

6 months' follow-up in 16 (50%) patients, while at 12 months' follow-up this response decreased to 13 (40%) tumours. 6 (18%), patients showed approximately 60-90% reduction of arterialization, while only in 2 (0.06%) patients no response was observed and in one patient disease progression was observed at three months followup. **Conclusions:** In terms of the effect on the tumour response, combined TACE + PEI therapy was an effective in controlling the disease process.

## P502

### Response of Intra-Arterial Chemoembolization Using Hepaspheres in Hepatocellular Carcinoma – Our Initial Experience

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**Background:** To retrospectively assess the response of intra-arterial chemoembolization using hepasheres in patients of hepatocellular carcinoma. **Methods:** Being tertiary care facility and largest liver transplant center in the country, our Center is a primary referral center for patients of hepatocellular carcinoma. From March 2014 to November 201, 38 patients (27 males and 12 females) with 43 hepatocellular carcinoma lesions fulfilled the criteria for intra-arterial chemoembolization and underwent the procedure. All the patients were evaluated with follow up dynamic CT and/or MRI six weeks after the procedure using modified response evaluation criteria in solid tumors (mRECIST). **Results:** Mean size of the lesions was 4.9 cm (range 1.1 to 10 cm). Child- Pugh score was A in 26 patients and B in 12 patients. Technical success rate of TACE was 100%. No major complications were documented. Complete response was observed in 13.9% of lesions whereas partial response in 65.1% of lesions, 13.9% of lesions remained stable and progressive disease was documented in 13.9% of lesions. **Conclusions:** Our initial experience shows, in patients of unresectable HCC, TACE using hepasheres is a safe option with good response.

## P503

### Efficacy of Ultrasound Guided Foam Sclerotherapy in Treatment of Chronic Venous Ulcer and Controlling Ulcer Induced Pain: An Egyptian Experience

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**Background:** Chronic venous ulcers forms about 75% of leg ulcers as severe sequel of chronic venous insufficiency and venous hypertension, associated with pain affecting patient's quality of life. Our objective is assessment of ultrasound guided foam sclerotherapy in treatment and control of pain of chronic venous ulcer. **Methods:** A prospective study is conducted on 60 patients with 65 ulcers to evaluate the efficacy of ultrasound guided foam sclerotherapy injection in management of chronic venous ulcers.

Patient follow up is done regards ulcer healing. Numerical pain score after 72 hours, 1 week and on follow up visits. Duplex scans were done preprocedural and after 1<sup>st</sup> week, 3 months and 6 months. **Results:** A total of 65 legs were treated in 60 patients had the procedure done, age (30 to 70); 23 patients (38%) were CEAP 5, 42 patients (70%) were CEAP 6. Fifty ulcers (76%) healed after the 1<sup>st</sup> month follow up becoming 59 (90%) after 3 months then 62 (95%) at 6<sup>th</sup> month. No recurrence appeared after the first month, 6 appeared after 3 months (9%) and 9 recurred after six months follow up (13%). Numerical pain score showed 75% of patients' pain relief after 72 hrs, 100% relief after 1 week. **Conclusions:** Foam sclerotherapy shows significant efficacy in venous ulcer healing and reduction in ulcer induced pain in 72 hours reaching complete pain resolution after 1 week.

## P504

### Case Reprint: Management of Cervical Ectopic Pregnancy with Uterine Artery Embolization

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**Background:** We present a rare case of cervical ectopic pregnancy managed by Interventional Radiology. A 44-year old female presented to the ER with complaints of dizziness, fatigue, non radiating left pelvic pain and 5 days of heavy vaginal bleeding with clots. The patient denied ongoing pregnancy, any prior similar episodes or any additional symptoms. **Methods:** The speculum exam showed large bulging hyper vascular cervix actively bleeding with clots. No purulent discharge was noted. The bladder was not palpable and non-tender. Otherwise, the physical exam was unremarkable. Beta-HCG levels were elevated (71964 mIU/ml). Sagittal transvaginal ultrasound of the uterus demonstrated an empty uterine cavity with intracervical normal appearing gestational sac containing a fetal pole (CRL of 1,65 cm), amnion and yolk sac. The patient was counseled for the available therapeutic options including surgical management versus a combination of medical and embolization and opted for the latter. In the IR-suite, the patient underwent a selective embolization of the uterine arteries with Gelfoam. **Results:** Post embolization, the patient's bleeding decreased significantly which manifested in significant improvement in the vital signs. The patient was started on a Methotrexate regimen. After 2 days, the patient's Beta-HCG dropped to 3,646 mIU/ml and she was discharged home. On her 1 month follow-up appointment, the patient denied any cramping, discharge or bleeding. **Conclusions:** In cases in which patients decide to avoid surgical options, Interventional Radiology offers alternatives approaches. This case report has demonstrated the efficacy of managing ectopic pregnancies by a combination of embolization and medical therapy.

## P505

### Emergency Tranarterial Embolization of Ruptured Hepatocellular Carcinoma

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