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Hepatic arterial infusion chemotherapy for metastatic liver cancer: a systematic review and meta-analysis of randomized controlled trials. The objective of this study was to systematically review and meta-analyze the current evidence on efficacy and safety of hepatic arterial infusion chemotherapy (HAIC) compared to systemic chemotherapy for the treatment of patients with liver metastasis. Searches were conducted in MEDLINE, Cochrane Library, Web of Science, Scopus, and Google Scholar from 2000 to July 2018 for randomized controlled trials (RCTs) in humans. We included all RCTs comparing the efficacy and safety of HAIC with systemic chemotherapy in patients with liver metastasis from colorectal, hepatocellular, gastric, or pancreatic carcinoma. Data on overall survival (OS), progression-free survival (PFS), and safety were collected. The quality of evidence for each outcome was evaluated using the Grading of Recommendations, Assessment, Development and Evaluation (GRADE) approach. Of 12,426 studies, only 5 studies were included in the final analysis (2 were non-RCTs, and 3 were RCTs). HAIC showed a nonsignificant trend toward improved OS [hazard ratio (HR) 0.87, 95% confidence interval (CI) 0.74-1.01, P=0.07] and PFS (HR 0.94, 95% CI 0.81-1.09, P=0.42). In terms of safety, HAIC was associated with a significantly higher risk of experiencing grade ≥ 3 adverse events (OR 1.97, 95% CI 1.41-2.75, P=0.00), a nonsignificantly higher risk of overall grade ≥ 3 adverse events (OR 1.41, 95% CI 0.91-2.16, P=0.12), and a nonsignificantly higher

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