:

I've been alright, no major issues, but I still have some pain in my abdomen.

Doctor:

I see. Your recent tests, including your ultrasound, show that the liver lesion is still present, and there's some collection of fluid near the surgical site. The histopathology report confirmed invasive carcinoma at the margin of the tumor. Your tumor has a size of 6.4 x 4.2 cm, and it's classified as pT1b, which means it's a solitary tumor without vascular invasion.

Patient:

So, what does this mean for my treatment?

Doctor:

Given that the tumor was found at the margin and is invasive, we're going to start chemotherapy with

Sorafenib. You'll need to take 200 mg twice a day. I'm also prescribing some medications for your general health, like Surbex and Omeprazole for any acidity. You'll also need Ispaghul husk for constipation.

Patient:

I understand. When do I start the chemotherapy?

Doctor:

You should start the chemotherapy a week after this visit. We will closely monitor your progress, and I want you to follow up after you begin the treatment.

Follow-up Visit After Surgery (29th November 2024)

Doctor:

How are you feeling today?

Patient:

I have some pain in my right leg and at the surgical site.

Doctor:

On examination, your wound is healing well, and the staples have been removed. Your ultrasound shows some fluid collection at the surgical site, but it's being partially organized, which is expected after surgery. We also noted some pleural effusion on the left side, but it's not alarming at this stage.

Patient:

I see. Is that normal after surgery?

Doctor:

Yes, thats quite common. Regarding your histopathology report, it confirms that theres invasive carcinoma at the margin of the liver tumor, but its still in the early stages, classified as pT1b with grade G2. That means were dealing with a manageable situation, but we need to proceed with chemotherapy to ensure it doesn't progress.

Patient:

What will happen next?

Doctor:

We will begin the chemotherapy with Sorafenib as planned, and Ill continue to monitor your lab results closely. Your next steps will include regular follow-ups and any necessary adjustments to your treatment based on how you're responding.

Lab Results (28th November 2024):

Total-BILI: 0.25

Direct-BILI: 0.09

ALT/AST: 27/29

Alk. Phos.: 100

Albumin: 4.26

Creatinine: 0.78

Na+: 139

K+: 4.33

INR: -

Doctor:

Your lab results are improving, and we'll continue to monitor your liver function closely. Keep up with the prescribed medications, and don't hesitate to reach out if you have any concerns.

Patient:

Thank you, doctor. I'll follow the treatment plan and let you know if anything changes.