

Dr Candice Silverman MBBS (HONS) FRACS
General & Laparoscopic Surgeon

Core Specialist Group
Suite 5G, John Flynn Medical Centre
42 Inland Drive
TUGUN QLD 4224

Tel: 07 5598 0955

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Pancreatic Cancer (Treatment Options)

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You have been told that you have pancreatic cancer. We know that you will be distressed by this news and may not have been able to take in everything that your doctor or specialist nurse has told you.

This document will give you information about pancreatic cancer and will reinforce what your doctor has told you. If there is anything you do not understand, please ask your doctor or the healthcare team.

You are now being looked after by a team of specialists dedicated to providing care for people with pancreatic cancer. Their aim is to make sure you receive the best treatment to meet your needs. The healthcare team will take account of your views on the treatment you want to have, and will fully involve you in making decisions about your treatment. The healthcare team will not treat you without your consent.

What is pancreatic cancer?

The pancreas is an organ in your abdomen lying close to your liver, stomach and duodenum (see figure 1).

It produces enzymes and hormones. The enzymes help you to digest food. The hormone insulin works to move glucose (sugar) from your blood into your cells to give you energy.

Pancreatic cancer is a malignant growth in your pancreas. About 2,500 people develop pancreatic cancer every year in Australia.

This cancer can cause many symptoms.

- Weight loss and malnutrition is common and is caused by food not being digested properly.
 - You can get jaundice (your eyes and skin turning yellow) if the cancer causes bile to flow back into your liver.
 - You may feel itchy because bile salts build up in your skin.
 - You can get pain in your abdomen if the cancer presses on surrounding organs or nerves.
- Other symptoms include indigestion, tiredness and feeling bloated.

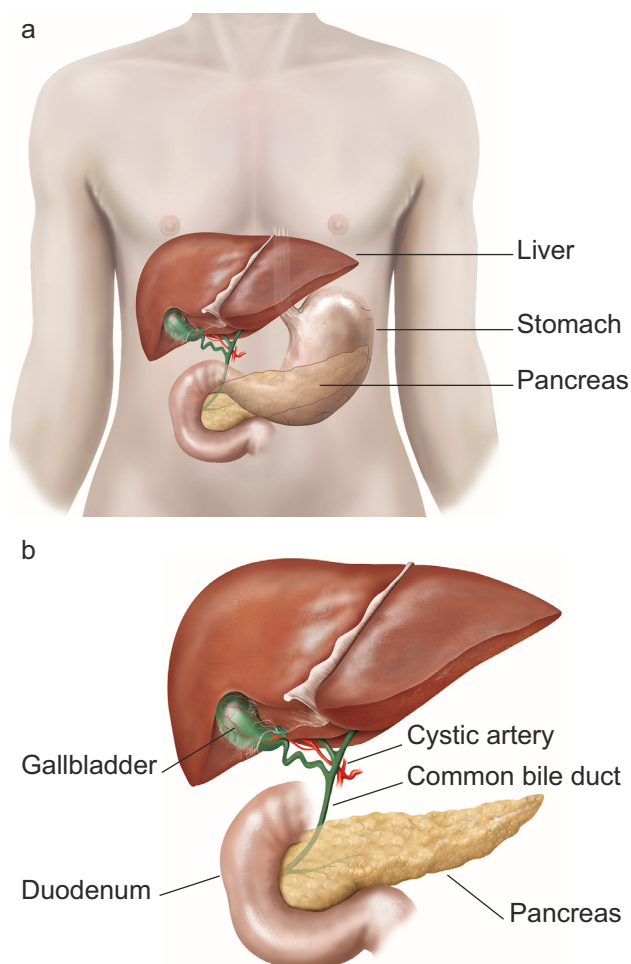


Figure 1

a The position of the pancreas

b The pancreas and surrounding structures

How can pancreatic cancer be treated?

Surgery or chemotherapy, or a combination of both, can be used to treat pancreatic cancer.

- Surgery involves removing the cancer, part of your pancreas and other nearby structures. Sometimes part of your stomach is also removed. The remaining part of your pancreas, your bile duct and stomach are connected to the small intestines, allowing you to eat and drink normally.
- Chemotherapy involves injecting special medication directly into a vein or taking tablets to try to shrink the cancer and kill off cancer cells. Your doctor or specialist nurse will help you to decide which treatment is best for you.

How do I know what is the best treatment for me?

Removing the cancer by surgery gives the best chance of you being free of pancreatic cancer. If the cancer has spread so far that it is no longer possible for you to be cured, there are other treatments that can improve your symptoms and make you feel more comfortable.

- Inserting a stent (metal mesh tube) in your duodenum to help you to eat and drink.
- Inserting a stent in your bile duct to allow bile to flow into your stomach.
- If inserting a stent is not possible, a gastric and biliary bypass can be performed to make a way around a blockage.
- Medication, such as morphine tablets, helps to relieve pain.
- A regional anaesthetic called a coeliac plexus block also helps to relieve pain.
- Enzyme supplements help you to absorb nutrients from your food.

Some people who have other medical problems may not be strong enough to have major surgery and so non-surgical treatments would be better. To decide on the best treatment for you and if surgery is likely to help you, you may need to have a number of tests. If you have recently had some of these tests, they will not need to be repeated.

- CT scan – This shows if the cancer has spread to your liver or other areas of your body.
- Ultrasound scan – This uses sound waves to give pictures of your internal structures.
- MRI scan – A powerful magnetic field and radio waves give pictures of your abdomen.
- ERCP – This procedure gives detailed x-rays of your bile duct and pancreatic duct.
- Endoscopic ultrasound – This procedure gives ultrasound pictures of your pancreas and bile duct.
- Staging laparoscopy – This minor operation, performed under a general anaesthetic, involves inserting a small telescope into your abdomen. The examination will show if the cancer has spread to areas that are not usually seen on a CT scan, and will help your doctor to decide if surgery is likely to help you.
- Heart and lung function tests – These tests show if you are fit enough for surgery. They may include cardio pulmonary exercise tests.

Once all the information is available, your doctor will discuss the results at a team meeting with the other specialists involved in your care.

- Pancreatic cancer surgeons – Surgeons who specialise in diseases of the pancreas.
- Oncologists – Doctors who specialise in treating cancer with medication (chemotherapy) and radiotherapy.
- Radiologists – Doctors who specialise in x-rays and scans.
- Histopathologists – Doctors who examine tissue to confirm the diagnosis.

The team will recommend the best treatment for you. Your doctor or specialist nurse will discuss the recommendation with you and give you further written information to help you to decide what to do.

Keep this information leaflet. Use it to help you if you need to talk to a healthcare professional.

Acknowledgements

Author: Mr Ian Beckingham DM FRCS and Mrs Cathy van Baalen RGN BA (Hons)
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This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.