

## Long-Term Liver Cancer Survival Study Results Support Norton Cancer Hospital Advances in Treatment

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LOUISVILLE, Ky., Feb 10, 2004 (BUSINESS WIRE) -- Norton Cancer Hospital surgeons, Dr. Robert Martin and Dr. Kelly McMasters are pioneering the use of radiofrequency ablation (RFA) to treat cancer of the liver. RFA treatment is far less invasive than traditional open surgery.

Norton Cancer Hospital is one of the first hospitals in the country and the only hospital in the region to offer RFA for liver tumors in conjunction with the hospital's sophisticated intraoperative Magnetic Resonance Imaging system (iMRI). The iMRI magnet has openings that allow our physicians access to patients during surgery and patient-side monitors that provide constant real-time MRI images as well.

Radiofrequency ablation is a relatively new technique used to treat some types of malignant liver tumors. It uses radiofrequency waves, passed between multiple small needles placed directly into a liver tumor, to destroy cancer cells with heat, powered by a generator. An ultrasound probe, computed tomography (CT), or magnetic resonance imaging (MRI) is used to guide the placement of the needle into the tumor to "cook" it, allowing heat destruction of the liver tumor while sparing the majority of normal liver tissue. RFA offers new options to patients who wouldn't be considered for traditional surgical resection. The reasons that patients can't have resection range from having too many tumors, tumors located near major blood vessels, cirrhosis, or inability to remove the entire tumor while leaving behind enough normal liver.

"The results of a recently reported study from the University of Pisa, Italy, suggest that RFA for patients with primary liver cancer may actually be better than traditional surgical resection. While some patients still need to have standard liver resection, all of the evolving evidence supports the fact that RFA is beneficial, and improves survival. We see our patients experiencing the benefits of RFA treatment, including improved quality of life due to the minimally invasive approach," stated Dr. Robert Martin, also a surgical oncologist at the University of Louisville and Norton Cancer Hospital.

The RFA system/probe used at Norton Cancer Hospital and in the long-term study are manufactured by RITA Medical Systems, Mountain View, California.

"RFA has become an important treatment option for patients with liver cancer, which we have been using for the past seven years. It is part of our commitment to provide the most advanced and effective medical care for our patients," commented Dr. Kelly McMasters, director of the Division of Surgical Oncology at the University of Louisville and surgical oncologist at Norton Cancer Hospital.

"By most estimates, fewer than 20 percent of liver cancer patients are good candidates for surgical resection. This is primarily due to the number, size, and location of the tumors within the liver. Treating the liver tumors while they are relatively small is important for optimal results with RFA," said Martin.

Norton Cancer Hospital patient Charles Morgan was diagnosed with liver cancer after he was successfully treated for colorectal cancer. Approximately 50 percent of colorectal cancer patients diagnosed each year eventually develop metastatic tumors in the liver. For patients like Mr. Morgan who are not good candidates for surgical resection, RFA can be a successful treatment option.

"Having the minimally invasive procedure sounded good to me because I could recover fast and get back to doing things like playing golf," said Charles Morgan. "I always think about these things in terms of whether or not I can play golf, because I figure if you can't play golf, then you aren't really living."

"With RFA treatment, patients heal in days or weeks and are back to a good quality of life," said Dr. McMasters. He continued, "The thing that counts the most for patients like Charlie Morgan is that they have more time without symptoms or the knowledge that they have recurrence of their disease. As much of this time that we can give to these patients is what really counts. Hearing that Charlie shot an 81 on his favorite golf course after his procedure, and he's still alive to tell about it, that's a real success story."

Dr. McMasters and Dr. Martin have created a website, [www.aboutlivercancer.com](http://www.aboutlivercancer.com), to educate patients regarding the variety of treatment options available, as part of their work with the Norton Cancer Hospital. The information on the site is non-technical, yet specific enough to be a valuable resource to anyone making a preliminary evaluation of liver tumor treatment options.

Treating more than half of the oncology cases in Louisville, Norton Cancer Hospital is the leading provider of comprehensive cancer care in Kentucky and Southern Indiana. Norton Cancer Hospital also provides patients extensive education, compassionate support services and extensive opportunities to participate in clinical trials. The team of cancer specialists at Norton Cancer Hospital includes physicians who are recognized leaders in cancer care, specializing in medical, radiation, gynecological, and surgical oncology. Other members of this interdisciplinary team include oncology-certified nurses, pathologists, geneticists, counselors, therapists, clinical researchers and nutritionists. They work closely together, combining members' expertise to provide an integrated treatment plan tailored to each patient's special needs. Several advanced techniques are performed more often at Norton Cancer Hospital than at any other local hospital. They include: surgical removal of endocrine and brain tumors, intra-operative magnetic resonance imaging (iMRI)-guided radio frequency ablation of liver tumors, and iMRI-guided cryoablation of kidney tumors.

NOTE TO EDITORS: Beta-SP B-Roll available. To schedule physician interviews, please call Brian Rublein, Media Relations Manager, 502-629-8840.

SOURCE: Norton Cancer Hospital & RITA Medical Systems

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