

16 Fibrolamellar hepatocellular carcinoma**Micro**

- This is hepatic tissue harboring a neoplastic nodule.
- The neoplasm is composed of sheets of polygonal cells in a dense collagen background.
- The collagen bundles are arranged in parallel lamellae with small, thick-walled intervening vessels.
- The lesional cells are large and with well-defined cell borders, vesicular nuclei and prominent nucleoli.
- The background liver is unremarkable.
- There is no evidence of cirrhosis or other chronic liver disease.

Diagnosis

- Fibrolamellar hepatocellular carcinoma

Further work/comment

- The immune-profile is HepPar+ CK7+ AFP- as apposed to HepPar+ CK7- AFP+ of conventional hepatocellular carcinoma.
- Further opinion is considered, given that this is a relatively uncommon neoplasm.
- The presentation is classic: Young with no antecedent liver disease.
- The disease usually metastasizes to abdominal lymph nodes, peritoneum and lung.
- The points that would be discussed in the hepatobiliary MDT:
 - Type and differentiation: It has better prognosis than classical hepatocellular carcinoma.
 - Minimum distance to resection margin (hepatic, and where appropriate bile duct or vascular)
 - Invasion through liver capsule.
 - Vascular invasion.
 - Background liver.
 - Lymph node involvement.