



## HEPATOBLASTOMA: PRESENTATION OF A CLINICAL CASE

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**ABSTRACT**

**Objectives:** Describe the frequency, possible causes, clinical, diagnosis, prognosis, complications and treatment of this disease.

**Method:** A study of a pediatric patient with liver tumor lesion was carried out, following up from the detection of the lesion, carrying out diagnostic tests, surgery, and post-surgical follow-up.

**Result:** 6-month-old patient with liver tumor lesion detected at 4 months of age. Neo-adjuvant chemotherapy + Right Hepatectomy + Adjuvant Chemotherapy were followed; with good response to treatment. At the moment the patient remains in controls and free of disease.

**Conclusion:** Most common childhood liver tumor. The surgical approach with tumor-free resection margins is the goal for cure. Liver surgery is an important chapter in management and should be performed in specialized centers and with professionals trained for pre, trans and postoperative management.

**KEYWORDS :** Hepatoblastoma, tumor, Quito, Ecuador

**INTRODUCTION**

Due to the increase in pediatric cancer cases worldwide, it has now become essential to quickly have access to a trained health system in order to provide adequate treatment and improve the patient's prognosis.

Pediatric liver tumors frequently manifest before 3 years of age; according to the national registry of tumors in Ecuador, they occupy the seventh place of incidence in children, with a frequency of 2.9%.

The most frequent malignant liver tumor in children is Hepatoblastoma; and of these 5% are associated with genetic factors.

Currently adequate treatment even achieves patient healing, this includes neoadjuvant chemotherapy, surgery with resection-free margins, and adjuvant chemotherapy.

**METHODOLOGY**

A study of a pediatric patient with a liver tumor lesion was

carried out, following the detection of the lesion, carrying out diagnostic tests, surgery, and post-surgical follow-up.

The information obtained rests on the Word computer system and the image of those who carried out the study.

**CLINICAL CASE PRESENTATION**

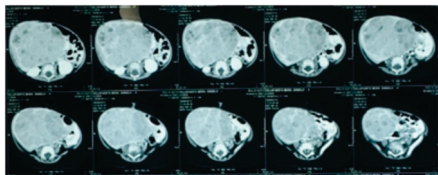
6-month-old female gender patient. The girl's parents reported that at 4 months of age the girl presented several episodes of postprandial vomiting, after a few days they notice a slight icteric tint in sclera; which is why they went to a specialist.

The physical examination at inspection calls attention to bulging at the level of the right hypogastrium which causes asymmetry; on palpation a liver-dependent tumor lesion that expands up to 4 fingers below the right rib margin that extends beyond the abdominal midline.

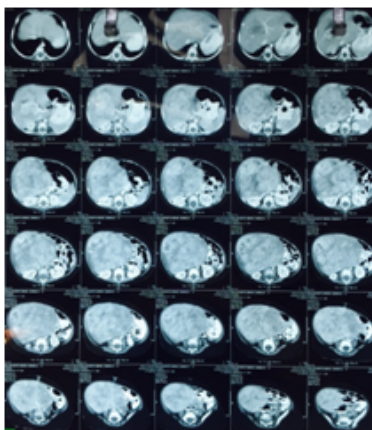
Extension tests were requested for planning possible treatment; among which we could highlight a simple and

contrasted computed tomography scan where liver-dependent tumor lesion was cataloged as PRETEXTIII without evidence of metastasis.

Patient received neoadjuvant chemotherapeutic treatment obtaining significant reduction in tumor size; new tomographic control classifies it as PRETEXT II.

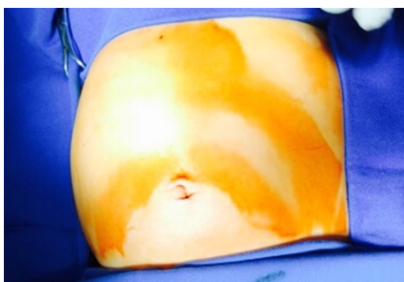


**Image 1: Neoadjuvant pre-chemotherapy tomography**



**Image 2: Tomography Post neoadjuvant chemotherapy**

A surgical procedure was performed (laparotomy + right hepatectomy + cholecystectomy), an uncomplicated surgical procedure. In the post-operative period, the patient presented acolia; for this reason, after 16 days of hepatectomy, a new surgical procedure was performed to explore the bile duct, finding dehiscence at the level of the left hepatic duct, which was repaired. After 6 days, the patient's stools become normal.



**Image 3: Asymmetry of the right abdomen due to liver tumor injury**



**Image 4: Right Hepatectomy Product**

Result of Surgical specimen in histopathological study was Hepatoblastoma of mixed component (fetal and embryonic).

Subsequently, the patient continued his treatment (adjuvant chemotherapy).

At the moment the patient has finished treatment, he remains in semi-annual control and is free of disease.

## DISCUSSION

The most frequent malignant liver tumor in children is Hepatoblastoma. With the advancement of medical science today, neoadjuvant chemotherapy, surgery with resection-free margins and adjuvant chemotherapy are described as treatment, obtaining survival rates compatible with those reported in the literature.

## CONCLUSION

Most common pediatric liver tumor. The timely detection and adequate treatment by a team of specialized professionals is vital. Liver surgery is a very important chapter in the treatment of liver tumors, since resective surgery (hepatectomy) with tumor-free resection margins associated with multidisciplinary treatment improve the prognosis, even achieving cure.

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