Pancreatic Cancer U K

Finding breakthroughs. Giving hope. Saving lives.

Our 2023-28 strategy to transform survival for pancreatic cancer



We won't stop until everyone with pancreatic cancer survives to live long and well

Introduction

Our vision

A world where everyone with pancreatic cancer lives long and well.

Our strategy

The steps we'll take to **double pancreatic** cancer survival rates within five years and to deliver a better quality of life to everyone affected by this devastating disease.

> We won't stop until we find the breakthroughs that will give hope – and save lives.

Pancreatic cancer is the toughest of cancer challenges - it's a cancer emergency. But in the last five years we have seen more progress than in the previous five decades. In the next five years, we know we can step up the pace and drive this progress even further forward, transforming how we diagnose, treat and care for people with pancreatic cancer – and ultimately saving lives. But the scale of this challenge needs a united approach - I hope that you will join us to bring about the transformation in survival rates that we dream of. The time to act is now."

Diana Jupp, Chief Executive

Even among cancers, pancreatic cancer is especially tough. Too few people survive it.

By the time most people are told they have pancreatic cancer, it is usually very advanced. Over half will die within three

In UK, the five-year survival rate for pancreatic cancer is just 7%, and despite huge advances in other cancers, this statistic has barely changed in 50 years. Unless we act now, pancreatic cancer will become the fourth biggest cancer killer by 2024.

But we can change this – with your help more progress is coming - not at some longdistant point in the future but within the next five years.

These are far from empty words. Our ambitious new strategy sets out the steps we will take to double pancreatic cancer survival rates in the UK by 2028 and to ensure that everyone affected by the disease is able to access the information, care, and support they need to have a better quality of life.

It's time to step up the pace - to find answers, give hope and bring forward the day when everyone survives this deadly disease.

The transformation starts right here - there's no time to wait.

But we can't do it alone. We need more people to join us if we're to deliver this strategy for people with pancreatic cancer.

Together, we can drive earlier and faster diagnosis, accelerate treatment breakthroughs, ensure the best treatment and care is available everywhere, and improve the quality of life for everyone living with this devastating disease.

We need your help – the time to act is now. Together, we can find breakthroughs, give hope and save lives.



Diana Jupp **Chief Executive**



months of their diagnosis.

An unacceptable picture

People like my husband, Jay, have been neglected for too long.

We only had 7 months with Jay after he was diagnosed. If he'd been diagnosed just a couple of months earlier, he might still be here. The one thing Jay didn't want was for our son, Kal, to grow up without a dad – but now that's our reality.

Most of us know someone who's been diagnosed with cancer. But being diagnosed with pancreatic cancer is different. I can't believe that in the 21st Century you could be diagnosed with cancer and have so few options.

Late diagnosis, limited options

There is no simple test to detect and diagnose pancreatic cancer at an early stage. Signs and symptoms are often overlooked, and by the time most people are diagnosed, their treatment options are very limited.

And even then, they don't always get the support needed to face everything they're going through.

A legacy of underfunding

I was shocked to learn that, in the UK, research into pancreatic cancer has been underfunded for decades – meaning that little progress into understanding and tackling the disease has been made.

A postcode lottery

Treatment and care for pancreatic cancer varies hugely across the UK, which means that your chance of survival, or living better for longer, depends on where you live. How can this be possible?

A NHS stretched to the limit

And this is all made worse by the fact that, after years of underfunding and the pressures of a global pandemic, the NHS is struggling to cope.

Huge waiting lists and growing staff shortages are leading to even greater delays in diagnosis and care. For people with pancreatic cancer who have no time to wait, this is critical.

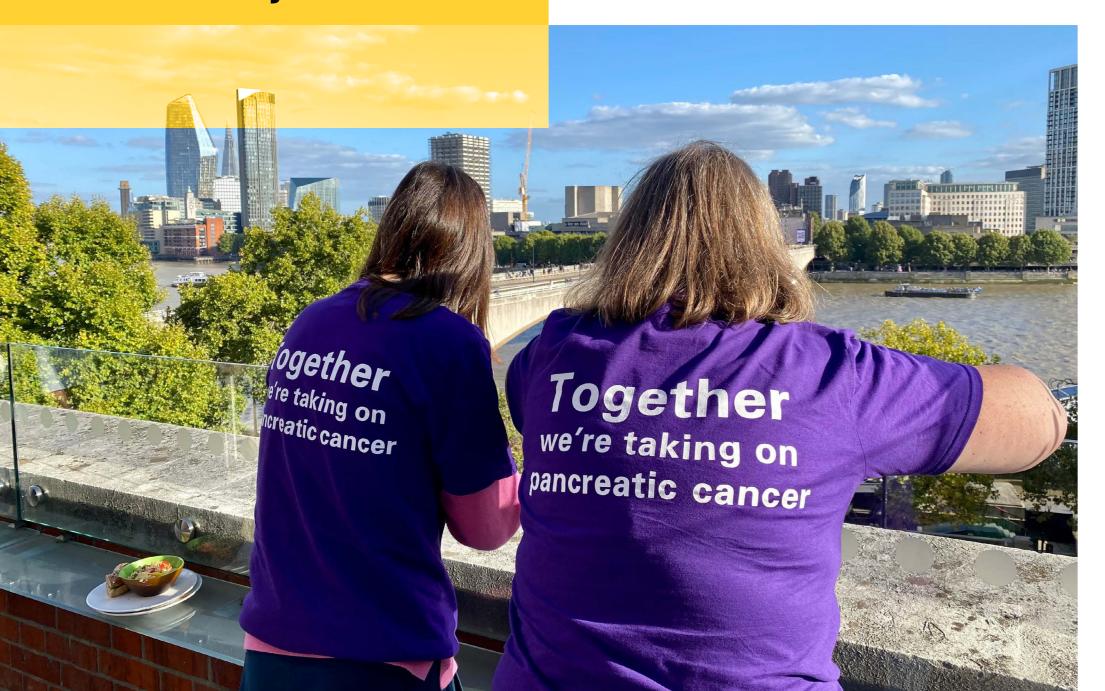
The results of the neglect are undeniable. I was terrified to learn that only 7% of people survive this awful disease.

It's a huge challenge.
But progress is
possible – I've been
working closely with
Pancreatic Cancer UK
and I truly believe
they have the plan
to deliver it."

Mihika Newell-Hughes



Our objectives



A brighter future

Our strategy to deliver transformational progress in the next five years

We're driven by people like Jay. Stories like his give us focus and determination to bring about the change that's desperately needed. We know it's possible – we've seen it with other cancers. And with your help, our plan can get us there.

To achieve our goals, we have established four core objectives:

1.



Drive earlier and faster diagnosis

so that everyone can be diagnosed early enough for treatment.

See pages 8-13





so that people can have better treatments that help them survive longer and live better.

See pages 14-19

3.



4.

Ensure high-quality treatment and care is available everywhere

so that everyone can access good care wherever they live.

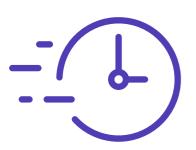
See pages 20-25

Improve quality of life today

so that everyone is supported, empowered and the impact of symptoms is reduced.

See pages 26-31

To achieve these priorities, we will need to double our annual income and double down on making sure we are innovative, impactful and as cost-effective as we can be. See pages 32-33.



We will drive earlier and faster diagnosis

so that everyone can be diagnosed early enough for treatment

The problem:

Pancreatic cancer is diagnosed at a later stage than all other common cancers. This means people are being diagnosed too late - when their treatment options and chances of survival are already limited.

At the moment, 80% of people are diagnosed at stages 3 or 4, too late for potentially lifesaving treatment.

Symptoms of pancreatic cancer are vague, and often come and go, making it hard for GPs to detect it early. And there's no simple test to quickly identify who needs urgent investigation and treatment. This means cases are being missed.

Almost half of people with pancreatic cancer receive their diagnosis as emergency cases, often in Accident & Emergency departments, when their cancer is advanced. This means their treatment options are limited.

These are shocking statistics. And not just statistics, but real people like Gemma's sister, Jayne.



I found a letter after
Jayne died...
In it, she was just asking
for five more years. She
wanted a bit of hope, a
bit of a fight, just more
time. No one deserves to
go through what she did.
Pancreatic cancer must be
more easily detected and
at an earlier stage, so this
does not keep happening."

Gemma Robinson, pictured on the left, with her sister Jayne who died aged just 50, leaving behind two teenage sons.

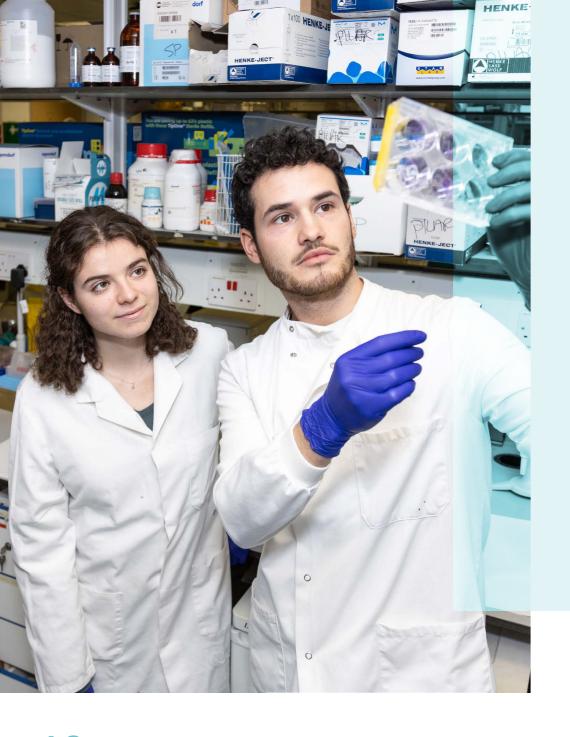


Together,

we can find breakthroughs, give hope and save lives.

As a result of our strategy we want to see more people being diagnosed in time to have life-saving or life-extending treatment, fewer people being diagnosed in emergency settings, and fewer people like Jayne robbed of time with their families.

Pancreatic Cancer UK Strategy 2023-2028



Despite the challenges, our achievements in early diagnosis research are already significant. And we also have some promising developments on the near horizon.

We know that change is possible, because...

We have already:

- produced one of the world's most accurate set of biomarkers or 'signifiers' of pancreatic cancer
- worked with industry to develop the first effective test to detect pancreatic cancer in the blood (now being tested in real-world settings). Early trial results show that this test is accurate in more than 95% of cases
- begun research to develop a world-first breath test to detect pancreatic cancer early
- established a unique, first of its kind 'vague symptoms' biobank, used across the world to develop and refine new approaches to pancreatic cancer detection.



Driving earlier detection is essential if more people are to have their cancer diagnosed at a stage where they are still eligible for life-saving or life-extending treatment.

With your help, we will:

Drive forward early detection research

By investing more than ever before, we will grow our understanding of how pancreatic cancer develops in the earliest stages, discover new biomarkers to spot the disease and drive the development of new detection tools – including new tools and tests to help GPs detect pancreatic cancer at an early stage.

Give health professionals the tools they need to diagnose earlier and faster

We will work with health professionals to ensure that new detection and diagnostic tools and tests are not only provided but taken up by health care professionals. And we will influence decision makers, such as NHS health providers and the Government to commit to helping people move along a faster 'pathway' from the point of presenting with symptoms to receiving a diagnosis.

Raise awareness of the signs and symptoms

We will run national awareness campaigns so that the public and healthcare professionals are better informed about the signs and symptoms of pancreatic cancer – and what to do when they detect them.

Find a way to monitor those at highest risk

We will also collaborate with others to develop monitoring programmes for high-risk groups, such as those with a family history of pancreatic cancer or early onset diabetes. And we will continue our work as the only UK organisation that collects and publishes high-quality data on pancreatic cancer diagnoses, so that we can continue to build our collective knowledge and campaign for better care.

Because of our work, more people will know the signs and symptoms of pancreatic cancer. People will know when to go to their GP. And when they get there, their doctors will have the tools they need to detect the disease. Monitoring programmes will also be in place and those at highest risk will sign up.

More researchers will be working in the field, innovative projects will be underway, and funding will have been secured to drive future breakthroughs. In addition, decision makers will recognise the need for consistent guidelines, faster diagnostic pathways and the tools made available to GPs to help detect pancreatic cancer – and be actively supporting and funding these priorities across the UK.

In summary

- ✓ More people will be diagnosed sooner at Stage 1 and 2 rather than Stage 3 or 4.
- ✓ Fewer people will be diagnosed in emergency settings such as A&E.

Which means that

- ✓ More people will be referred for life-saving or life-extending treatment.
- ✓ More people will survive.



Project spotlight

A world-first breath test to identify people who may have pancreatic cancer.

We are currently supporting Professor George Hanna at Imperial College London, whose research is focused on developing a simple breath test to identify patients who should be referred for further investigation (e.g. a CT scan). Breath testing is the ideal detection tool for GP surgeries, as it is easy-to-use, non-invasive, and incredibly cost-effective.

This type of early diagnosis breakthrough could play a major role in transforming survival rates.

And it's another hopeful sign that progress is not only possible – but coming soon.







We will accelerate treatment breakthroughs

so that people can benefit from better and more effective treatments

The problem:

As pancreatic tumours are so complex, scientists have struggled to develop effective targeted therapies to treat them. This means treatment options for people with pancreatic cancer are very limited, and the options available aren't effective enough at treating the cancer, or preventing it from returning in those who have had surgery. Many of today's treatments are highly toxic, so by the time most people present for treatment, they are already too unwell to cope with the treatment.

Over two thirds (70%) of people diagnosed with pancreatic cancer don't receive any treatment at all.

This overall complexity of pancreatic cancer and the lack of funding for research has made it difficult to make the progress that has been seen in other cancers. And the impact of all this has been utterly devastating for people like Claire, who has lost more than one loved one to this terrible disease.



One of the most horrific things I've ever witnessed in my life, [is] watching people fatally ill, because the pain in their stomach is too much to allow them to eat. I would just love to see advances made in pancreatic cancer, because from what I've seen, it's such an aggressive and indiscriminate disease."

Claire McEwan, pictured far left, who lost both her stepdad, pictured far right, and ex-husband to pancreatic cancer



Together,

we can find breakthroughs, give hope and save lives.

As a result of our strategy we want people with pancreatic cancer to have more effective treatment options that stop the cancer progressing or coming back, and better access to supportive care – giving people a better quality of life and, ultimately, saving lives. And we want fewer people like Claire left with no choice but to see their loved one in pain.



Despite the challenges, Pancreatic Cancer UK-funded scientists have already taken big steps forward in advancing our understanding of pancreatic cancer and how we might treat it more effectively. And more breakthroughs are emerging now.

We know change is possible because we have already:

- developed the first in-human trials of cancer destroying viruses
- helped identify a protein that may be an effective new 'treatment target'

 and shown in early-stage experiments that it's possible to kill pancreatic
 cancer cells by hitting these targets with CART cell therapy (a type of
 immunotherapy used in some blood cancers)
- demonstrated the importance of Pancreatic Enzyme Replacement Therapy (PERT) in helping people to tolerate treatment better, and enabling them to digest food more effectively – transforming their quality of life.



Accelerating
treatment
breakthroughs is
essential if we are
to give people with
pancreatic cancer
better and more
effective treatments,
so they can have a
longer, and better
quality of life.

With your help, we will:

Address historic underfunding in discovery research

We will use our influence to boost the overall UK annual research spend to at least £35 million.

This will enable us to advance our understanding of what causes tumours to occur, grow, and spread - vital to identifying the new 'treatment targets' that will pave the way for more effective therapies specifically for pancreatic cancer.

Build a strong and innovative research community

We will seek to attract, train, and retain more researchers, including pioneering scientists from a variety of sectors, whose bold hypotheses and innovative methods have the greatest potential to be transformative. And, we will ensure they have the funding and tools they need to achieve breakthroughs.

Transform the scale of our investment into research dedicated to developing more effective treatments

We will drive improvements in trials and treatments by investing more into research than ever before. We will use research and data to better understand current treatment and care inequalities and the barriers to improved health and survival for people with pancreatic cancer, so that we can address them. For example, by taking a more co-ordinated and prioritised approach to clinical trials.

Improve how people are supported through their experience

We will find ways for people to treat and manage their symptoms, helping them to stay fitter for longer, and have a better quality of life.

Pancreatic Cancer UK Strategy 2023-2028

Pancreatic Cancer UK Strategy 2023-2028

As a result of our work, there will be more investment into pancreatic cancer research, meaning more researchers, more innovative studies, and more treatment options, as well as improvements to existing approaches, such as surgery and radiotherapy. And ultimately, more people surviving.

New clinical trials will be underway. More patient data will be available to researchers to help drive further breakthroughs. And new and more personalised care interventions will be developed and made available to everyone who needs them.

In summary

- ✓ People will have more effective and less-toxic treatment options.
- ✓ More people will be able to have life-extending treatment.
- ✓ Fewer people will see their cancer come back after treatment.

Which means that

- ✓ People with pancreatic cancer will have a better quality of life.
- ✓ More people will survive.



Project spotlight

Focused Ultrasound – a brand new treatment technology which could greatly enhance the effectiveness of other therapies.

Pancreatic Cancer UK is co-funding the work of Professor Gail ter Haar and her team at the Institute of Cancer Research in London, who have been combining ultrasound and cancerspecific viruses to target and destroy pancreatic tumours.

As it grows, pancreatic cancer forms a dense, fibrous 'cage'

that prevents it from being attacked by the body's defences and cancer treatments. So, Professor ter Haar's team has been working to overcome this barrier by combining an ultrasound technique to make tumours more permeable, and viruses that target pancreatic cancer cells and initiate an immune response to kill them.

This type of treatment breakthrough could greatly enhance the effectiveness of other therapies – both new and old – and ensure that people diagnosed with pancreatic cancer have more and better treatment options.





We will ensure high-quality treatment and care is available everywhere

so that everyone can access good care, wherever they live

The problem:

Pancreatic cancer is tough to detect – but even once it's spotted, people can go on to face potentially huge obstacles: from getting their diagnosis, treatment and care – to having a better quality of life, and surviving. Currently, not everyone agrees on what high quality looks like for people with pancreatic cancer.

This has resulted in a postcode lottery in relation to diagnosis, treatment, and care. In many cases, it's a very slow process with only 3 in 10 people still well enough to have chemotherapy or surgery by the time it is offered.

Today, surgery is the only potentially curative treatment for people with pancreatic cancer. The five-year survival rate is 10 times higher for those who undergo surgery, yet only 1 in 10 people are currently able to have it.

Due to the challenging symptoms caused by pancreatic cancer, people often become extremely unwell, which impacts their quality of life and ability to tolerate treatment. Pancreatic Enzyme Replacement Therapy (PERT) can help by managing digestive symptoms, supporting nutrition and reducing weight loss.

Current NICE guidelines recommend that all patients are prescribed it, however, only just over half of patients (54%) receive PERT – and those who are unable to have surgery are not even offered this medication.

This often leaves people like Anna feeling angry and frustrated about 'what might have been'.



There was no discussion about treatment and it felt like a waiting game throughout our entire journey. We knew that this cancer was the deadliest but no one had stressed to us the urgency required for this type of aggressive cancer. If we had known what we know now, we would have been pushing the hospital constantly to obtain an urgent referral to oncology."

Anna Beretta, pictured left, whose mum Virginia, pictured right, died aged 62, just six months after first experiencing symptoms.



Together,

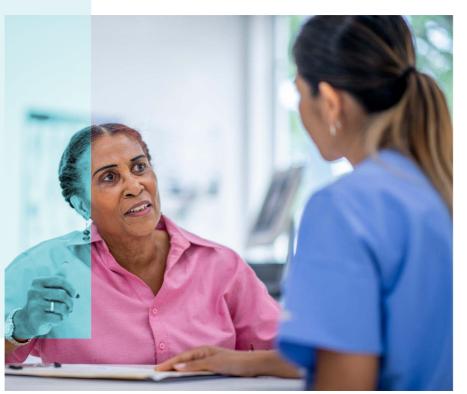
we can find breakthroughs, give hope and save lives.

As a result of our strategy we want to see more people benefiting from swift access to high quality treatment and supportive care, more people staying well enough to complete their treatment, and fewer people like Virginia losing their lives because of 'too little, too late'.

To us, it is totally unacceptable that people with a pancreatic cancer diagnosis struggle to access treatment and care. So, while changing the landscape is a huge challenge, we're confident that progress will continue to come.

We know change is possible because we have already:

- Significantly grown the community of people campaigning for change in the diagnosis, treatment and care of pancreatic cancer, which has led to:
- NICE launching their first ever guidelines for pancreatic cancer, a huge step forward in giving people affected by the disease the best possible treatment and care
- a Best Practice Pathway being implemented in the NHS, which uses easy to follow flowcharts to guide healthcare professionals to deliver best practice diagnosis, treatment and support
- Abraxane, a chemotherapy drug, being approved for use in the UK on the NHS – giving people with pancreatic cancer another much needed treatment option.
- Supported clinicians to successfully lobby NICE to commission the roll out of specialised radiotherapy, SABR treatment, in England for people with locally advanced pancreatic cancer.







Ensuring that everyone with pancreatic cancer can access high-quality treatment and care - wherever they live, whoever they are - is essential to saving, and improving, lives across the UK.

With your help, we will:

Achieve a consensus on what equals high quality and make sure it benefits everyone

We will work with the pancreatic cancer community to develop understanding of what high quality looks like. And having built a consensus, we will establish standards and milestones, and press for these to be rolled out across the UK.

Inspire more people to campaign with us

We will continue to build a community of active campaigners, to amplify the voice of people affected by pancreatic cancer and to drive further improvements in diagnosis, treatment, and care.

Give training for health and care professionals

We will work with health and care professionals to develop their understanding of what high quality looks like, so they can improve the care they offer to people with pancreatic cancer. This includes access to PERT and to any new treatments that become available.

Use data to help inform better care and support

We will use data to show where variations in care exists, to ensure quality standards of care are adopted across the UK, and to track and monitor the impact of treatment and care – and what this means for people with pancreatic cancer.

As a result of our work, national endorsement of, and funding for, high-quality practice standards in pancreatic cancer. And decision makers will commit to embedding new treatment and care options as they emerge.

Evidence will show less local variation in access to and quality of treatment and care. More people living with pancreatic cancer will feel encouraged to advocate and campaign for change. And health and care professionals will be able to deliver the highest standards of treatment and care and to drive this forward in their local area.

In summary

- ✓ More people will have access to high-quality treatment and personalised care, regardless of where they live.
- ✓ More people will be able to participate in clinical trials if they choose to.
- ✓ More people will remain well enough to embark on and complete active treatment.

Which means that

- ✓ People with pancreatic cancer will have a better quality of life.
- ✓ More people will survive.



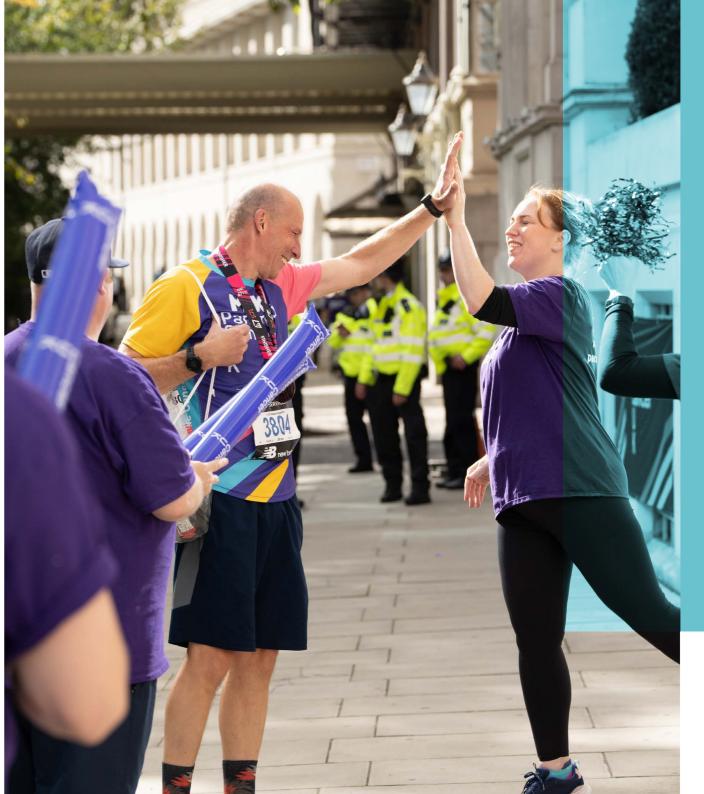
Project spotlight

Our campaign to define the best experience for people with pancreatic cancer and seeing this prioritised in national cancer plans.

We will work with health and care professionals and people affected by pancreatic cancer to agree a consensus of what high-quality treatment and care looks like – and we will partner with them to define standards and milestones to ensure it is implemented across the UK.

We are already pushing for national cancer plans in England, Wales and Northern Ireland, to prioritise less survivable cancers – just as we have already achieved in Scotland.

By ensuring that the best treatment and care is available everywhere, we will put an end to the postcode lottery many patients now experience and ensure that everyone diagnosed with pancreatic cancer will be properly supported – from the very start.





We will improve quality of life today

so that everyone is supported, empowered, and better able to manage their symptoms

The problem:

The physical and emotional impact of pancreatic cancer is significant. Dedicated support in areas such as symptom management can make a huge difference to people's quality of life. And yet most people don't get the support they need, and this can have an overwhelming impact on them – and their families.

Unlike with many other cancers, end of life care and the prospect of bereavement affects most people with pancreatic cancer and those who are close to them. And without the right support, they can feel isolated, frightened, angry, and distressed.

At the same time, not everyone who could benefit from our support is receiving it. We need to increase awareness of our services and reach more people at the point of diagnosis so that everyone has the opportunity to be supported through their experience.

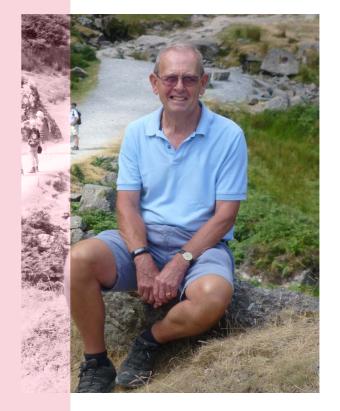
We also know that inequalities in society are contributing to inequalities in health outcomes in pancreatic cancer. Yet we still don't know which communities are being left behind and who must be prioritised.

What we do know however, is that high-quality support can have an enormous impact on people's quality of life after diagnosis – like it has for Peter. And we are determined to make sure that this support is available and easy to access for everyone diagnosed with pancreatic cancer.



From that point on, things altered enormously. My whole digestive system improved...
I put the weight back on...
I just became much better.
I really can't contemplate what life would have been life if I'd not had ready access to those tablets."

Peter Fitzpatrick, pictured, who was diagnosed with pancreatic cancer in 2020, and was fortunate enough to receive support and a prescription for PERT.



Together,

we can find breakthroughs, give hope and save lives.

As a result of our strategy we want to see more people like Peter, being properly supported and better able to manage their symptoms, including via end-of-life support.

Pancreatic Cancer UK Strategy 2023-2028

Pancreatic Cancer UK Strategy 2023-2028



With a pancreatic cancer diagnosis comes the reality that often, people only have a very little time left to spend with their loved ones. The quality of that time and their ability to take part in daily activities is therefore incredibly important, which is why we'll continue to strive for progress in this vital area.

We know change is possible because we have already:

- successfully campaigned alongside health professionals and people with pancreatic cancer for PERT to be routinely prescribed to support people's digestive health, reduce daily symptom burden, allow them to better take part in daily life, resilience, and ability to withstand treatment
- supported tens of thousands of people through our support services and information every year
- given people the opportunity to share their experiences and connect with others through our peer-to-peer and online support services, helping to reduce isolation.



By empowering people to reduce the impact of their symptoms and take back control of their experience and treatment, we can improve their, and their loved ones', quality of life today.

With your help, we will:

Develop a wider range of more inclusive services, tools, and information

We will develop new services that connect people with pancreatic cancer to us and to one another. For example, we will develop a support hub on our website to act as a one-stop-shop for patients and their families, as well as new tools and information to help people reduce the impact of their symptoms, to cope with bereavement, and to secure the best care available.

Make the support we offer more diverse and accessible

We will listen and be more responsive to the needs of everyone affected by pancreatic cancer.

We will develop information and other resources that are tailored to the specific needs of different communities. And we will also advocate for these resources to be integrated into the diagnostic, treatment, and care pathways, so that everyone knows about and can access them.

Give more opportunities for personalised and peer support

We will keep our Support Line open when it's most needed, so that more people can contact our nurses, ask questions, and receive bespoke support. We will enhance our peer support offering so that individuals can share their experiences, seek advice and make lasting connections with others who know exactly what they are going through.

We will also equip health and care professionals to support their patients with symptom management (including the prescription of PERT), and to further increase referrals to our specialist information and support.

Collect data via the Pancreatic Cancer UK Medli app

We will also collect data on Patient Reported Outcome Measures (PROMS) via the Medli app, which allows people to access support, record information, and track their quality of life. This will inform our understanding of the impact of the disease on different communities in relation to quality of life so we can make evidence-based recommendations for improvements and develop new services.

As a result of our work, more people will be aware of the information and support we offer and able to access our tools and services within one month of their own or a loved one's diagnosis.

Health and care professionals will understand the needs of people with pancreatic cancer and feel confident to provide supportive care interventions. And people diagnosed with pancreatic cancer will be better able to manage their condition and symptoms, including via the Medli app, while feeling more in control, better connected, and less isolated.

In summary

- ✓ People with pancreatic cancer will be aware of and able to access high-quality treatment and care.
- ✓ People will be better informed, better able to manage their symptoms, and better placed to feel more in control.
- ✓ More people will feel well enough and well-supported enough - to complete treatment.

Which means that

✓ People with pancreatic cancer will report having a better quality of life.

Pancreatic Cancer UK Strategy 2023-2028



Project spotlight

Our newly launched Medli app – supporting people today and changing the future.

Medli, our free app specifically for people affected by pancreatic cancer, gives people the opportunity to track their symptoms, log appointments, and access tailored information for them.

As well as combating feelings of powerlessness, the Medli app also enables users to improve support for future patients by choosing to share their data.

This will help to accelerate research breakthroughs, develop new information and support to meet needs and enable us to create compelling evidence-based recommendations, focused on ensuring UK-wide access to the best treatment and care.

This type of approach will put the tools for improving quality of life into the hands of people who need it most; those diagnosed with and affected by pancreatic cancer. We are already making a difference. And by 2028, we're confident that 'today' will look significantly better.



How we plan to achieve our priorities

To at least double pancreatic cancer survival rates within five years, while improving quality of life for everyone affected by pancreatic cancer, we need to transform the level of investment into research funding more than ever before - and double our reach. And we can't achieve this without two additional objectives:

- Doubling our annual income, from £9m in 2021/22 to £18m in 2027/28.
- Doubling down on our own ways of working to ensure we're as innovative, impactful, and cost-effective as we can be.



In particular we will:

Unlock the potential of data

By establishing a robust patient databank to better understand the symptoms, treatment and care of pancreatic cancer, and how these factors - along with underlying health inequalities – affect people's quality of life and survival. We will then use this understanding to drive improvements in care, with the aim of delivering a better experience for people affected by pancreatic cancer and of boosting survival rates.

We also plan to gain more value from our own data to deliver a more engaging and meaningful experience for our partners and supporters at every touchpoint.

Use smart technology

By developing, evaluating, and refining new tools and products that leverage the power of digital technology to reach and support more people.

Enrich our perspective

By delivering on our commitment to equality, diversity, inclusion and belonging, attracting the very best people to work with us, and enhancing our organisation with a diverse range of perspectives.

We will also continue to listen to and involve people with personal experience of pancreatic cancer in every aspect of our work.

Grow our network

By uniting with others, working in partnership with the government, key charities, volunteers, the research community, and other key stakeholders, to bring about the change we need to see.

Build our brand

By investing in our brand where necessary to put us in the strongest possible position to raise awareness of pancreatic cancer, our work, and what we can do to support people from the point of diagnosis.

And measure our impact

By developing a framework to measure and evaluate our progress, so that we can stay on track, or make strategic changes if necessary to achieve our goals.

The transformation starts right here, right now. And you can be part of it.

This is an ambitious strategy, and while we're passionate about delivering it, we can't do this alone.

We need you to join our growing community of patients, family members, health and care professionals, researchers, campaigners, and fellow supporters who will work together to make our goals a reality. We all have our part to play, whether it's raising vital funds, making the next research breakthrough, treating and caring for patients, or campaigning to right wrongs.

Your role is vital.

Together we're a force for change that cannot be ignored.



Here's how you can help

To donate

Please visit: pancreaticcancer.org.uk/donate

Doubling our income within five years is a very big ask. But pancreatic cancer is a major challenge and the time has come to face it head on and with all guns blazing. And every donation helps.

To volunteer your time

Please visit: pancreaticcancer.org.uk/get-involved

If you would like to fundraise for us, join our campaigns, spread the message about our work or otherwise volunteer your time or talents, we'd love to hear from you.

To involve your workplace

Please visit: pancreaticcancer.org.uk/workplace

If you would like to make us your charity of the year, to involve your workplace in fundraising for us, or if you can offer us more tactical support with delivering our strategy, please get in touch.

Finding breakthroughs. Giving hope. Saving lives.

Our ambition is to double pancreatic cancer survival rates and improve quality of life for all those affected within five years.

To achieve this, we must transform our investment in research and double our reach, so that many more people can access our services, while scientists work to deliver new treatments and therapies.

This strategy walks you through our priorities and tells you how we'll double down on our own working methods to achieve them – with your help.

Pancreatic cancer won't wait – so we can't either. Your support is needed now.

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