

Liver transplantation for hepatocellular carcinoma

Hepatocellular carcinoma (HCC) is the 7th most common cancer overall and the 3rd most common cause of cancer-related death worldwide. Before the criteria for liver transplantation were established, the surgical procedure was performed for advanced staged HCC with a poor outcome. Since the landmark report of the Milan criteria by Mazzaferro, which demonstrated comparable outcomes of patients with HCC having a single tumor smaller than 5 cm in diameter or up to 3 tumors smaller than 3 cm in diameter with no vascular invasion or extra-hepatic disease determined by preoperative imaging studies, liver transplantation has become an established treatment for cirrhotic patients with HCC.

This issue of *HepatoBiliary Surgery and Nutrition (HBSN)* describes living donor liver transplantation for HCC in high volume centers in Asia. In addition, the role of positron emission tomography in the selection criteria for transplantation and salvage liver transplantation are described in this issue. The articles were written by authors from various parts of Asia. I am truly grateful for their contributions.

I would like to thank all the authors for providing excellent original articles and reviews for this focused issue. I believe that the care that all the authors have invested in this focused issue offers readers interesting and important information on liver transplantation for HCC.



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