



Chemoembolization

Name: _____

The following information is a brief description of Chemoembolization. If you have any questions after reading this handout, please speak with your nurse.

What is Chemoembolization?

Chemoembolization is a method used to give chemotherapy medication directly to liver tumors.

A long, thin tube called a *catheter* is inserted into a blood vessel on the right side of the groin area and advanced to a location as close as possible to the liver tumor. The doctor then injects dye and x-rays are taken to determine the condition of the *portal* (liver) vein and blood supply to the tumor.

After this is done, the chemotherapy, called Adriamycin, and other substances (collagens and lipids) are injected into the catheter. Giving the chemotherapy with these other substances will help the chemotherapy stay in contact with the tumor cells longer. This makes the treatment more effective. These other substances also *embolize* or block the flow of blood to the tumor. This cuts off the tumor's blood supply and deprives it of oxygen and nutrients. Once the chemotherapy has been injected, the catheter is removed and pressure is applied over the site.

Where is the Procedure Done?

The procedure is done in the Interventional Radiology Department on the 2nd floor of Tisch Hospital.

How Long Does it Take?

The procedure takes 2 1/2 to 3 1/2 hours. This does not include transportation time to and from the Interventional Radiology Department.



What Happens Before the Procedure?

- Either your doctor or an *interventional radiologist* (a doctor who specializes in chemoembolization) will explain the procedure to you. After this explanation, you need to sign a consent form giving your permission for the test.
- Your doctor will have you stop taking aspirin, ibuprofen, or blood thinners 1 week before the test.
- Tell your doctor and nurse if you are taking *Metformin* (Glucophage). Your doctor will stop this medication before the test.
- An intravenous line (IV) will be started as soon as you are admitted. Antinausea medications such as Zofran as well as antibiotics will be given before the treatment. In some cases, Adriamycin can cause nausea. Antibiotics are given to prevent infection.
- Tell your doctor and nurse if you have asthma, or are allergic to iodine or shellfish. In addition, tell your doctor and nurse if you ever had a reaction to *contrast material* (dye) used for other medical tests. Your doctor will order medication to prevent an allergic reaction.
- Do not eat or drink after midnight before the procedure.
- Your nurse will give you your regularly scheduled medications which you can take with a sip of water. Patients with diabetes should check with their doctor about taking insulin the morning of the procedure.
- Immediately before the procedure, urinate to empty your bladder and change into a hospital gown.
- You will be helped onto a stretcher and Escort Personnel will take you to the procedure.

What Happens During the Procedure?

- You will lie on an x-ray table.
- The area where the catheter will be inserted (usually the right groin area) will be cleansed and a local anesthetic is injected to numb the area.
- The catheter is inserted. Dye is injected to visualize the blood vessels and X-rays are taken.
- After the x-rays are taken and the right location is identified, the medication will be injected.
- The catheter is removed and pressure is applied over the site. This prevents bleeding.
- A bandage is applied over the catheter insertion site.



What Happens After the Procedure?

- You will be returned to your room by stretcher.
- You must stay in bed and keep the leg used for catheter insertion straight for 4 hours.
- Your nurse will check your vital signs (blood pressure, pulse and respiration) and the catheter insertion site for any bleeding, bruising or discoloration. The color and temperature of the leg used for catheter insertion will also be checked.
- At first, you will be allowed to drink clear liquids such as tea, water, clear broth or white grape juice. If you can tolerate them, you may have a bland diet such as hot cereal, mashed potatoes, rice, white toast or saltine crackers.
- You will continue to receive IV fluids and the remaining doses of your antibiotics.
- Your temperature will be checked often since a fever is a common side effect of treatment. It may be checked every two (2) hours during the night.
- Your nurse will let you know when you can get out of bed and when you can resume normal activities. The nursing staff will help you to get up the first time .
- You may have nausea, chills, pain or bleeding at the insertion site.

When Should I Call the Doctor?:

Call your doctor if you have:

- continued bleeding, hardened areas, black and blue marks, or swelling of the groin area
- a temperature over _____
- any sudden change in pain or fever