The following are the most common factors shown to increase the risk of developing hepatocellular carcinoma:

**Gender:**
Men are more commonly diagnosed

**Lifestyle factors:**
Heavy alcohol use, obesity and type 2 diabetes

**Non-alcoholic fatty liver disease (NAFLD)/Non-alcoholic steatohepatitis (NASH):**
NAFLD, a condition in which people who consume little or no alcohol develop a fatty liver, is common in obese people. People with this disease may go on to develop NASH and cirrhosis.

**HBV or HCV:**
Both Hepatitis B (HBV) and Hepatitis C (HCV) viruses are the most common risk factors for liver cancer worldwide.

HCV is the more common cause of HCC in the U.S., while HBV is the more common cause of HCC in developing countries and Asia.

Long-term infection with HBV/HCV can lead to cirrhosis.

**Race/ethnicity:**
In the U.S., Asian Americans and Pacific Islanders have the highest rates of liver cancer

These risk factors often lead to:

**Cirrhosis:**
A majority of patients who develop HCC have some evidence of cirrhosis.

Cirrhosis is a disease where damaged liver cells are replaced by scar tissue and increase the risk of developing liver cancer.

To assess overall liver function, especially in patients with cirrhosis, physicians use the Child-Pugh scoring system. According to this system, the liver can be rated as:
- Class A: Normal liver function
- Class B: Mild abnormalities
- Class C: Severe abnormalities

In the initial stages of liver cancer, patients may not notice any signs and symptoms, but as the tumor enlarges, some potential signs and symptoms may include:

- **Enlarged liver** (hard mass under the rib cage on the right side)
- **Enlarged spleen** (hard mass under the rib cage on the left side)
- **Loss of appetite** or feelings of fullness after eating a small meal
- **Swollen abdomen**
- **Yellow eyes and skin** (jaundice)
- **Weight loss** without reason
- **Pale bowel movements and dark urine**
- **Nausea or vomiting**