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ACCEPTED MANUSCRIPT

WHEN AND HOW SHOULD WE PERFORM A BIOPSY FOR HCC IN PATIENTS WITH

LIVER CIRRHOSIS IN 2018? A REVIEW

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Abstract

The role of liver biopsy in the diagnosis of hepatocellular carcinoma (HCC) has changed over time.

The diagnostic algorithm for this tumour is nowadays mainly based on radiological imaging,

relegating histology to controversial cases, in which imaging techniques cannot establish a clear-cut

diagnosis. This most commonly happens in small lesions, where biopsies frequently become

mandatory, or in larger hypovascularized lesions. In this case however, the histological examination

may not be reliable enough to grade the lesion, as different cell clones, deriving from sequential

mutations, can originate heterogeneous cell populations. The risk of complications of liver biopsy,

such as tumor seeding and intra-abdominal bleeding, needs to be reconsidered in light of new

scientific evidence and of the technical improvements that have been introduced. Furthermore,

increasing knowledge of the immunohistochemical and molecular characteristics of hepatocellular

carcinoma opens a new scenario in which biopsy may play a decisive role in defining prognosis, and

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