

# **Cholangiocarcinoma : Patient Case**

**Do-Youn Oh, MD., PhD.**

**Medical Oncology, Seoul National University Hospital  
Cancer Research Institute, Seoul National University  
College of Medicine**

# Disclosures

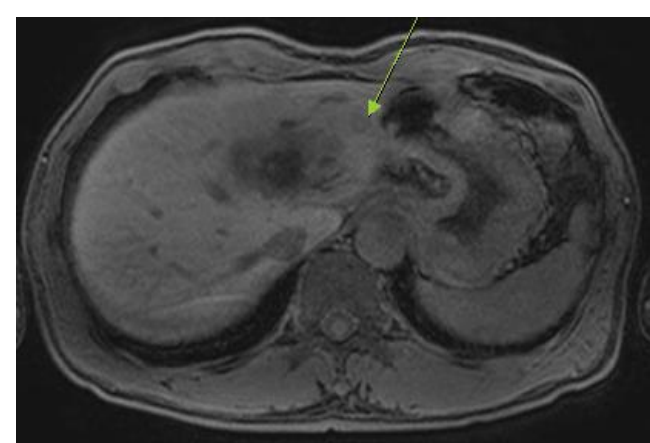
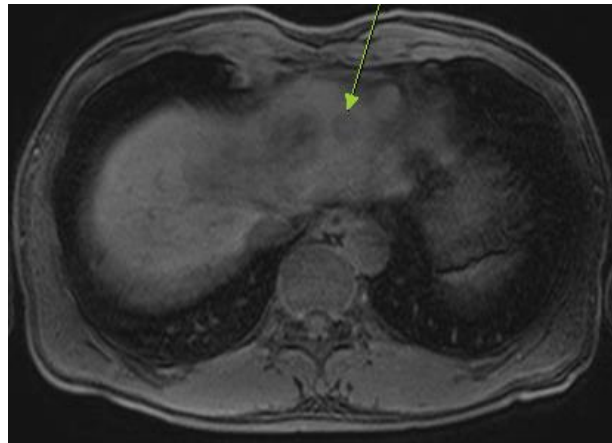
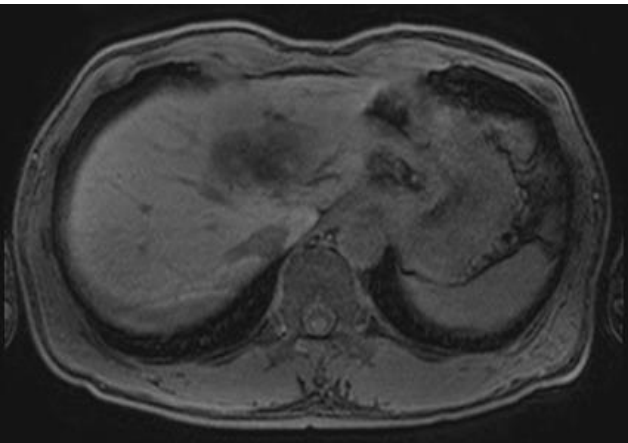
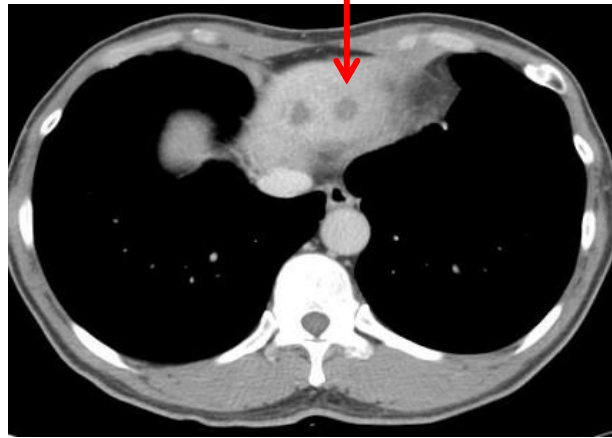
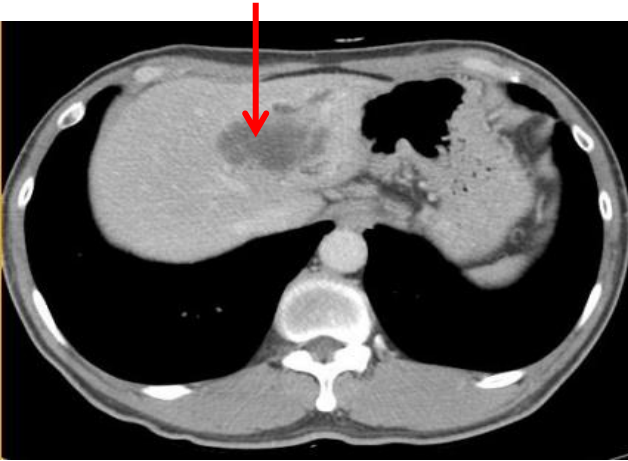
- Do-Youn Oh has nothing to disclose

# Case

- M/59
- C.C : abdominal pain, onset: 2 months ago
- LFT: Prot/albumin 6.8/4.2 , t-bilirubin 0.4, ALP 156, OT/PT 34/18
- PT:97%
- CA19-9:1380

- CT, MRI (2012-12-10)

Intrahepatic cholangiocarcinoma with intrahepatic liver metastasis,  
LNs along left gastric artery and hepatoduodenal ligament



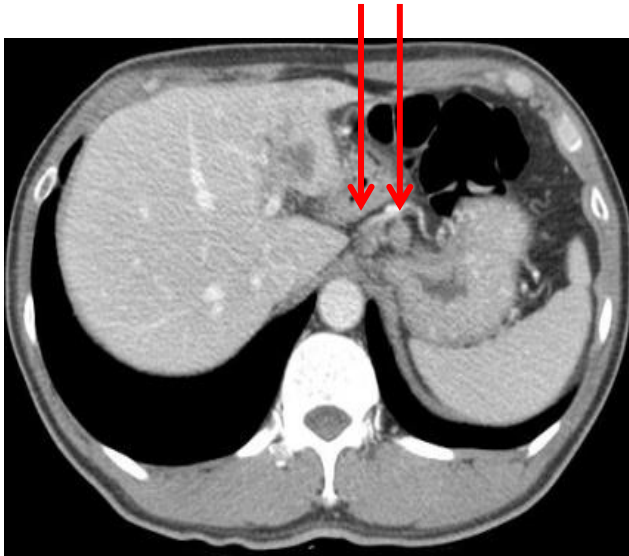
6.2cm mass in S4

S2 nodule

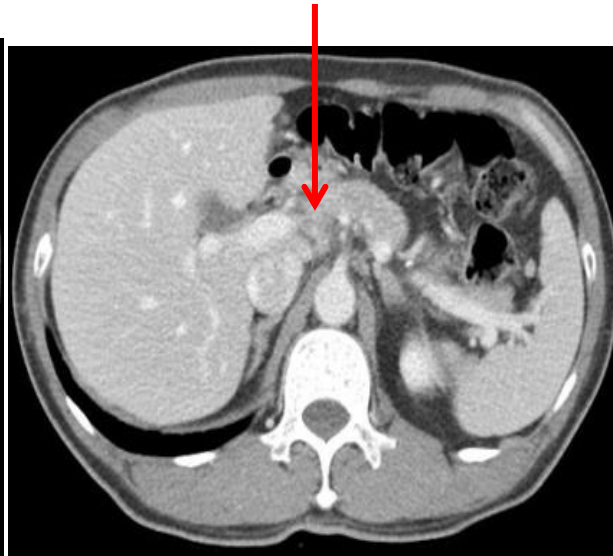
S3 nodule

- CT, MRI (2012-12-10)

Intrahepatic cholangiocarcinoma with intrahepatic liver metastasis,  
LNs along left gastric artery and hepatoduodenal ligament



LNs along left gastric  
artery



LNs along  
hepatoduodenal ligament

- PET(2012-12-14)

Intrahepatic cholangiocarcinoma with intrahepatic liver metastasis,  
LNs along left gastric artery and hepatoduodenal ligament



S4, S3 lesions



S2 lesion



LNs along  
hepatoduodenal ligament

→ Stage IVA

# Discussion point

- Indication of operation
  - : requirement for curative resection?
  - :lymphadenectomy during surgery?

# ▪ Left hemihepatectomy with LN dissection 2012-12-20

- Op finding:

- ✓ Extensive LN metastasis (+) , Not curative, remained LNs (R2)

- Pathology:

- Cholangiocarcinoma, poorly differentiated

- Size of tumor: 6.3 x 5.5 x 5.0cm

- Gross type : mass forming type

- Serosal invasion: Glisson's capsule invasion

- Direct invasion of adjacent organs : absent

- Surgical margins : free of tumor (safety margin : bile duct: 0.4cm, hepatic parenchyme :0.5cm)

- Lymph node: metastasis in 8 out of 16 lymph nodes

- Portal vein invasion: no invasion, Hepatic artery invasion: no invasion

- Hepatic vein invasion: invasion of intima

- Microvessel invasion: present., Perineural invasion: present



- Postoperative CT (2013-01-08)



Residual 1.5cm sized LN at hepatoduodenal ligament

- CA19-9: 810
- ECOG 1

# Discussion point

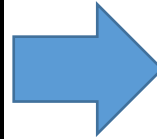
- Indication of palliative chemotherapy  
:Regimen?

- **Palliative Gemcitabine/cisplatin : 2013-01-14 – 2013-06-18**

Baseline (2013-01-08)



After #8 cycle (2013-07-05)



SD

- CA19-9: 810

- CA19-9: 22

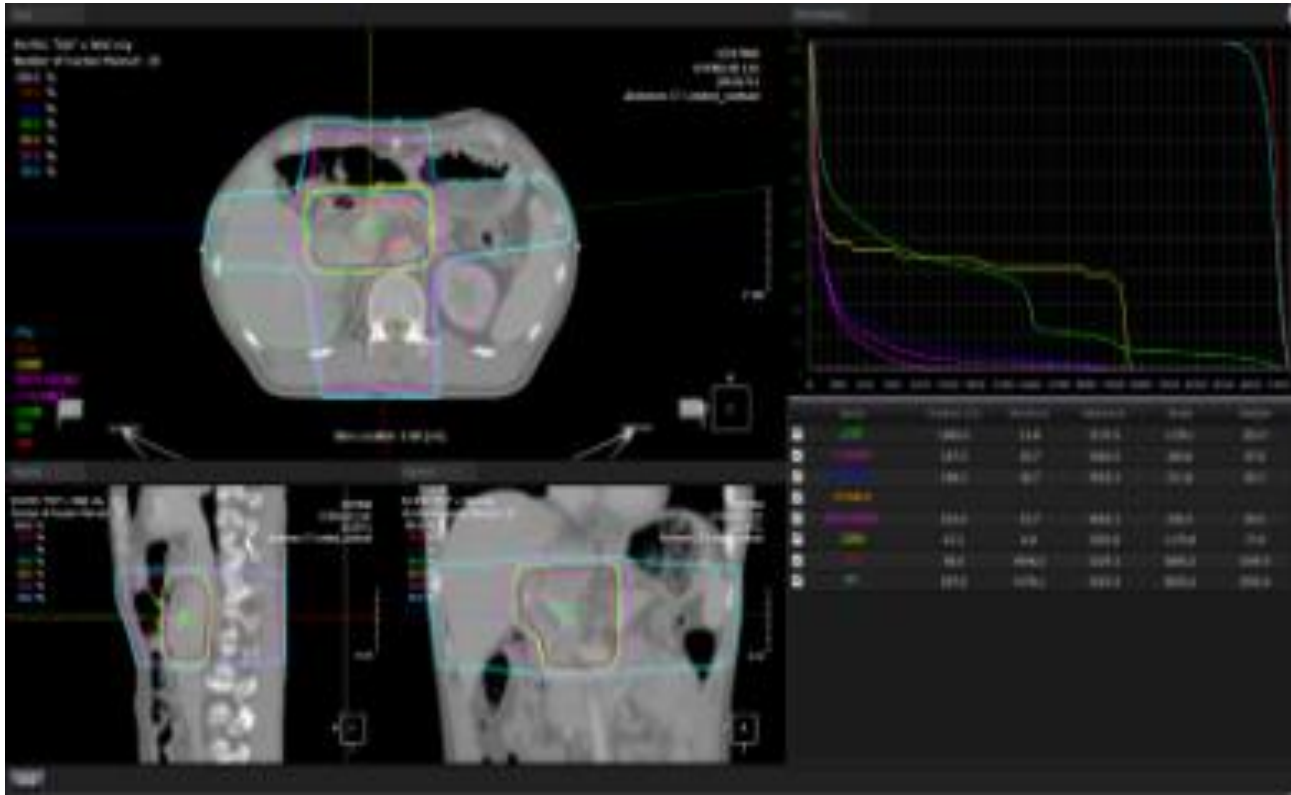
# Discussion point

- Indication of radiotherapy
  - :Role of radiotherapy?
  - : When is radiotherapy needed?

- **Involved field Radiotherapy (2013-07-16 – 2013-08-23)**

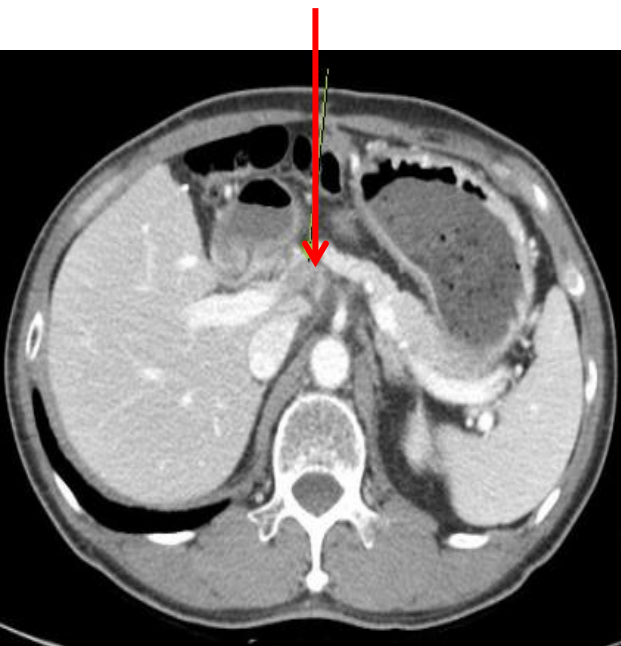
- : To remnant LNs along hepatoduodenal ligament

- : 50.4 Gy/28 Fraction, with 5-FU radiosensitizer

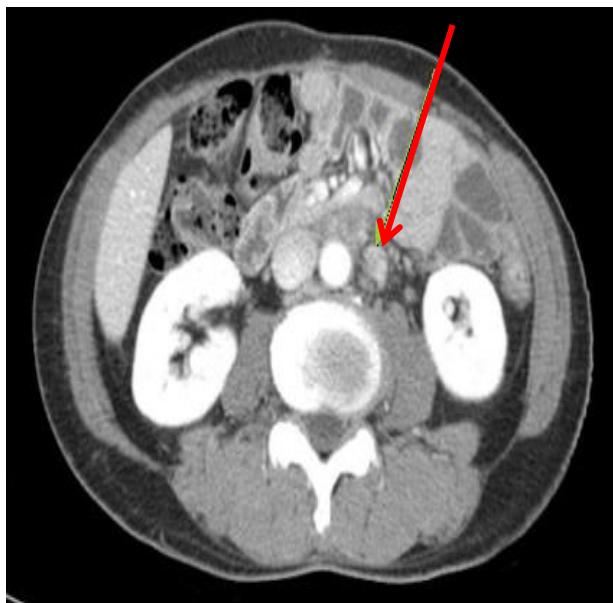


- CA19-9: 22            • CA19-9: 16

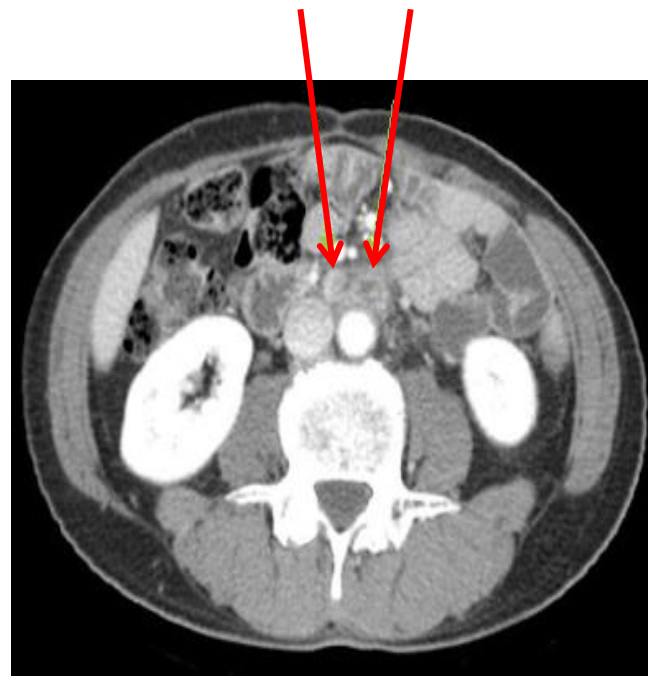
- After 4 months of treatment-free period, disease progressed
- CT (2013-12-19)



Increased LNs along hepatoduodenal ligament



Paraaortic LN, New



Retroperitoneal LN, New

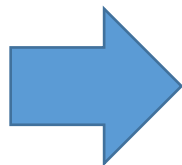
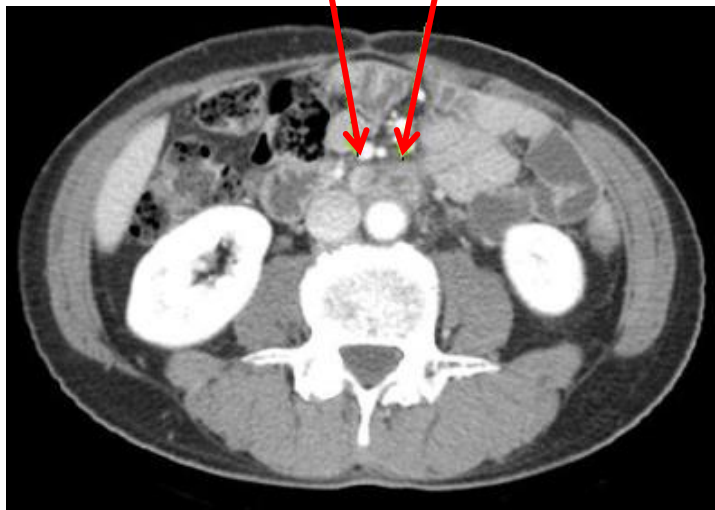
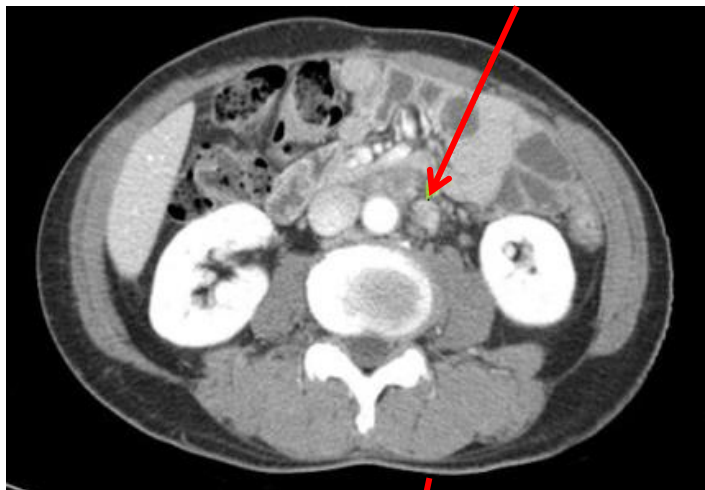
- CA19-9: 16 → 116
- ECOG 2, abdominal pain, low back pain

# Discussion point

- Evidence of palliative 2<sup>nd</sup>-line chemotherapy
  - : Indication?
  - : Which regimen?

- **Palliative Capecitabine/Cisplatin #6** (2013-12-26 — 2014-04-10)

- CT (2013-12-19)



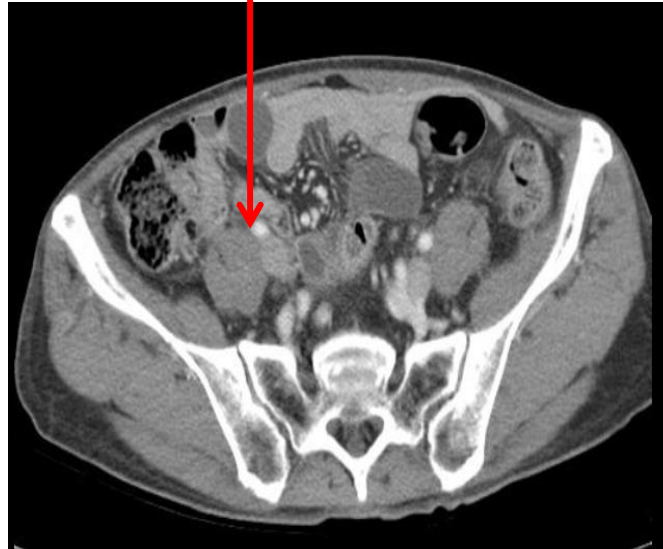
- CT (2014-4-28)





- **Palliative Capecitabine/Cisplatin #6** (2013-12-26 — 2014-04-10)

- CT (2014-4-28)



Rt external iliac LN. New

PD

- CA19-9: 116→114→59→51→130
- ECOG 1, Right pelvic pain, abdominal pain

# Discussion point

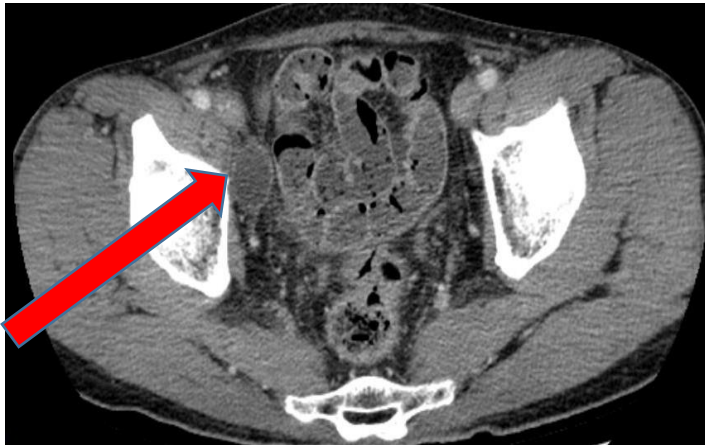
- Evidence of palliative chemotherapy, 3<sup>rd</sup> -line , or later-line

: Indication?

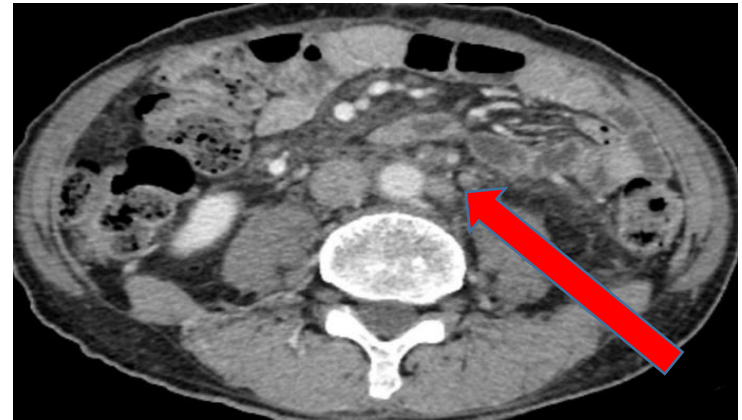
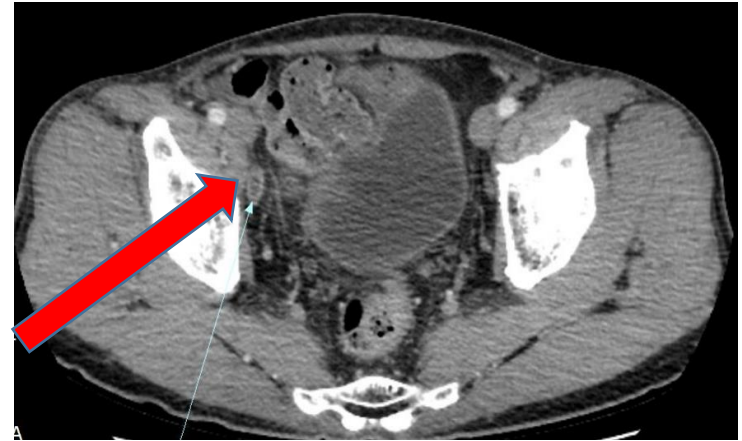
:Which regimen?

- Anti-PD1 antibody phase I clinical trial ( 2014-06-05--2015-04-16)

- CT (2014-06-03)



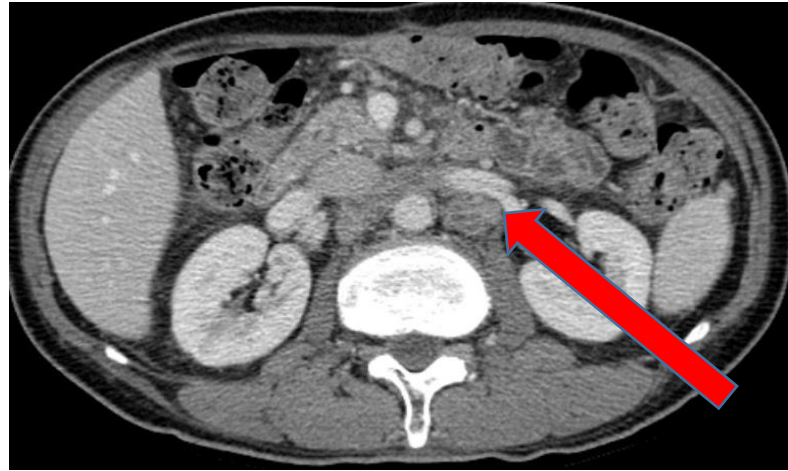
- CT (2014-07-31)



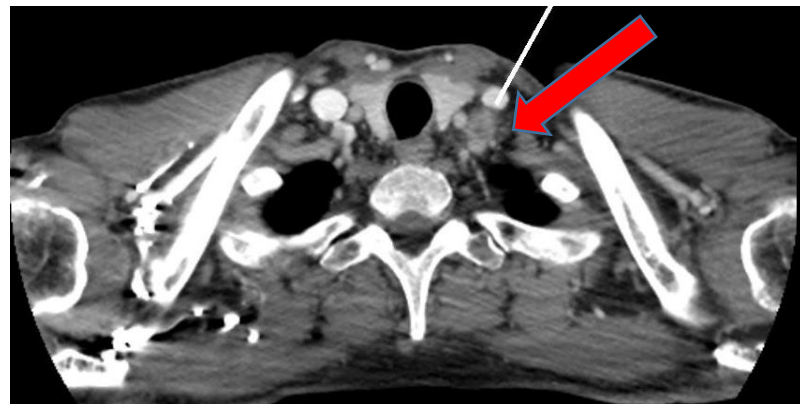
PR

- **Anti-PD1 antibody phase I clinical trial (2014-06-05--2015-04-16)**

- CT (2014-06-03)



- CT (2014-07-31)



PR

# Summary of Case

- 2012-12 diagnosed as Stage IVA, Cholangiocarcinoma
  - ➔ Palliative Left hemihepatectomy with LN dissection (2012-12-20)
  - ➔ Palliative 1<sup>st</sup>-line Gem/Cis (2013-01-14 – 2013-06-18)
  - ➔ Palliative RT to remnant LN (2013-07-16 – 2013-08-23)
  - ➔ Palliative 2<sup>nd</sup>-line Cape/Cis (2013-12-26 — 2014-04-10)
  - ➔ Palliative 3<sup>rd</sup>-line Anti-PD1 Ab (2014-06-05--2015-04-16)

Overall survival: 30 months

# Discussion point

- Indication of operation
  - : requirement for curative resection?
  - :lymphadenectomy during surgery?
- Indication of palliative chemotherapy
  - :Regimen?
- Indication of radiotherapy :Role, when?
- Evidence of palliative chemotherapy, 2<sup>nd</sup>-line , or later-line
- Role of immuno-oncology agents