Liver Metastases with Acute-on-Chronic Liver Failure

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Clinical Image

A 44-year-old woman with severe jaundice presented at the Department of Hepatobiliary Surgery. Blood analysis revealed a total bilirubin of 22.1 mg per deciliter (normal range, 0.2 to 1.2 mg per deciliter). The patient had a history of chronic hepatitis B, and a history of undergone a modified radical mastectomy for 3 years. Magnetic resonance imaging indicated cirrhosis with diffuse abnormal signs in the liver. A diagnosis of acute-on-chronic liver failure was suspected. Salvage liver transplantation was implemented based upon multidisciplinary. The gross specimens showed liver atrophy (Panel A) and a tumor involving the whole liver, which resulted in obliteration of normal liver structure (Panel B). Immunohistochemical staining confirmed the diagnosis of liver metastases of breast cancer with acute-on-chronic liver failure (Panel C). The pathological specimens of extensive liver metastases from breast cancer are rare. It is difficult to obtain such specimens except for liver transplantation.

Figure 1: