

Uitgangsvraag 5: Welke methode van biopteren verkleint het risico op het ontstaan van metastasen door needle tract

seedling bij HCC patiënten?

Systematic reviews

I Study ID	II Method	III Patient characteristics	IV Intervention(s)	V Results primary outcome	VI Results secondary and other outcomes	VII Critical appraisal of review quality
Silva MA 2008	<ul style="list-style-type: none"> • SR + MA • Funding/Col: no conflicts of interest to declare • Search date: March 2007 • Databases: NCBI, PubMed, EMBASE, internet, referencing • Study designs: cross-sectional case studies, case series, case-control studies • N included studies: N=8 	<ul style="list-style-type: none"> • Eligibility criteria: <ul style="list-style-type: none"> ○ Patients with a liver lesion suspected of being HCC ○ Excluded: seeding following PEI and RFA, reports on intrahepatic seeding 	Liver biopsy	<ul style="list-style-type: none"> • 1340 patients undergoing biopsy, 26 patients with seeding • Pooled estimates: <ul style="list-style-type: none"> ○ 0.027 patients with seeding per 100 patients (95%CI 0.018-0.040) ○ 0.009 patients with seeding per 100 patients per year (95%CI 0.006-0.013) ○ No observed heterogeneity 	<ul style="list-style-type: none"> • Median time to seeding: 17 months • Incidence of seeding: range 0-5.8% 	<p>Level of evidence: C</p> <ul style="list-style-type: none"> • Good-quality SR • 7 retrospective and 1 prospective study • Median follow-up: range 14-44 months

Abbreviations: HCC: hepatocellular carcinoma; MA: meta-analysis; PEI: percutaneous ethanol injection; RFA: radio-frequency ablation; SR: systematic review