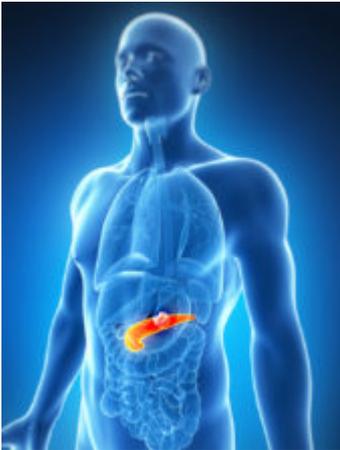


Pancreatic Cancer: Surgery Improves Survival in One-third



By Lila Abassi — May 25, 2016



Pancreatic cancer via

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[Pancreatic cancer \(adenocarcinoma\)](#) ^[2] is bad. The tumor develops from the [enzyme-producing exocrine glands](#) ^[3] of the pancreas. The prognosis is bad. By the time most people present with symptoms the cancer has already metastasized or spread. Generally, those diagnosed with pancreatic cancer have only months to live. The mean survival after being diagnosed is four to six months. [Pancreatic neuroendocrine tumors](#) ^[4], which develop from hormone-producing cells, on the other hand, have a much more favorable prognosis.

Some patients can have the tumor removed from their pancreas which, if successful, can lengthen survival time. However, one-third of patients are unable to undergo surgical removal because the tumor has wrapped itself around critical blood vessels and for these individuals, surgery is generally not an option. However, [recent findings](#) ^[5] that were presented at the Pancreas Club and Society for Surgery of the Alimentary Tract in San Diego reveal that there was a significant improvement in survival for these patients who underwent surgery.

“We’re definitely seeing a revolution,” stated Mark Truty, MD, a gastrointestinal surgical oncologist at Mayo Clinic in Rochester, Minnesota. “A lot of this has to do with better chemotherapy drugs and use of what we call multimodal therapy: chemotherapy, radiation and then an aggressive operation. Now we can potentially offer these therapies to patients who were previously were told they had no options.”

The stage at which the cancer is detected will indicate whether or not surgery is an option. For the roughly 50,000 Americans who are diagnosed with pancreatic cancer annually, those with metastases to other organs are not eligible for surgery. Only about 15 percent of those diagnosed will be considered surgical candidates.

What the authors of this study have found in a review of surgical outcomes over the past 25 years, is that the one-third of patients in whom the cancer has not spread, but advanced to where it wraps around important blood vessels – should still be considered surgical candidates. The surgeries are considerably riskier. But if patients received pre-operative chemotherapy and radiation, they are conferred a significant survival benefit long-term with reduced short-term complications as well.

Pancreatic adenocarcinoma, although the tenth most commonly diagnosed cancer in the U.S. is responsible for the fourth leading cause of cancer death. Although survival rates have improved over the past ten to 15 years, it is still one of the worst cancers in terms of survival. Because of the grim outlook with this diagnosis, any improvement in the available treatment is welcome.

“Not everyone wants to sign up for these big operations or these long protocols of chemotherapy and radiation. But they have the options available to them to make that educated decision about whether this is something that would benefit them,” says Dr. Truty. “We’re offering an additional bit of hope for a pretty substantial number of patients who had previously been ignored.”

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[3] <http://www.cancer.org/cancer/pancreaticcancer/detailedguide/pancreatic-cancer-what-is-pancreatic-cancer>

[4] <https://www.pancan.org/facing-pancreatic-cancer/learn/types-of-pancreatic-cancer/endocrine-pancreatic-neuroendocrine-tumors/>

[5] <http://newsnetwork.mayoclinic.org/discussion/chemo-radiation-surgery-combo-boosts-survival-for-pancreatic-cancer-patients-with-veins-involved/>