What You Need to Know About Metastatic Liver Cancer

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Metastatic Liver Cancer — A Secondary Liver Cancer

Liver metastases are cancers that have spread to the liver but started elsewhere in the body. This type of cancer is much different than hepatocellular carcinoma, which is cancer that actually started in the liver.

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Of note is that the cancer cells found in liver metastases are not liver cells; rather, they are cells from the part of the body where the cancer started.

Other names for liver cancer metastases are secondary liver cancer, metastatic liver cancer, stage IV cancer or advanced cancer.

What is Metastatic Liver Cancer?

Metastatic liver cancer is when the cancer has spread to the liver from a different site in the body. To put this simply, if you have cancer in one area, this means that your cancer has spread to the liver.

Although any cancer can eventually spread, or metastasize, to the liver, it is most common for certain types of cancer to spread to the liver.

The most common types of cancer to spread to the liver are colon cancer and rectal cancer. In fact, Memorial Sloan Kettering Cancer Center estimates that up to 70 percent of patients with colorectal cancer go on to develop metastatic liver cancer.

Why does this happen? “Because the blood supply from the intestines is connected directly to the liver through a large blood vessel called the portal vein.”

Symptoms of Metastatic Liver Cancer

Often, there are no signs or symptoms of liver cancer. Or, symptoms do not develop until metastases develop.

Symptoms of metastatic liver cancer may include:

- Abdominal pain
- Bloating of the abdomen
- Edema (swelling) of the legs
- Jaundice (yellowing) of the skin and eyes
- Itching of the skin

- Fatigue
- Fever
- Malaise
- Loss of appetite
- Weight loss

If you notice any of these symptoms, you should discuss them with your physician.

Types of Liver Cancer Metastasis

The potential for liver cancer metastasis depends on where the original cancer is located.

For example, most liver metastases start in the colon, and up to 70 percent of colon cancer patients eventually develop secondary liver cancer. This may be because the blood supply from the intestines is directly connected to the liver through the portal vein (a large blood vessel).

Liver metastases may be present at the time of your diagnosis of the primary cancer, or you may be diagnosed months or years after tumors are removed.

Cancers of the colon, breast, pancreas, lungs, and ovaries can spread to the liver. In fact, any cancer can.

Colon Cancer

Colon cancer forms when uncontrolled cell growth occurs in the large intestine (cecum, colon, and rectum).

Most colon cancers start as small, benign (non-cancerous) tumors called adenomatous polyps, forming on the large intestine's inner walls. Some of the polyps may grow into malignant tumors over time.

Polyps can be removed if found during a colonoscopy — a test that allows your doctor to view the inner walls of the large intestine. But once malignant tumors have formed, cells may travel through the bloodstream and lymph system, spreading to other parts of the body, including the liver.

If colon cancer has spread to your liver, surgical resection is the most effective method for treating colon cancer that has spread to the liver, this according to researchers from the Duke University Medical Center. Other possible therapies are chemotherapy and radiation.

Breast Cancer

As with colon cancer, breast cancer cells can spread to the liver via the bloodstream and lymph system.

By the time breast cancer spreads to your liver, it cannot be cured. However, it can be treated to alleviate symptoms, maintain quality of life and halt the growth of the cancer.

Breast cancer that has spread to the liver is still treated with breast cancer therapies, including hormone therapy, chemotherapy, and radiation therapy. Surgery is generally not a good option for metastatic breast cancer, as it has not been shown to improve the chances of survival.

Pancreatic Cancer

If you have been diagnosed with stage IVB pancreatic cancer and it has spread to your liver, treatments will be focused on management of symptoms and pain.

Surgery is generally not an option, as pancreatic cancer in this advanced stage is not removable. Chemotherapy is usually the recommended course of action.

In the past, patients with stage IVB pancreatic cancer were considered incurable and rarely survived more than a year. However, newer treatments are giving patients more time and an improved quality of life.

Lung Cancer

About 40 percent of lung cancer patients are diagnosed at stage IV.

If cancer has spread to your liver, you may not have any symptoms at all. Metastases are usually not discovered until seen on a CT scan or PET scan.

Possible treatments for liver metastases from lung cancer your doctor may discuss with you include surgery, chemotherapy, radiation therapy and steroids.

Ovarian Cancer

Most of the time, ovarian cancer is quite advanced when first diagnosed and has already spread to other parts of the body. Women may not have symptoms in the early stages or symptoms are too vague.

Ovarian cancer at this late stage could still be cured through surgery and chemotherapy, but reoccurrence after treatment generally isn't curable.

Treatments may control the further growth of metastatic ovarian cancer and treat symptoms and pain. Chemotherapy, radiation, and surgery are options to treat metastatic ovarian cancer.

Next page: Learn about the treatment options for metastatic liver cancer and more.

Treatment Options for Metastatic Liver Cancer

According to *Cancer Research UK,* the treatment plan for metastatic liver cancer will ultimately depend on the initial type of cancer that you had. "The aim of treatment depends on where the cancer started and whether it has spread anywhere else. For some types of cancer that have spread to the liver, it may still be possible to cure your cancer. For other types of cancer, the aim may be to control your cancer and symptoms. This is called palliative treatment."

That being said, there are a variety of options available, should you decide that treatment is necessary:

- **Surgery** – Surgery aims to remove all or a portion of the tumor. However, surgery is not possible for all patients; it can be a lengthy procedure, so if you are in bad health, you may not be a "surgical candidate." Also, if you have lots of tumors, other options may be a better option.
- **Chemotherapy** – Chemotherapy is a medication or a combination of medication that attempts to kill cancer cells. There are a variety of options available, and your physicians will select the ones that best match your particular type of cancer cells. Keep in mind that chemotherapy medications have a laundry list of side effects, so depending on your goals (cure versus comfort) you may choose a different therapy.
- **Biologic therapy** – Biologic therapy may be indicated if it is helpful for your primary cancer. Biologic therapy prevents cancer cells from dividing and growing.
- **Radiation** – Radiation uses high energy waves to kill cancer cells, which prevents cancer from growing and controls cancer symptoms.

There are various other types of treatments that can also be used, but this is a summary of some of the more common treatments you may see to treat metastatic liver cancer.

Complications

You may have complications if tumors have spread to the large area of the liver. These may include blocked bile

flow, pain, and liver failure.

Prognosis of Metastatic Liver Cancer

According to the American Cancer Society, unless your physician tells you otherwise, a survival rate is often listed as a 5-year survival rate. A 5-year survival rate is an estimate of a number of people who are still alive in five years, who have the same type of cancer and the same stage of cancer.

As scary as it can be to read these statistics, remember that these are *generalizations* –keep in mind that your 5-year survival rate could be different based on your specific cancer stage and other factors, such as your general health and other factors that are unique to you.

The National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) database have also compiled survival rates based on summary stages:

- **Localized** – Cancer that has been confined to the liver and is typically stages I, II and sometimes stage III. The 5-year survival rate is about 31%.
- **Regional** – Cancer has spread to nearby organs and/pr lymph nodes, and is stages IIIC and IVA. The 5-year survival rate is about 11%.
- **Distant** – Cancer has spread to spread throughout the body and is stage IVB. The 5-year survival rate is 3%.

Although these numbers seem shockingly low, they are higher for people who have surgical resections, regardless of the stage of their cancer – this increases the 5-year survival rate to about 50 percent.

Individuals who obtain a liver transplant achieve a 5-year survival rate of 60 percent to 70 percent.