POSSIBLE RISK FACTORS



















Bile Duct

Choledochal Cysts

Diabetes

Exposure to Hazardous Chemicals

Inflammatory Bowel Disease

Pancreatitis

Viral Hepatitis

Caroli Svndrome

Cirrhosis

Excessive Alcohol/ Smoking

Fatty Liver

Liver Fluke Ingestion Primary Sclerosing Cholangitis

POSSIBLE SYMPTOMS INCLUDE













Jaundice

Dark Urine

Pale Stools

Abdominal Pain

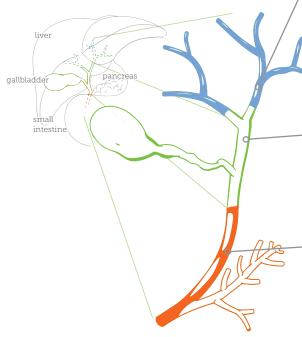
Fever

Itching



KNOWN MUTATIONS IN CHOLANGIOCARCINOMA

APC	KRAS
ARID1A	MCL1
ATM	MDM2
BAP1	MSI
BRAF	MYC
BRCA2	NRAS
CCND1	PBRM1
CDKN2A	PIK3CA
CDKN2B	PTEN
ERBB2	SMAD4
FGFR2	STK11
FRS2	TP53
IDH1	(and more)
IDH2	



INTRAHEPATIC

Intrahepatic CCA occurs inside the liver where cancer develops in the hepatic bile ducts or the smaller intrahepatic biliary ducts. In some cases, patients express a combined diagnosis.

PERIHILAR (HILAR OR KLATSKIN TUMOR)

These cancers develop where the right and left hepatic ducts have joined and are leaving the liver. These are the most common type of cholangiocarcinoma accounting for more than half of all bile duct cancers.

DISTAL

Distal CCA occurs outside the liver after the right and left hepatic bile ducts have joined to form the common bile duct. This type of cancer is found where the common bile duct passes through the pancreas and into the small intestine.



About 8,000 people in the United States develop bile duct cancer each year. But it is anticipated that the actual number of cases is higher as this cancer is hardly diagnosed and sometimes may be misclassified as other types of cancers.



The highest rates are in northeast Thailand and are about 100 times higher than in the West.

Higher prevalence in Asia is attributed to endemic chronic parasitic infestation.

