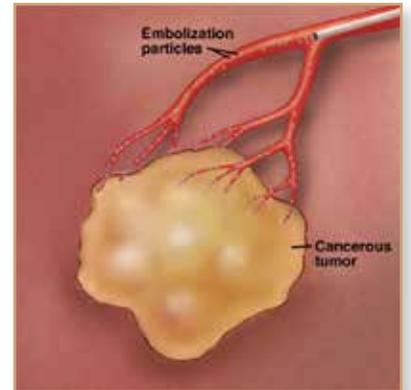




## Chemoembolization Therapy

Chemoembolization therapy is used to treat liver tumors or for postsurgical adjunctive treatment. Chemotherapy medicines are injected into the liver through blood vessels, delivering a high local dose of cancer killing medicine directly to the tumor or tumor area. Another material called an embolic agent is also put into the liver's blood vessels which cuts off the blood supply and essentially starves the tumor(s) of the blood it needs to survive and grow.



Using x-ray guidance, a small catheter is inserted into an artery, usually in the upper thigh region, and fed up to the liver. Special dye is first injected which allows pictures to be taken and the vessels surrounding the tumor to be visualized. Then the chemotherapy medicine and embolic material are injected into the liver directed at the tumor.

## Expected Side Effects:

All of the following signs are part of a normal recovery after Chemoembolization. Within a month after the procedure you should be back to your usual self.

- Right upper abdominal pain for the first few days to week. It may radiate to the shoulder or back. You will be given medicine to help control the pain. This pain usually gets better within the first week.
- Extreme fatigue or tiredness for two to four weeks after the procedure.
- A poor appetite which may result in weight loss before your appetite returns - continue to eat even if you have no appetite. Small, frequent meals are the best way to prevent weight loss.
- Fevers up to 101 degrees for one to two weeks after the treatment.
- It is normal to have a bruise and soreness where the angiogram catheter went in.

## Going Home the Morning after Treatment:

**\*\*A responsible adult must accompany you home after the procedure.\*\***

**\*\*This is in place for your safety\*\***

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## Diet:

- There are no dietary restrictions specifically due to this procedure. If you had restrictions prior to other treatments or diseases such as diabetes, cardiovascular disease, or renal disease, continue with these. Alcohol consumption is not recommended.
- Drink 6 to 8 glasses of liquid each day. It is especially important to do this if you are vomiting. If your fluid intake is restricted, please continue to follow those guidelines. Good liquids to drink are water, juices and milk.
- Nausea is common following this procedure. Eat light for the first 24 hours and try to stay away from foods that trigger the nausea. A prescription for anti-nausea medicine will be given to you.

## Activity:

- Avoid lifting over 10 pounds or strenuous activity for 3 days following the procedure or until the catheter insertion site is completely healed ( whichever is longer).
- Expect to be tired for the first week after the procedure and gradually gaining strength back. Do not plan anything active or requiring your close attention for the first few days following discharge from the hospital. If you work, two weeks rest time should be adequate.

## Site Care:

- Leave dressing on for 24 hours, then you may gently remove and shower.
- Replace with Band-aid until puncture site is healed, usually in 24-72 hours.
- Do not put any medications or ointment on puncture site.
- Do not soak or submerge site until completely heals – about 5 days (no bathtubs, hottubs, Jacuzzi, swimming).

## Medications:

Usually, your pre-procedure medications do not change. You will be told before discharge if any of your medicines change. The following medications will be prescribed to you upon discharge IN ADDITION to your normal medicines:

1. **Protonix (pantoprazole), a stomach acid reducer. Take this every day for 1 month regardless of stomach pain.** This is only prescribed for one month. If you would like to continue this medication after one month, please see your liver doctor or primary care doctor.
2. Narcotic pain medicine, usually oxycodone (generic for Percocet). Take this if you have pain, but not more frequently than every six hours
  - Do not drive after taking this medicine, it causes drowsiness.
  - Avoid medications containing Acetaminophen and Tylenol.

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## Medications:(cont.)

3. Sennakot or Dulcolax (similar medications), prevent or treats constipation. Take twice a day, morning and night as needed, if you are taking the narcotic pain medicine or are having constipation.
4. Zofran 4-8 mg, anti-nausea medicine. Take this if you have nausea, but not more frequently than every 8 hours.

## Follow Up:

- We recommend calling your liver doctor/oncologist to set up a follow up appointment after you are discharged from the hospital. Every doctor is different in when they want to see their patients after treatment, but some want to see you as soon as two weeks following.
- Follow up imaging is usually ordered by us or your oncologist and is done 2-3 months after treatment. The timing of follow up imaging may vary depending on your doctor's preferences.

## When to Get Medical and Emergency Help:

### **Contact the On-Call Interventional Radiologist:**

- If you have a temperature over 101.0°F
- If your pain is not controlled
- You have questions about your treatment or new prescriptions
- You have pain where the treatment catheter was placed that is worsening more than improving
- You have any other symptoms you are concerned about within 2 weeks of treatment

### **Go to your nearest Emergency Room:**

- Your treatment site starts bleeding and will not stop after 10 minutes of firm pressure
- You have shaking chills or a temperature over 102°F
- Sudden shortness of breath
- Severe, worsening abdominal pain

**If you have questions or concerns about your procedure or post procedure symptoms, please call us at 763-432-4310 during office hours (M-F 7am-5pm). If after 5pm or weekend, please call 763-398-8710 to page the on-call physician.**