Patient information from BMJ

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Pancreatic cancer

Pancreatic cancer is a serious illness. If your cancer is found early, surgery to remove the cancer can help you live longer. If your cancer is more advanced, it is much harder to treat.

This patient information covers the symptoms of pancreatic cancer, and how it is diagnosed and treated.

What is pancreatic cancer?

Pancreatic cancer is when cancer starts to grow in your pancreas. Your pancreas is a gland that lies just behind your stomach. It helps you break down the food you eat. It also helps you use the energy you get from food.

Usually, cells in your body grow and die in a controlled way. But if you have pancreatic cancer, some of the cells in your pancreas start to grow out of control. They form a lump called a **tumour**.

Cells from the tumour can break off, travel around your body, and cause cancers in other parts of your body. When cancer spreads beyond the place where it started it is called **metastatic cancer**.

We don't know why some people get pancreatic cancer and others don't. But it is more common in people over 65 years old, people who smoke, and those with family members who have had pancreatic cancer.

What are the symptoms of pancreatic cancer?

In the early stages, pancreatic cancer usually doesn't cause any symptoms. Some people get general symptoms, such as feeling unwell or weight loss.

Most people first get symptoms when their cancer grows and spreads. For example, if the tumour blocks part of your liver, you might get:

- yellow skin (jaundice)
- dark urine
- pale-coloured stools, and
- itching.

As the tumour grows, you might:

- have pain in your back or abdomen
- feel very tired
- lose your appetite, and
- lose weight.

Damage to cells in your pancreas might cause you to develop diabetes.

If the tumour blocks the tube that carries food from your stomach to the lower parts of your digestive system, you may feel sick and vomit.

These symptoms can be caused by other illnesses that are less serious than pancreatic cancer. But it's important not to ignore them. The sooner your doctor checks them out, the more quickly you can get treatment.

How is pancreatic cancer diagnosed?

Pancreatic cancer can be difficult to diagnose. If your doctor thinks that your symptoms could be due to pancreatic cancer, you'll be referred to specialist doctors for tests.

The doctors will find out whether you have pancreatic cancer based on:

- your symptoms
- a physical examination
- blood tests, and
- scans to look at your internal body parts around your stomach.

They may also need to take a sample of cells from your pancreas (a **biopsy**) to be tested for cancer cells.

If doctors are fairly sure from other tests that you have pancreatic cancer, they may suggest you have surgery right away to remove the tumour. The tumour will be tested for cancer cells after it has been removed.

Very rarely, you might find out you have pancreatic cancer after screening. People are offered screening if they have an increased risk of pancreatic cancer. For example if they have certain genetic conditions or two or more close relatives who have had pancreatic cancer.

What are the treatment options for pancreatic cancer?

Your treatment will depend on the **stage** of your pancreatic cancer. The stage of cancer describes how far the cancer has spread.

- **Early stage** cancer means the cancer has not spread outside the pancreas, or has not spread very far.

- **Later stage** cancer means the cancer has spread to other parts of your body.

Surgery to remove your cancer

If you have early stage pancreatic cancer, you may be able to have surgery to remove part, or all, of your pancreas.

There are different ways of doing the operation depending on where the cancer is in your pancreas.

The most common operation is to remove the part of the pancreas called the **head.** The surgeon will also remove parts of other organs nearby, such as your duodenum (the first part of your small bowel).

Your doctor will be able to tell you if your cancer is suitable for surgery and how this is likely to help you.

Unfortunately, surgery will not work for everyone who is diagnosed with early stage cancer. Some cancer cells may have already gone into your bloodstream before your surgery, but have not shown up in tests.

These cells may have travelled around your body and caused cancers in other locations (metastatic cancer). Surgery on the pancreas cannot get rid of cancer that has spread.

Surgery to remove pancreatic cancer is a major operation. You'll need a **general anaesthetic** to keep you asleep during surgery. And you're likely to need a couple of weeks in hospital to recover.

Problems (**complications**) can happen during or after your operation. For example, liquids normally inside the pancreas that help you to digest food may leak into your body. This can damage other body parts nearby.

Other possible complications include:

- bleeding
- an infection, and
- inflammation (swelling).

Your doctor will talk to you about possible complications. They will also talk through what can be done to manage any problems that might occur.

Chemotherapy, radiotherapy, and chemoradiotherapy

These treatments are occasionally used before surgery to shrink the cancer so it is easier to remove. More commonly, they are used after surgery to help kill any cancer cells that were left behind by the operation.

These treatments are also offered to people who aren't able to have surgery to help manage their symptoms.

Chemotherapy uses medicines to kill cancer cells. You'll probably be given these medicines directly into your bloodstream through a thin tube inserted into a vein. This is called an intravenous (IV) infusion.

Radiotherapy kills cancer cells by directing high-energy x-rays into parts of your body where there may be cancer. When these treatments are used together, it is called **chemoradiotherapy**. You would usually only be offered chemoradiotherapy if your cancer is only in your pancreas and has not spread.

These treatments can cause **side effects**. These may be difficult to cope with. You and your doctors will discuss the possible benefits and risks of treatment so you can decide what is right for you.

You may be offered some other types of treatments if tests have shown you have a type of cancer that may respond to them. These are only suitable for some people, and if you have already had chemotherapy. And these treatments can cause side effects too.

Other treatments to help with symptoms

Surgery to remove your cancer, chemotherapy, and radiotherapy can all help to improve your symptoms. Your doctor may recommend the following treatments as well.

Treatments to help with pain

People with pancreatic cancer sometimes get pain in their abdomen, in their back, or both.

If you have pain, be sure to talk to your doctors. There is a range of pain medicines that can help, from those you can buy yourself to stronger medicines a doctor can prescribe for you.

If one medicine doesn't help enough, your doctor can recommend medicines to try.

If your pain is severe and not going away, you may be offered a procedure to block some of the nerves in your abdomen. This stops you feeling pain coming from your pancreas and other abdominal organs.

Treatments to help with digestion

Your pancreas helps you digest food, but it may not be able to do its job very well if you have pancreatic cancer, or if you've had surgery.

To help, doctors recommend taking **pancreatic enzyme supplements**.

These can improve your digestion and help you keep a healthy weight. Your doctors will also monitor your diet. They may advise you to see a nutritionist, or recommend other supplements.

If your appetite is very low, doctors may prescribe you medicine to help. This can also help prevent you from losing too much weight.

Treatments to help with blockages

Some common symptoms of pancreatic cancer are caused by the cancer blocking a tube that connects your liver to your digestive system. This tube is called the common bile duct.

If your common bile duct becomes blocked, it can cause:

- jaundice (yellowing of the skin)
- itching

- nausea, and
- an uncomfortable feeling in your abdomen.

If you are able to have surgery to remove your cancer, this should remove the blockage.

But if you can't have this surgery, or can't have it right away, your doctors may suggest having a small tube (called a **stent**) fitted inside the duct to keep it open.

Another option is for a surgeon to cut yur bile duct just above the blockage and reconnect it between your liver and your digestive system. This is called a **biliary bypass**.

Taking part in clinical trials

Doctors are still learning what treatments work best for pancreatic cancer. There are many studies under way testing new treatments.

The only way you can normally get one of these treatments is to take part in a **clinical trial**. Your doctor will be able to tell you if there are trials going on in your area that might be suitable for you.

What happens next?

It’s not possible to say exactly what will happen, because pancreatic cancer affects everyone differently. There are striking success stories, and some people live for many years.

However, for many people who find out they have pancreatic cancer, it has already spread too far for surgery to work. People with pancreatic cancer and metastatic cancer generally don't live longer than about 6 months.

Even those who can have surgery to remove the cancer don't usually live for more than a few years.

Treatments other than surgery won’t cure your cancer. But treatments can help shrink your tumour, slow down the growth of your cancer, and improve your symptoms.

There are many charities and support groups for people with pancreatic cancer and their families. Ask your doctors and nurses about organisations that are local to you.

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