What is pancreatic cancer?
Pancreatic cancer begins when healthy cells in the pancreas stop working correctly and grow out of control, forming a mass called a tumor. The most common type of pancreatic cancer, called ductal adenocarcinoma, begins in the cells lining the pancreatic ducts. Signs or symptoms of pancreatic cancer may include abdominal pain, lower appetite or energy level, unexplained weight loss, and/or jaundice, which is yellowing of the skin and/or eyes. It is often diagnosed after it has spread to other parts of the body.

What is the function of the pancreas?
The pancreas is a pear-shaped gland located in the abdomen between the stomach and the spine. It has 2 major components: exocrine and endocrine. The exocrine component, made up of ducts and small sacs called acini on the ends of the ducts, produces specialized proteins called enzymes that help the body digest and break down food. The endocrine component is made up of cells clustered together, called the islets of Langerhans, and produces hormones, the most important one being insulin, which helps control blood sugar.

What does stage mean?
The stage is a way of describing the size and local extent of a cancer and whether it has spread to nearby lymph nodes or to other parts of the body. The most common method used to stage pancreatic cancer puts the cancer into 1 of 4 categories based on whether the tumor can be removed with surgery and where it has spread: resectable, borderline resectable, locally advanced, and metastatic. Find more information at www.cancer.net/pancreatic.

How is pancreatic cancer treated?
The treatment of pancreatic cancer depends on the size and location of the tumor, whether the cancer has spread, and the person’s overall health. The most common pancreatic cancer treatments are surgery, radiation therapy, and systemic therapies, such as chemotherapy. Certain subtypes of pancreatic cancer may also be treated with targeted therapy or immunotherapy. Surgery may involve removing all or part of the pancreas, along with the nearby lymph nodes, depending on the location and stage of the cancer. Chemotherapy and/or radiation therapy may be used if surgery is not recommended, before surgery to reduce the size of a tumor, or after surgery to destroy any remaining cancer cells and lower the chances of the cancer returning. Current recommendations for a person newly diagnosed with pancreatic cancer also include genetic counseling and genetic testing to see if the cancer can be passed from generation to generation in a family.

When making treatment decisions, people may also consider a clinical trial. Clinical trials are an option to consider for treatment and care for all stages of cancer. Talk with your doctor about all treatment options. The symptoms and side effects of pancreatic cancer and its treatment can often be prevented or managed with the help of your health care team. This is called palliative care or supportive care and is an important part of the overall treatment plan. Palliative care for pancreatic cancer includes controlling diabetes, managing pain, and improving digestion.

How can I cope with pancreatic cancer?
Absorbing the news of a cancer diagnosis and communicating with your health care team are key parts of the coping process. Seeking support, organizing your health information, making sure all of your questions are answered, and participating in the decision-making process are other steps. Talk with your health care team about any concerns. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.
Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- What type of pancreatic cancer do I have?
- Can you explain my pathology report (laboratory test results) to me?
- What stage is the pancreatic cancer? What does this mean?
- Would you explain my treatment options?
- What clinical trials are available for me? Where are they located, and how do I find out more about them?
- What treatment plan do you recommend? Why?
- What is the goal of each treatment? Is it intended to cure the cancer, help me live longer, and/or feel better?
- Who will be part of my treatment team, and what does each member do?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- What long-term side effects may be associated with my cancer treatment?
- What can be done to help manage side effects?
- If I’m worried about managing the costs of cancer care, who can help me?
- Where can I find emotional support for me and my family?
- If I have a question or problem, who should I call?

Find more questions to ask the health care team at www.cancer.net/pancreatic. For a digital list of questions, download Cancer.Net’s free mobile app at www.cancer.net/app.

Words to know

- **Benign**: A tumor that is not cancerous.
- **Biopsy**: Removal of a tissue sample that is then examined under a microscope to check for cancer cells.
- **CA 19-9**: A high level of this substance, called a tumor marker, may be a sign of pancreatic cancer. It is measured with a blood test.
- **Chemotherapy**: The use of drugs to destroy cancer cells.
- **Immunotherapy**: A therapy designed to boost the body’s natural defenses to fight cancer.
- **Lymph node**: A tiny, bean-shaped organ that fights infection.
- **Malignant**: A tumor that is cancerous.
- **Metastasis**: The spread of cancer from where it began to another part of the body.
- **Oncologist**: A doctor who specializes in treating cancer.
- **Pancreatectomy**: Surgery to remove part or all of the pancreas.
- **Prognosis**: Chance of recovery.
- **Radiation therapy**: The use of high-energy x-rays to destroy cancer cells.
- **Targeted therapy**: Treatment that targets specific genes or proteins that contribute to cancer growth.

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