

Conclusions: The analysis revealed significant changes in the composition of the intestinal microbiota in response to cirrhosis, with beneficial modulation by melatonin and physical exercise.

Conflict of interest: None

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CHOLANGIOCARCINOMA, CHARACTERISTICS AND PRESENTATION IN A REFERRAL HOSPITAL IN LIMA, PERU

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Introduction and Objectives: Cholangiocarcinoma (CCA) is an aggressive and heterogeneous malignant neoplasm, with a rising global incidence contributing to high mortality. Associated comorbidities are not well established, and overall survival is poor. In Peru, there is a lack of systematic characterization of this disease. the objectives are to describe the clinical, epidemiological, and therapeutic characteristics of hospitalized patients with CCA, and to assess recurrence, progression, mortality, and survival rates by therapeutic subgroups.

Materials and Methods: An observational, descriptive, and retrospective study was conducted using electronic medical records of 67 patients hospitalized with CCA between January 2020 and December 2024. Clinical, diagnostic, therapeutic, and survival data were collected. Patients without follow-up or a definitive diagnosis were excluded.

Results: The mean age was 64.5 years. The most common comorbidities were hypertension (19.4%), biliary tract diseases (17.9%), and type 2 diabetes (14.9%). Extrahepatic CCA was found in 55.2% of cases, with the mass-forming pattern being the most frequent (47.7%). Curative-intent surgery was performed in 23.9% (R0 resection in 17.9%), and first-line chemotherapy was administered in 20.9%. Median overall survival was 7.2 months.

Conclusions: Most hospitalized patients with CCA presented with extrahepatic and advanced-stage disease, limiting curative treatment options and resulting in low overall survival.

Conflict of interest: None

Table 1: Characteristics of patients with CCA

Characteristic	Total n = 67	iCCA n = 30	pCCA n = 23	dCCA n = 14
Age, median	64.5	62.9	67.3	63.1
Gender (female), n (%)	32 (47.8)	18 (60)	9 (39.1)	5 (35.7)
ECOG, n (%)				
0-1	39 (58.2)	14 (46.7)	12 (52.2)	13 (92.9)
≥2	28 (41.8)	16 (53.3)	11 (47.8)	1 (7.1)
Stage at diagnosis, n (%)				
Localized	17 (25.4)	5 (16.7)	3 (13)	9 (64.3)
Regional invasion	16 (23.9)	6 (20)	7 (30.5)	3 (21.4)
Distant metastasis	34 (50.7)	19 (63.3)	13 (56.5)	2 (14.3)
Primary tumor lesions, n (%)				
Single lesion	52 (77.6)	15 (50)	23 (100)	14 (100)
Multiple lesions	15 (22.4)	15 (50)	0 (0)	0
Pattern of growth, n (%)				
Mass-forming	32 (47.8)	30 (100)	2 (8.7)	0 (0)
Periductal infiltrating	21 (31.3)	0 (0)	11 (47.8)	10 (71.4)
Intraductal growth	14 (20.9)	0 (0)	10 (43.5)	4 (28.6)

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Characteristic	Total n = 67	iCCA n = 30	pCCA n = 23	dCCA n = 14
Tumor resection, n(%)				
R0	12 (17.9)	2 (6.7)	3 (13)	7 (50)
R1	4 (6)	1 (3.3)	0 (0)	3 (21.4)
Adjuvant chemotherapy	5 (7.5)	0 (0)	1 (4.3)	4 (28.6)
Recurrence, n (%)	4 (6)	3 (10)	0 (0)	1 (7.1)
Recurrence-free survival	10.9	5.5	-	27.3
Chemotherapy, n(%)				
Gemcitabine/Cisplatin	10 (14.9)	10 (33.3)	0 (0)	0 (0)
Other	4 (6)	4 (13.3)	0 (0)	0 (0)
Progression, n(%)	9 (13.4)	9 (30)	-	-
Progression-free survival	5.3	5.3	-	-
Best supportive care, n (%)				
Biliary stent	20 (29.8)	3 (10)	15 (65.2)	2 (14.3)
Other	17 (25.4)	10 (33.3)	5 (21.7)	2 (14.3)

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ACTION OF MELATONIN AND PHYSICAL EXERCISE IN HEPATOPULMONARY SYNDROME

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Introduction and Objectives: Hepatopulmonary syndrome (HPS) is characterized by the presence of liver alterations, hypoxemia and intrapulmonary vascular dilations. Melatonin (MLT) and physical exercise (EX) have several beneficial effects demonstrated in the literature.

To evaluate the effects of MLT and EX in HPS induced by bile duct ligation.

Materials and Methods: Twenty-six male Wistar rats (±350 grams) were divided into four groups: CO, BDL, BDL+MLT, and BDL+EX. MLT was administered via i.p. (20 mg/kg), once/day, from the 15th to the 28th day, as well as physical exercise (swimming). On the 29th day, blood and lung samples were collected for analysis. Statistical analysis: ANOVA+Student-Newman-Keuls, p<0.05.

Results: AST, ALT and ALP increased significantly in the BDL group compared to the CO group and decreased significantly in the treated groups compared to BDL. In the parameters PCO2, EB, pH and O2st, a significant difference was observed in the BDL group compared to the CO group and in the BDL+MLT and BDL+EX groups compared to the BDL group. In the lung histology, a significant increase in the diameter of the blood vessels was observed in the BDL group when compared to the CO group, while in the treated groups, a significant reduction in vasodilation was observed compared to the BDL group. The expression of VEGF and PDGF increased significantly in the BDL group compared to the CO group and decreased significantly in the treated groups compared to the BDL group.

Conclusions: MLT and EX exert beneficial effects on BDL-induced HPS, reducing hepatic and pulmonary alterations.

Conflict of interest: None