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ENDOSCOPIC BAND LIGATIONVERSUS PROPRANOLOL IN PRIMARY PROPHYLAXIS OF ESOPHAGEAL VARICEAL BLEEDING AND IMPROVEMENT OF SURVIVAL IN HEPATOCELLULAR CARCINOMA PATIENTS

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ABSTRACT

Background & Aims: *Hepatocellular carcinoma (HCC) is ranked as the 5th common type of cancer worldwide and is considered as the 3rd common reason for cancer-related deaths. It is the most common primary malignant tumor of the liver. The effect of HCC progression and its infiltration to nearby portal tracts may worsen portal hypertension (PH) leading to acute variceal hemorrhage (AVH) worsening patient survival. The aim of this study is to compare between endoscopic band ligation (EBL) and propranolol in the primary prophylaxis of esophageal variceal bleeding and improvement of survival in HCC Patients.*

Materials and Methods: *This study was conducted on 330 cirrhotic patients all of them have esophageal varices (EVs), were divided to four groups; group I that included 60 cirrhotic patients with early stage HCC, group II that included 85 cirrhotic patients with intermediate stage HCC, group III that included 105 cirrhotic patients with advanced stage HCC and group IV that included 80 cirrhotic patients without HCC as a control group. All groups were subsequently subdivided to two subgroups; subgroup (a) that included patients who underwent EBL and subgroup (b) that included patients who received propranolol.*

Results: *The primary prophylaxis from E.V. bleeding over 24 months follow up period was significantly higher in all patients treated by EBL than that in all patients treated by propranolol in all groups (p value: 0.0343, < 0.0001, < 0.0001 and 0.0403 respectively). At the same time the bleeding attacks in intermediate and advanced stages HCC patients who received propranolol were significantly more than that in control group (p value:0.0485 and 0.0301 respectively) while there were no significant difference between group I with early HCC and control group (p value: 0.7739).*

Conclusion: *EBL in this study was superior to propranolol in the primary prophylaxis of EVs bleeding in patients with HCC. Moreover, EBL were most effective in the primary prophylaxis from EVs as well as improving survival in patients with intermediate and advanced stages HCC when compared with propranolol.*

KEYWORDS: *Non-Selective Beta Blockers, Primary Prophylaxis, Esophageal Variceal Bleeding, Hepatocellular Carcinoma, Portal Vein Thrombosis*

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