

SPECIALIZED INTERVENTIONAL ONCOLOGY IN A COMFORTABLE OUTPATIENT SETTING

All procedures are performed at our state-of-the-art outpatient center in Birmingham. Our dedicated facility offers a private, relaxed alternative to a hospital setting—featuring lower infection risks, streamlined scheduling, reduced out-of-pocket costs, and direct access to your clinical team.

VASCULAR & INTERVENTIONAL SPECIALISTS OF AMERICA

VISA interventional radiologists are among the most highly trained practicing medicine today. With a combined total of 40+ years of experience in interventional procedures, our physicians utilize medical imaging to expertly guide procedures using tiny catheters and miniature instruments from within the body's vascular system.

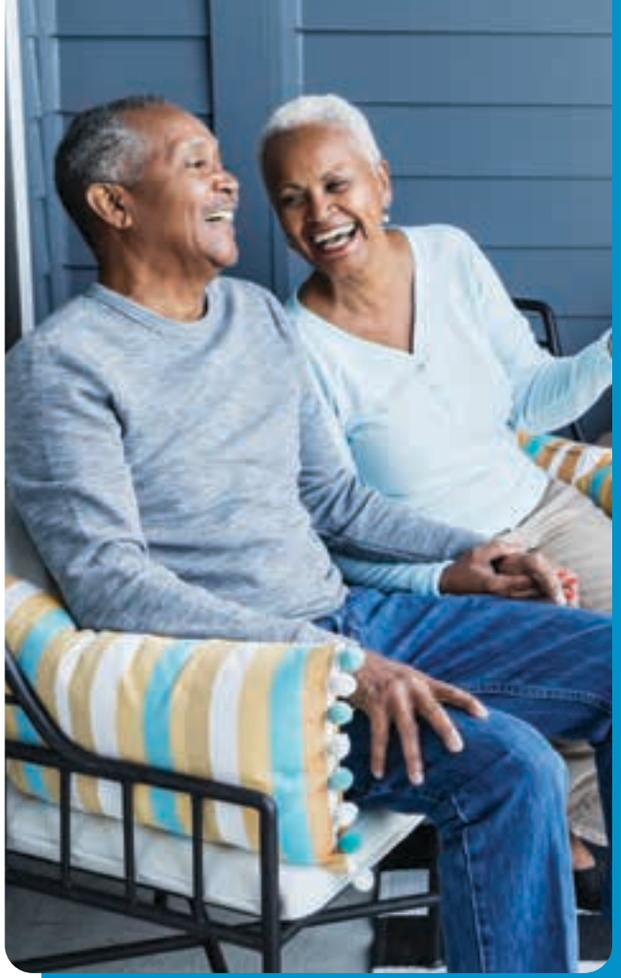
In addition to vascular disease, we offer minimally invasive treatments for primary and metastatic liver cancer, vertebral compression fractures, uterine fibroids, chronic hemorrhoids, enlarged prostate (BPH) and knee osteoarthritis. For more information, please visit VisaVascular.com or call us at 205-905-8411.

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Transarterial Chemoembolization (TACE)

Targeted, Minimally Invasive Treatment for Liver Tumors

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A Powerful, Two-in-One Approach to Liver Cancer

Transarterial Chemoembolization (TACE) is an advanced, image-guided procedure designed to treat primary liver cancer (such as hepatocellular carcinoma) and select metastatic tumors that have spread to the liver.

Unlike conventional systemic chemotherapy that circulates throughout your entire body, TACE works from the inside out. Using real-time imaging, an interventional radiologist navigates a microscopic catheter directly into the precise blood vessels feeding the tumor. Once in place, the procedure delivers two synchronized treatments:

1. **Targeted Chemotherapy:** Concentrated cancer medication—often bound to microscopic drug-eluting beads (DEBs)—is released directly into the tumor bed.
2. **Embolization:** Tiny particles block the tumor's arterial blood supply, trapping the chemotherapy inside the tumor while depriving it of the oxygen and nutrients it needs to grow.

Because healthy liver tissue receives most of its blood supply from a separate vessel (the portal vein), your surrounding healthy liver remains protected while the tumor is isolated and starved.



Why Consider TACE?

- **Highly Targeted:** Delivers potent medication straight to the tumor bed while sparing surrounding healthy tissue.
- **Fewer Systemic Side Effects:** Because the chemotherapy remains concentrated in the liver, patients avoid most of the widespread side effects common with traditional intravenous chemotherapy.
- **Repeatable & Flexible:** Can be used on its own, repeated over time as needed, or combined with other therapies.
- **Extends Life & Preserves Options:** Effectively delays disease progression, shrinks tumors, relieves symptoms, and often serves as a "bridge" to qualify patients for curative liver resection or transplant.

Is TACE Right for You?

TACE is commonly recommended for patients with primary or metastatic liver cancer who may not be immediate candidates for surgery. Typical candidates generally:

- Maintain stable underlying liver function.
- Have an open, functioning portal vein.
- Do not have severe fluid accumulation (ascites).
- Have disease primarily confined to the liver without major invasion into primary blood vessels or distant organs.

What to Expect During Treatment

- **Preparation & Staging:** Tumors larger than 5 cm or cancer involving both lobes of the liver may be treated in staged sessions—typically scheduled about a month apart—to ensure safety and preserve liver function.
- **Day of Procedure:** Performed under light "twilight" sedation and local numbing medication. You remain comfortable and relaxed throughout. The procedure typically takes about 60 to 90 minutes.
- **Recovery:** Most patients spend 1 to 2 hours in our recovery suite before resting comfortably at home the same day.
- **Follow-Up:** A dedicated CT or MRI scan is performed roughly 4 to 8 weeks post-treatment to evaluate tumor shrinkage and guide any next steps.

Recovery & Potential Side Effects

Because TACE is minimally invasive, recovery is significantly faster than with surgical liver resection. Most patients experience a temporary reaction called **post-embolization syndrome**, which may include mild fatigue, low-grade fever, nausea, or abdominal cramping for several days as the tumor tissue responds. These symptoms are normal, expected, and easily managed with prescribed supportive medications. Serious complications are rare, and your care team will review all personal risk factors with you prior to the procedure.

