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Assessment of the efficacy of fascia iliaca compartment nerve block (FICNB) when it is used as part of multimodal analgesia after femoral bone fracture surgery

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Hepatic involvement in malignancies is a devastating condition leading to over 10 million deaths globally. The prognosis without treatment is poor. Surgery usually offers the only chance of cure/long term survival but the majority of cases with hepatic involvement have unresectable disease either due to liver cirrhosis or small functional liver remnant (FLR). Careful patients' assessment is required to select those patients with resectable tumors and good prospects of achieving substantial benefits from tumor resection. Although non-surgical techniques do not offer cure to the patients, they can increase overall survival by three fold compared to untreated cohorts. The challenge on hepatic surgeons is maintaining an input into patients' assessment and identifying the patients who would potentially benefit from surgical resections. For patients with unresectable disease a wide array of treatments are available ranging from local tumor ablation to systemic chemotherapy/targeted therapy and radiation therapy. Each procedure has its limitations and case selection is of great importance. To date, multidisciplinary managements/combination therapies are recommended for these patients. The use of combination therapies is encouraging but randomized trials are lacking and the most effective combinations are not yet determined.

Biography

Gayane Badalian-Very, being one of the leading physicians of the world is a general surgeon at Dana Farber Cancer Institute. She has completed her practice at Harvard Medical School and worked for Brigham and Women's Hospital. She has a grant awarded in 2011 for "A BRAF V600E-Drive Mouse Model of Langerhans Cell Histiocytosis" with the award of \$50,000. She has also received Claudia Adam Barr Award in February 2012.

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