

Pancreatic
Cancer
UK

An introduction to Pancreatic Cancer

Dietetic management and pancreatic cancer

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Setting the scene

- **10,449 people** diagnosed with pancreatic cancer in the UK in 2018.
- Pancreatic cancer is the 10th most common cancer in the UK (9th in women; 12th in men)
- Pancreatic cancer is the **5th biggest cancer killer** in the UK with 9,000 deaths every year
- Incidence has increased by 17% since 1990
- 47% of cases are in the over 75's
- 80% of cases are diagnosed in the late stages
- Risk factors: smoking, obesity, alcohol, chronic pancreatitis; gallstones, diabetes and family history
- Pancreatic cancer has the lowest survival of all common cancers, with five-year survival **less than 7%**

Pancreatic cancer is the 10th most common cancer

Every day 28 people are diagnosed with the disease



More than half

of people diagnosed
with pancreatic
cancer die

**within 3
months**



Tough to diagnose

3 in 5

people are
diagnosed at an
advanced stage
(stage 3 and stage 4)



Tough to treat

1 in 10

people with
pancreatic cancer will
receive potentially
curative surgery



Tough to survive

Pancreatic cancer has
the lowest survival of
all common cancers,
with five-year survival

less than **7%**



Tough to research

only **3%**

of the annual UK
cancer research
budget goes into
pancreatic cancer

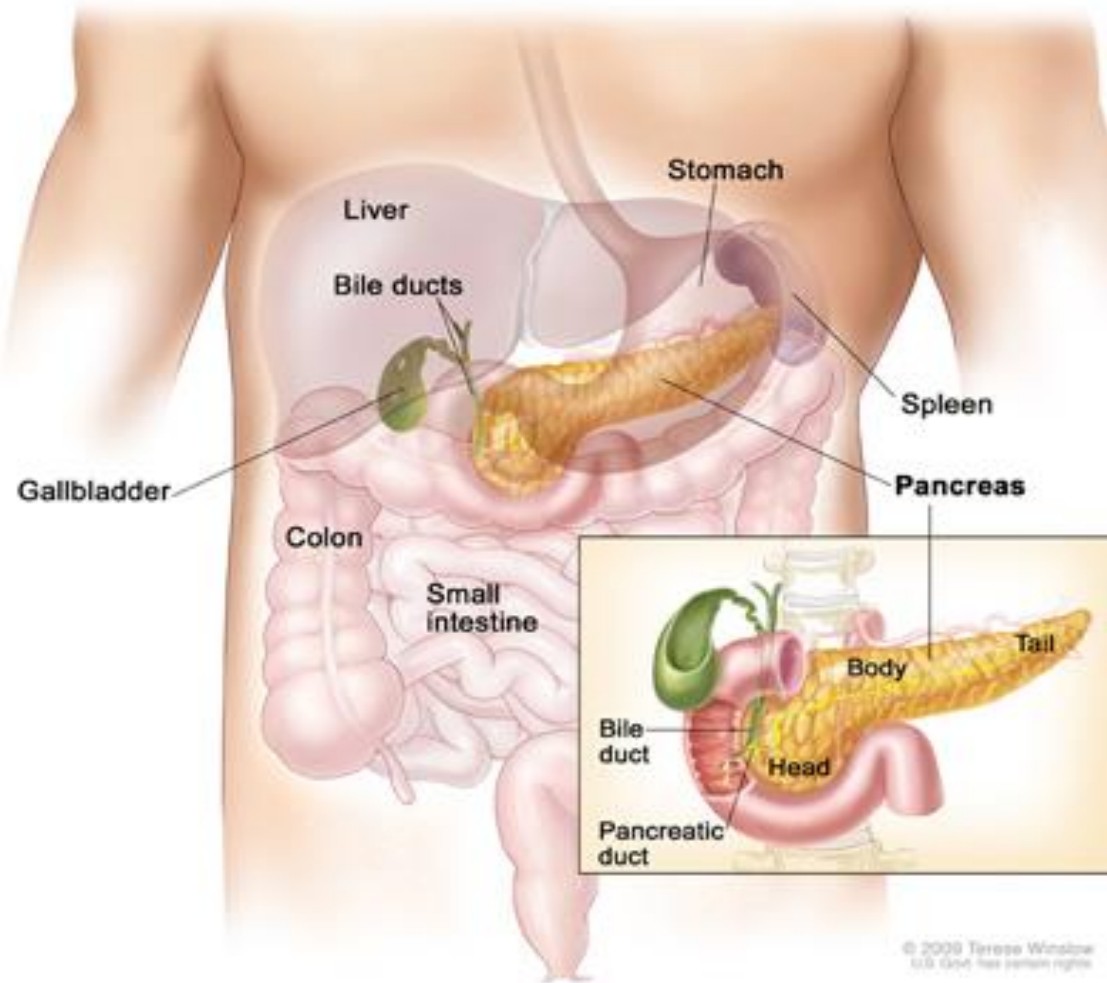


Nearly half

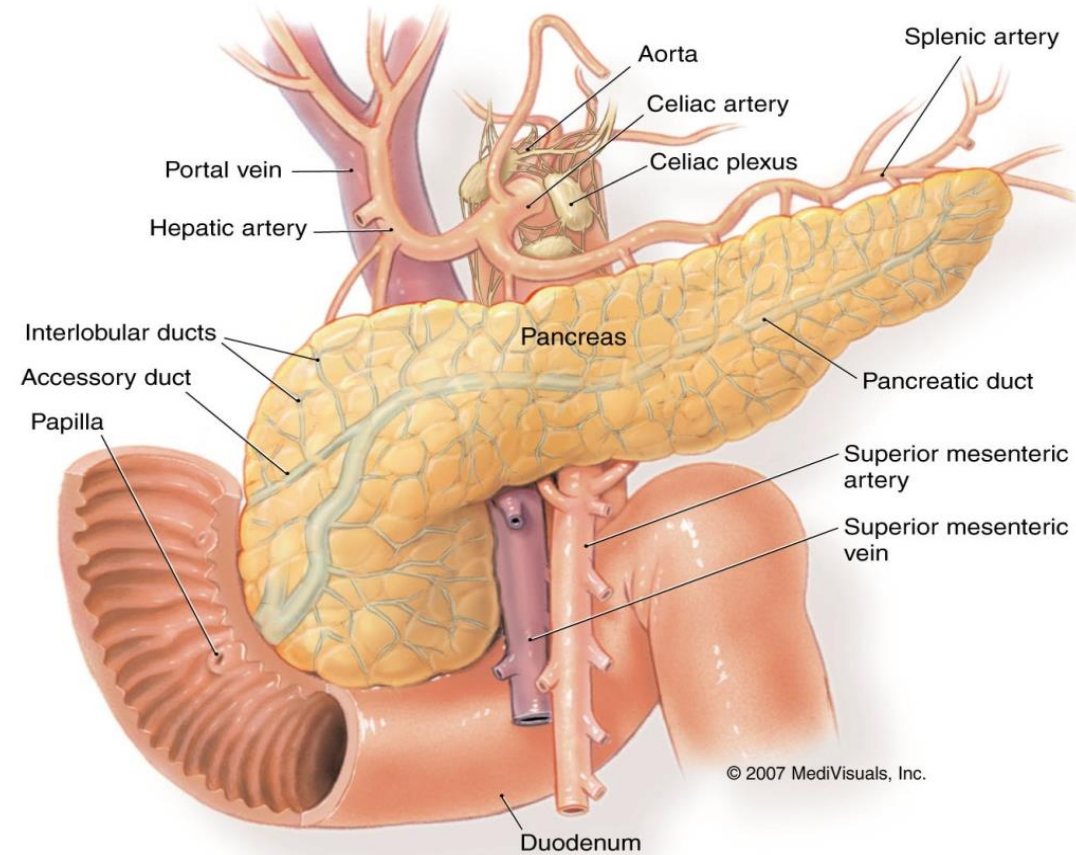
of all pancreatic
cancer patients are
diagnosed through

**emergency
routes**

e.g. A&E

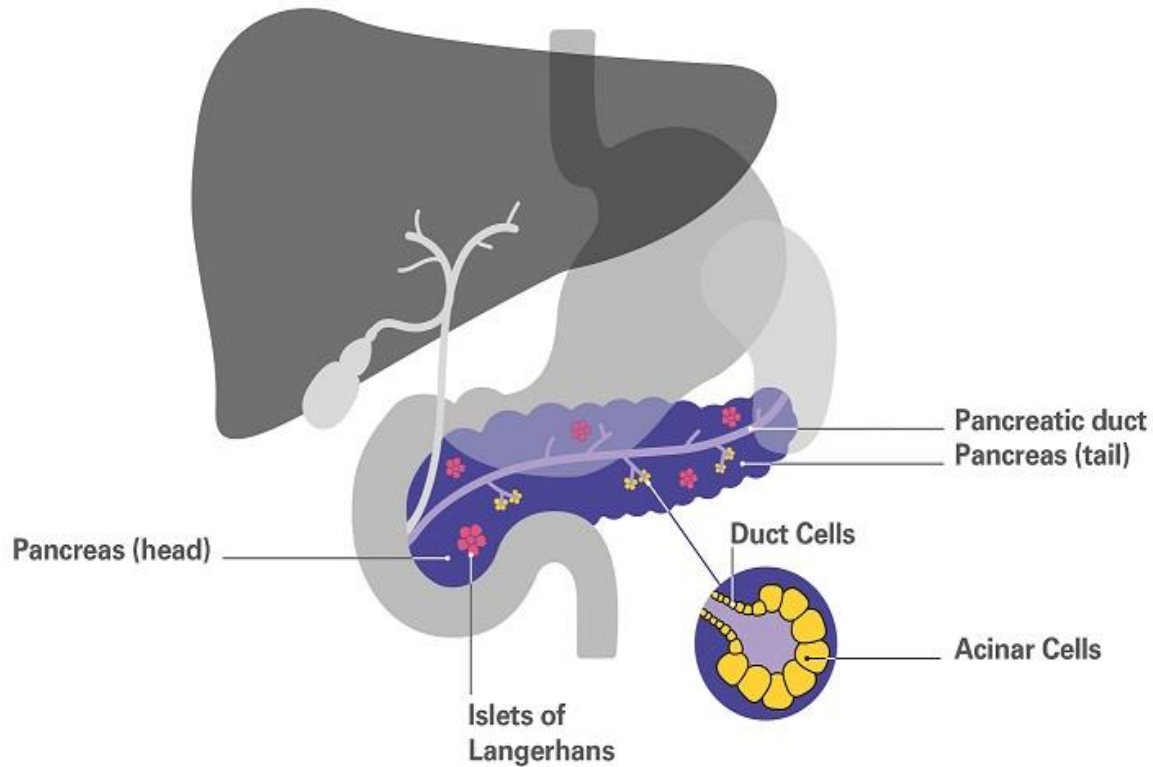


Normal Pancreas



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Exocrine Pancreas



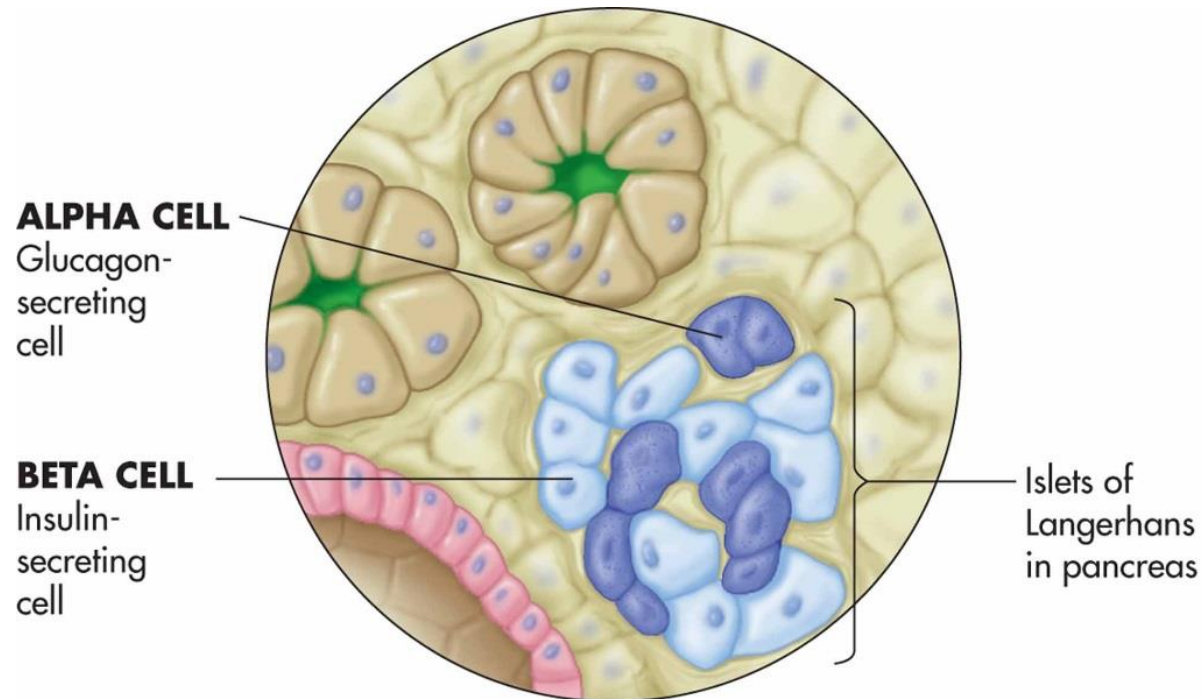
Pancreas function

Digestive function – helps breakdown carbs, fats, proteins in the duodenum.

The pancreatic enzymes travel along the pancreatic duct and become activated when they reach the duodenum.

It also produces bicarbonate which neutralizes the stomach acid entering the duodenum.

Endocrine Pancreas



Glucagon—raises blood glucose level
Insulin—lowers blood glucose level

Pancreas function

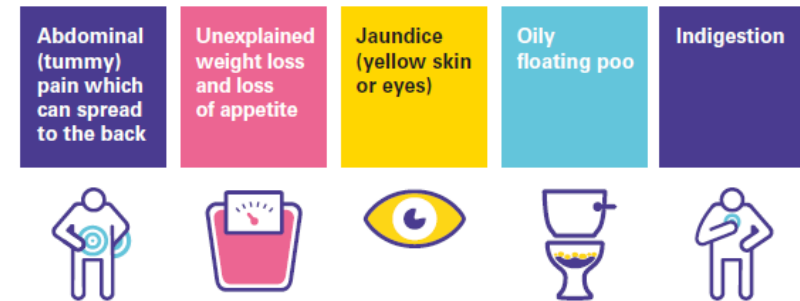
- Insulin is released to regulate blood sugar levels
- Glucagon is released when more sugar is required (i.e. in the fright, fight, flight syndrome – stress response)
- Somatostatin - decreases or increases the amount of glucose/insulin as required

Signs and symptoms

Nobody knows your body better than you.

If you have any of these symptoms it might suggest a problem with your pancreas, such as pancreatic cancer.

- Abdominal pain +/- back pain
- Dyspepsia/reflux/bloating
- Fatigue
- Change in bowel habit (Constipation/Diarrhoea/ Steatorrhea)
- Unintentional loss of weight/appetite loss
- New onset diabetes
- Jaundice
- Thromboembolism



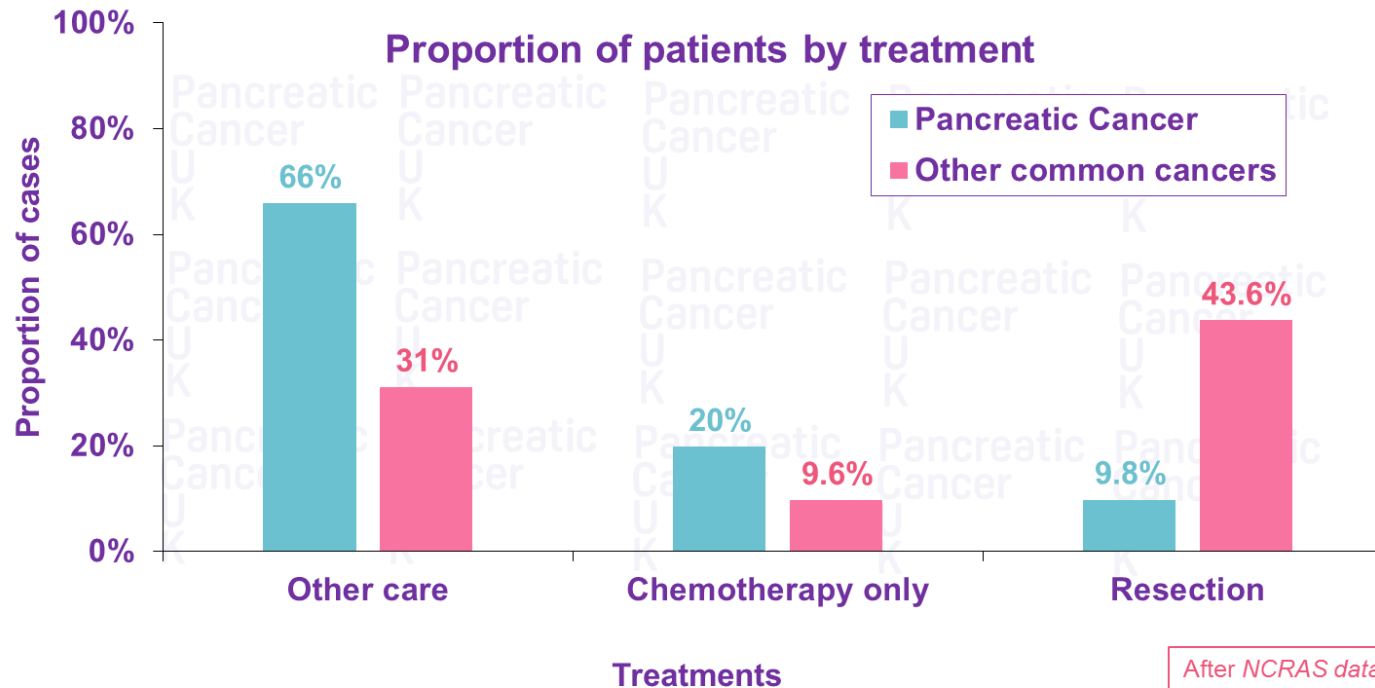
If you have jaundice you should go to your GP without delay. If you have any of the other symptoms and they are unexplained or persistent (lasting 4 weeks or more), visit your GP. Remember, these symptoms can be signs of other conditions and may not be pancreatic cancer.

Diagnosing pancreatic cancer

- **Blood tests** Ca 19-9 and CEA specific pancreatic tumour markers, however if raised does not necessarily mean 'cancer'
- **Abdominal Ultrasound** inexpensive, non invasive. If highlights an abnormality, then CT requested
- **CT (computed tomography)** often given IV injection of contrast to highlight blood supply to certain organs. Good diagnostic tool
- **MRI/MRCP (magnetic resonance imaging/cholangiopancreatography)** useful addition to imaging, can be more specific for liver metastases and highlighting abnormalities with in the bile ducts
- **ERCP – (endoscopic retrograde cholangiopancreatography)** endoscope is passed through mouth, down the oesophagus into stomach and into the duodenum. A smaller tube is then inserted through the centre of endoscope and dye is injected to highlight any obstruction to its flow through the biliary system
- **PET – (Positron Emission Tomography)** very specialised nuclear medicine scan that utilizes radioactive substances. Use more often with those cases with locally advanced disease
- **EUS – (Endoscopic Ultrasound)** Endoscope & ultrasound combined. Very accurate, good for visualizing Lymph nodes and taking biopsies in particular

Pancreatic Cancer is undertreated

- ✓ **7 in 10** people with pancreatic cancer do not receive any active treatment, including surgery, chemotherapy or radiotherapy
- ✓ **Only 1 in 10** people with pancreatic cancer receive potentially curative surgery
- ✓ **Only 2 in 10** people will receive chemotherapy



Ongoing symptoms

- Pancreatic Exocrine Insufficiency (PEI), loss of appetite & weight loss
- Biliary blockage
- Pain
- Gastric Outlet Obstruction
- Fatigue
- Ascites
- Psychological impact

Pancreatic Cancer UK

