Memorial Sloan Kettering Cancer Center

PATIENT & CAREGIVER EDUCATION

About Your Hepatic Embolization

This information will help you get ready for your hepatic embolization procedure at Memorial Sloan Kettering (MSK).

A hepatic embolization stops the blood flow to liver tumors. The hepatic artery is the main source of blood for most liver tumors. During your hepatic embolization, your doctor will thread a small catheter (thin flexible tube) in your hepatic artery. Then, they will inject tiny particles in the catheter. These particles will block the blood flow to the tumor, which will kill it.

Your hepatic embolization will be done by an interventional radiologist. An interventional radiologist is a doctor who specializes in image-guided procedures.

Before Your Procedure

Ask about your medications

You may need to stop taking some of your medications before your procedure. Talk with your healthcare provider about which medications are safe for you to stop taking. We've included some common examples below.

Blood thinners

Blood thinners are medications that affect the way your blood clots. If you take blood thinners, ask the healthcare provider performing your procedure what to do. They may recommend you stop taking the medication. This will depend on the type of procedure you're having and the reason you're taking blood thinners.

Examples of common blood thinners are listed below. There are others, so

be sure your care team knows all the medicine you take. **Do not stop taking your blood thinner without talking with a member of your care team.**

- Apixaban (Eliquis®)
- Aspirin
- Celecoxib (Celebrex®)
- Cilostazol (Pletal®)
- Clopidogrel (Plavix®)
- Dabigatran (Pradaxa®)
- Dalteparin (Fragmin®)
- Dipyridamole (Persantine®)
- Edoxaban (Savaysa®)
- Enoxaparin (Lovenox®)
- Fondaparinux (Arixtra®)
- Heparin (shot under your skin)
- Meloxicam (Mobic®)
- Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil®, Motrin®) and naproxen (Aleve®)
- Pentoxifylline (Trental®)
- Prasugrel (Effient®)
- Rivaroxaban (Xarelto®)
- Sulfasalazine (Azulfidine®, Sulfazine®)
- Ticagrelor (Brilinta®)
- Tinzaparin (Innohep®)
- Warfarin (Jantoven®, Coumadin®)

Read *How To Check if a Medicine or Supplement Has Aspirin, Other NSAIDs, Vitamin E, or Fish Oil* (www.mskcc.org/pe/check-med-supplement). It has information about medications you'll need to avoid before your procedure.

Medications for diabetes

Before your procedure, talk with the healthcare provider who prescribes your insulin or other medications for diabetes. They may need to change the dose of the medications you take for diabetes. Ask them what you should do the morning of your procedure.

Your care team will check your blood sugar levels during your procedure.

Diuretics (water pills)

A diuretic is a medication that makes you urinate (pee) more often. Hydrochlorothiazide (Microzide®) and furosemide (Lasix®) are common diuretics.

If you take any diuretics, ask the healthcare provider doing your procedure what to do. You may need to stop taking them the day of your procedure.

Contrast dye

Contrast is a special dye that makes it easier for your doctor to see differences in your internal organs. The dye will be injected into a vein in your arm or hand during your hepatic embolization. If you've had an allergic reaction to contrast dye in the past, tell your healthcare provider. You may need to take medication before your procedure to help with the allergy.

If you're breastfeeding, you may choose to continue after your hepatic embolization. If you have questions or would like to discuss contrast and breastfeeding, talk with your interventional radiologist on the day of your procedure.

Take devices off your skin

You may wear certain devices on your skin. Before your scan or procedure, device makers recommend you take off your:

- Continuous glucose monitor (CGM)
- Insulin pump

Talk with your healthcare provider about scheduling your appointment closer to the date you need to change your device. Make sure you have an extra device with you to put on after your scan or procedure.

You may not be sure how to manage your glucose while your device is off. If so, before your appointment, talk with the healthcare provider who manages your diabetes care.

Arrange for someone to take you home

You must have a responsible care partner take you home after your procedure. A responsible care partner is someone who can help you get home safely. They should be able to contact your care team if they have any concerns. Make sure to plan this before the day of your procedure.

If you don’t have a responsible care partner to take you home, call one of the agencies below. They’ll send someone to go home with you. There’s a charge for this service, and you’ll need to provide transportation. It’s OK to use a taxi or car service, but you still need a responsible care partner with you.

Agencies in New York

VNS Health: 888-735-8913

Caring People: 877-227-4649

Agencies in New Jersey

Caring People: 877-227-4649

Tell us if you’re sick

If you get sick (including having a fever, cold, sore throat, or flu) before your procedure, call your IR doctor. You can reach them Monday through Friday from 9 a.m. to 5 p.m.

After 5 p.m., during the weekend, and on holidays, call 212-639-2000. Ask for the Interventional Radiology fellow on call.

Note the time of your appointment

A staff member will call you 2 business days before your procedure. If your procedure is scheduled for a Monday, they’ll call you on the Thursday before. They’ll tell you what time to get to the hospital for your procedure. They will also remind you where to go.

Use this area to write down the date, time, and location of your procedure:

If you don’t get a call by noon (12 p.m.) on the business day before your procedure, call 646-677-7001. If you need to cancel your procedure for any reason, call the healthcare provider who scheduled it for you.

The Day Before Your Procedure

Instructions for eating and drinking: 8 hours before your arrival time



- **Stop eating 8 hours before your arrival time, if you have not already.**
  - Your healthcare provider may tell you to stop eating earlier. If they do, follow their instructions.
- 8 hours before your arrival time, do not eat or drink anything except these clear liquids:
  - Water.
  - Soda.
  - Clear juices, such as lemonade, apple, and cranberry juices. Do not drink orange juice or juices with pulp.
  - Black coffee or tea (without any type of milk or creamer).
  - Sports drinks, such as Gatorade®.
  - ClearFast CF(Preop)® or Ensure® Pre-Surgery clear carbohydrate drink.
  - Gelatin, such as Jell-O®.

  You can keep having these until 2 hours before your arrival time.

The Day of Your Procedure

Instructions for drinking: 2 hours before your arrival time



Stop drinking 2 hours before your arrival time. This includes water.

Medications to prevent allergy to contrast dye

If your doctor told you to take medications to prevent an allergy to contrast, take your first dose 13 hours before your scheduled arrival time.

Things to remember

- Take only the medications your doctor told you to take the morning of your procedure. Take them with a few sips of water.
- If you're taking pain medication, take it before your procedure with a few sips of water.
- Don't use any cream, petroleum jelly (Vaseline®), powder, makeup, perfume, or cologne. You can use deodorant and light moisturizers.
- Don't wear any metal objects. Remove all jewelry, including body piercings.
- Leave valuables (such as credit cards or jewelry) at home.
- If you wear contact lenses, wear your glasses instead.

What to bring with you

- ☐ A list of the medications you take at home, including patches and creams.
- ☐ Medications for breathing problems (such as inhalers), medications for chest pain, or both.
- ☐ A case for your glasses or contacts.

- ☐ Your Health Care Proxy form, if you have completed one.
- ☐ If you use a CPAP or BiPAP machine to sleep at night, please bring your machine with you, if possible. If you can’t bring your machine with you, we will give you one to use while you’re in the hospital.

What to expect

Once you arrive, doctors, nurses, and other staff members will ask you to state and spell your name and date of birth many times. This is for your safety. People with the same or similar names may be having procedures on the same day.

After changing into a hospital gown, you’ll meet your nurse. They will place an intravenous (IV) catheter into one of your veins, usually in your hand or arm. At first, you’ll get fluids through the IV, but it will be used later to give you medication to make you sleepy and more relaxed during your procedure.

During your procedure

When it’s time for your procedure, you’ll be brought into the procedure room. You’ll be attached to equipment to monitor your heart, breathing, and blood pressure. You’ll also get oxygen through a thin tube that rests below your nose.

A member of our clinical team will help position you onto your back. Your groin will be cleaned, shaved, and covered with sterile drapes. A local anesthetic (medication to make you numb) will be injected into the area where your doctor will be working.

Your doctor will thread the catheter through the artery in your groin up to the artery that supplies the blood to your liver. To make sure the catheter is in the right place, they will do an angiogram. An angiogram is an x-ray test that uses contrast dye to allow your doctor to find your tumor and arteries.

Once your tumor is located, your doctor will inject the particles that block the artery. When the procedure is completed, your doctor will remove the catheter and cover site with a dressing.

After Your Procedure

In the hospital

After the procedure, you'll be brought to the Post Anesthesia Care Unit (PACU). While you're in the PACU, tell your nurse if your dressing feels wet or warm.

Your nurse will monitor your site for any bleeding. You'll need to lie flat on your back in bed with your leg straight for at least 1 hour. Depending on how the hole was closed, you make need to lie like this for up to 4 hours.

Once your anesthesia has worn off, you'll be taken to your hospital room. Most people stay in the hospital for 3 days.

Showering

- You can shower 24 hours after your procedure. Remove the dressing before you shower. Gently wash the area with soap and water. Pat dry with a clean towel. You may want to place a bandage (Band Aid®) over the area if there is any drainage.
- Don't swim, sit in a hot tub, or take a bath for 1 week after your procedure.

Side effects

After your procedure, you may have:

- A fever of 100.4 °F (38 °C) or higher
- Pain
- Nausea (feeling like you're going to throw up)
- Vomiting (throwing up)

You'll get medication to manage your symptoms, if needed.

When to Call Your Healthcare Provider

Call your healthcare provider if you have:

- A fever of 100.4° F (38° C) or higher.
- Pain, nausea, or vomiting that is uncontrolled or worse than it was before your procedure.
- Redness, swelling, or bleeding around the procedure site.
- Any symptoms that are worrying you.

If you have any questions, contact a member of your care team directly. If you're a patient at MSK and you need to reach a provider after 5 p.m., during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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