

Pancreatic Cancer and PERT: Improving patient care in primary care

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Pancreatic Cancer - Think PERT

NICE Guidance: Pancreatic Cancer in Adults: diagnosis and management (2018)

1.6.1 Offer enteric-coated pancreatin for people with unresectable pancreatic cancer.

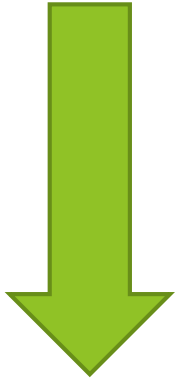
1.6.2 Consider enteric-coated pancreatin before and after pancreatic cancer resection.

NICE Pancreatic Cancer Quality Standard Statement 4:

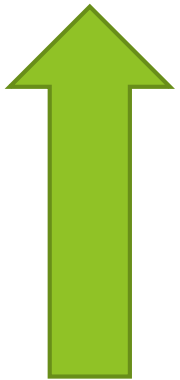
Adults with unresectable pancreatic cancer are prescribed enteric-coated pancreatin.

“Healthcare professionals (such as GPs, dietitians, pancreatic cancer nurse specialists and members of the local cancer network) prescribe enteric-coated pancreatin to adults with unresectable pancreatic cancer and explain how to use it effectively”

Why?



- ▶ Diarrhoea
- ▶ Pain
- ▶ Bloating
- ▶ Weight loss
- ▶ Nausea



- ▶ Quality of life
- ▶ Tolerance to treatments
- ▶ Overall survival time

Current situation

- ▶ 63% of people with pancreatic cancer in Wales being prescribed PERT
 - ▶ People with inoperable pancreatic cancer are less likely to be prescribed PERT than those with operable cancer.
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- ▶ Well established benefits
 - ▶ Safe to prescribe
 - ▶ Lots of guidance available
 - ▶ Earlier the better

Prehabilitation: Optimisation of patient health

Prescribe PERT from point of diagnosis.

- ▶ Reduce weight loss
- ▶ Increase choice
- ▶ Increase resilience to treatments

Pancreatic Cancer UK encourage every healthcare professional involved with the care of people with pancreatic cancer to be aware of and pro-actively prescribe PERT, where appropriate, at the point of a patient's diagnosis.

Primary care are well placed to do this:

- ▶ At diagnosis
- ▶ Later on if not already on PERT

Finding the forgotten

- ▶ Patients who are inoperable or not managed in specialist centres are less likely to be prescribed PERT.
- ▶ This cohort of patients still benefits from PERT
- ▶ Improved QOL.
- ▶ Improved survival time.

2 Options

- ▶ Opportunistic
- ▶ Audit

Audit

- ▶ Small numbers, big individual impact

- ▶ **Benefits**

- ▶ Individual patients
- ▶ Share and embed learning

- ▶ **Examples of audit**

Practice Size	Pancreatic cancer	PERT (1 st data)	PERT (2 nd data)
6,000	1	0/1	1/1
8,500	1	1/1	
15,000	6	4/6	

Pancreatic Cancer?

Yes → Check Pancreatic Enzyme Replacement Therapy (PERT)



Pain
Bloating
Wind
Diarrhoea

Starting Dose
75,000 units per meal
50,000 units per snack

**Early Dietitian
referral**

PERT for everyone: operable or inoperable

curative or palliative

Consider PPI* adjuvant

**"Titrate PERT dose to diet,
not diet to symptoms"**

Quality of life
Tolerance to therapies
Overall survival time

