

HACE TREATMENT SAVES CANCER PATIENT

BY WYNCE NOLLEY

When 74-year-old Larry Mettai, a retired oilfield worker, found that he had an inoperable tumor on his liver last year he asked his doctor one question: "Where do we go from here?"

In the month's following his diagnosis, Mettai frantically searched high and low for an effective treatment.

"While waiting I did everything I could," says Mettai. "I contacted friends, I had persons that worked at the Heart Hospital and were doing research for me, and we were all going all over the country seeing what was available."

It wasn't long before Mettai's oncological surgeon, Dr. Henri Kaufman, recommended him for a chemotherapy treatment called Hepatic Artery Chemoembolization, or HACE, which could be performed right in Lafayette under the care of Dr. Blaine Hoppe, an interventional radiologist with Acadiana Radiology Group working through Our Lady of Lourdes Regional Medical Center.

The HACE procedure works by inserting chemo-infused beads directly into the tumor. This method delivers the chemotherapy treatment to the targeted tumor in order to starve it of the fuel, such as oxygen and nutrients, that it needs for growth.

"We target the tumor through the artery feeding it," explains Hoppe. "We fill the tumor mass with beads until the blood supply stops and then the beads sit in there for over three weeks and infuse high dose chemotherapy directly into the tumor, while at the same time cutting the blood supply off."

This chemotherapy treatment is especially effective, as it can target a specific tumor and use a higher dose of chemotherapy agent not normally used systemically, which also allows the patient to avoid much of the illness and side effects of traditional chemotherapy.

According to Hoppe, each HACE treatment is a 45-minute to one-hour session with the medication lasting about three weeks. Hoppe performed three HACE treatments on Mettai over a 12-week period. A follow-up CT scan was performed just one month after Mettai's completion of the HACE regimen and the images revealed that the previously inoperable tumor had reduced from 7 centimeters to just 4 centimeters in size.

"We do three cycles of that and then we check with CT [scans]

and MRI and imaging and hopefully we've dramatically shrank it, which was the case with Mr. Mettai, fortunately," explains Hoppe. "And then if we get it small enough we can go in following that and actually ablate it with electro current, which is how we finished off Mr. Mettai. Basically it's the analogy of shrinking it down and cutting it out."



Photo by Robin May

"I never had any side effects," says Mettai. "By the next day, I was back walking and doing my normal routine of exercise ... and then we'd come back and do it again."

According to Hoppe, the success of the HACE treatment depends on the patient and the specific details of the tumor itself. In Mettai's case, he was fortunate to have a tumor located on an accessible part of his liver.

"The location was very easy to target," says Hoppe. "Unfortunately everybody doesn't respond the same way. Some people respond really, really well as he did. Some people don't get a lot of response. And it just depends on the tumor, the person and the whole deal."

Hoppe also says that a patient's individual reaction to chemotherapy is a major factor in the success or failure of his HACE treatment.

"It's not an exact science unfortunately," admits Hoppe. "You can't predict how exactly it's going to come out. It's like some people have a dramatic response to chemotherapy, some people have almost none. Some people would achieve a complete remission and live long-term and some people don't. Unfortunately it all kind of applies. Not everybody responds in the same way."

But thanks to the procedure's precision in targeting the chemotherapy agent, typically the biggest obstacle to a patient's recovery is the healing of the puncture wound in the groin.

"To do this is just a puncture in the groin. To ablate the tumor is just another puncture," says Hoppe. "There's no big incision. There's no stitches. There's nothing like that. We let you lie down for six hours to let the hole heal up in your groin and then you're up walking around; you can walk out of the hospital."

Follow up imaging studies indicated that the procedure was a success. Mettai is now in remission and eager to enjoy his well-deserved retirement.

"Right now it just feels great," says Mettai.