If You Have Pancreatic Cancer

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What is pancreatic cancer?

Pancreatic cancer is a type of cancer that starts in the pancreas. It happens when exocrine cells (a type of cell found in the pancreas) start to change and grow out of control, crowding out normal cells.

Your pancreas has 2 jobs:

- It makes a substance that helps break down (digest) the food you eat.
- It makes hormones that help control the levels of sugar, insulin, and other substances in your blood.

Pancreatic cancer starts in the type of cells that help break down food (exocrine cells). But there’s another, less common type of pancreatic cancer¹ that starts from the cells that make hormones (endocrine cells). If you've been diagnosed with pancreatic cancer, ask your doctor which type you have. The two types of pancreatic cancer are treated differently and have different outlooks.
Ask your doctor to use this picture to show you where your cancer is located.

Pancreatic cancer can spread to other parts of the body. When cancer does this, it's called *metastasis*. But the type of cancer is based on the type of cells it started from. So even if a pancreatic cancer spreads to your liver, for example, it is still called a pancreatic cancer, not liver cancer.

**Questions to ask the doctor**

- Why do you think I have cancer?
- Is there a chance I don’t have cancer?
- Would you please write down the kind of cancer you think I might have?
- What will happen next?
How does the doctor know I have pancreatic cancer?

Most of the time, early pancreatic cancers don’t cause any signs or symptoms. They are often not found until they cause problems that make a person seek help from a doctor.

Tests that may be done

The doctor will ask questions about your health and do a physical exam. It can be hard to find pancreatic cancer early because the pancreas is deep inside the body, making it hard for the doctor to feel something wrong if the cancer is still small. If signs are pointing to pancreatic cancer, more tests will be done. Here are some of the tests you may need:

**Biopsy:** The doctor takes out a little bit of tissue or some cells to check for cancer. A biopsy is the only way to tell for sure if you have cancer. There are different ways to do biopsies so ask your doctor which type of biopsy you will have.

**CT or CAT scan:** This test uses x-rays to make pictures of your insides. This can show clear pictures of the pancreas and the area around it to see if the cancer has spread.

**MRI scan:** This test uses radio waves and strong magnets instead of x-rays to make clear pictures of the inside of the body. This test may be used to learn more about the cancer’s size and spread. Special types of MRI scans can also be used to look at ducts and blood vessels in and around the pancreas.

**Endoscopic ultrasound (EUS):** This test uses sound waves to make pictures of the inside of the body. A small ultrasound on the tip of a thin tube is passed down the throat, into the stomach, and then into the first part of the small intestine. The ultrasound can be pointed to look at the pancreas. It can also be used to take out a little bit of tissue that can be checked for cancer.

**Endoscopic retrograde cholangiopancreatography (ERCP):** A small camera on the tip of a thin tube is passed down the throat, into the stomach, and into the first part of the small intestine. This test can check if the ducts are blocked due to pancreatic cancer. It can also be used to help open a blocked duct or take out some cells.

**Liver function tests:** These are blood tests to see how well the liver is working.

**Tumor markers:** Some pancreatic cancer cells can make certain proteins that show up in the blood. This test can be used along with other tests that make pictures and a
biopsy to help your doctor find out the kind of pancreatic cancer that you have.

**Other blood tests:** You might have other tests to help find out if you have any other health problems such as kidney disease and bone marrow problems.

**Questions to ask the doctor**

- What tests will I need to have?
- Who will do these tests?
- Where will they be done?
- Who can explain the tests to me?
- How and when will I get the results?
- Who will explain the results to me?
- What do I need to do next?

**How serious is my cancer?**

**Staging the cancer**

If you have pancreatic cancer, the doctor will want to find out how far it has spread. This is called staging. Your doctor will want to find out the stage of your cancer to help decide what type of treatment is best for you. Your cancer can be staged 1, 2, 3 or 4. The lower the number, the less the cancer has spread.

**Grading the cancer**

Grading means checking the cancer cells from your biopsy test to see how much they look like normal cells. This helps doctors tell how fast the cancer is likely to grow and spread. Your tumor will be given a grade between 1 and 3. The lower the number, the more the cancer cells look like normal cells and the slower they tend to grow. The tumor grade helps the doctor decide which treatment is best for you, so ask the doctor to explain the grade of your cancer and what it means for your treatment.

**Questions to ask the doctor**

- Do you know the stage of the cancer?
- If not, how and when will you find out the stage of the cancer?
- Would you explain to me what the stage means in my case?
Based on the stage of the cancer, how long do you think I’ll live?
What is the grade of the cancer and what will that mean for treatment?
What will happen next?

What kind of treatment will I need?

The main ways to treat pancreatic cancer are surgery, chemotherapy, and radiation therapy. Ask your doctor what treatments can help you. Even for cancers that are more advanced and harder to treat, treatment can often make symptoms better and slow down the cancer’s growth. Talk with your doctor to find out your options.

The treatment plan that’s best for you will depend on:

- The stage and grade of the cancer
- The chance that a type of treatment will cure the cancer or help in some way
- Your age
- Other health problems you have
- Your feelings about the treatment and the side effects that come with it

Surgery for pancreatic cancer

Surgery is used to try to take out all of the cancer if it’s small and has not spread. Sometimes, surgery can be done to take out only the cancer, and leave the rest of the pancreas alone. But often, depending on how large the cancer is, parts, or even all, of your pancreas and other organs might need to be removed, also. If your cancer is too large or has spread too far, surgery may not be possible and other treatments might be done instead. Ask your doctor what kind of surgery you will have.

Side effects of surgery

Surgery for pancreatic cancer can be a very big operation and can have risks and side effects. Be sure to ask the doctor what to expect and let your doctors know if you have any problems after surgery. Possible problems from surgery are:

- Leaking inside the body
- Infections
- Bleeding
• Trouble eating
• Weight loss
• Changes in bathroom habits
• Diabetes

Tumor ablation and embolization

Tumor ablation or embolization\(^6\) can help if a pancreatic cancer has spread to the liver. It destroys the tumor without taking it out by surgery. It may be done if you are too sick to have surgery. There are many ways to do this, such as heating the tumor with radio waves or microwaves, freezing the tumor, or killing the tumor by blocking the blood supply that feeds the liver. Talk to your doctor about what to expect.

Chemo

Chemo is the short word for chemotherapy\(^7\), the use of drugs to fight cancer. These drugs are mainly used for pancreatic cancers that are large, have spread, are growing fast, or are causing bad symptoms.

Some chemo drugs are given through a needle into a vein (called an infusion), and others are taken as pills. These drugs go into the blood and spread through the body. Chemo is given in cycles or rounds. Each round of treatment is followed by a break to allow your body to get better from the side effects. Different kinds of chemo drugs can be used together or alone, and often with other types of drugs, too. Treatment often lasts for many months.

Side effects of chemo

Common side effects are:

• Hair loss
• Mouth sores
• Not feeling like eating
• Diarrhea
• Feeling sick to your stomach
• Infections
• Bruising and bleeding easily
• Tiredness
These problems usually go away after treatment ends, and there are ways to treat most chemo side effects. If you have side effects, be sure to talk to your cancer care team so they can help.

**Targeted Therapy**

Targeted therapy\(^8\) drugs work differently from chemo drugs. These drugs affect mainly cancer cells and not normal cells in the body. They may work even if other treatments don’t. The type of targeted therapy drug that is used for pancreatic cancer is taken as a pill. Talk to your doctor what side effects to expect. Often, the side effects are different than the side effects from chemo.

**Immunotherapy**

Immunotherapy\(^9\) is treatment that either boosts your own immune system or uses man-made versions of parts of the immune system that attack the pancreatic cancer cells. One type of immunotherapy that is used to treat pancreatic cancer is given into a vein. This drugs may make you feel tired, sick to your stomach, or cause fever, chills, and rashes. Most of these problems go away after treatment ends. If you have side effects, talk to your cancer care team so they can help.

**Radiation Therapy**

Radiation\(^10\) uses high energy x-rays to kill cancer cells. Radiation (along with chemotherapy) can also be used when the cancer is too far along to be taken out by surgery. It can also be used to help make symptoms better – such as pain caused by an advanced cancer.

**Side effects of radiation treatments**

If your doctor suggests radiation, ask about what side effects might happen. The most common side effects of radiation are:

- Skin changes where the radiation is given
- Feeling very tired
- Feeling sick to your stomach
- Losing weight
Pain medicines

Pain\textsuperscript{11} is a common problem with pancreatic cancer. You should not be afraid to use the pain medicines offered. Pain medicines work best when they are taken at set times, not just when the pain gets bad. Ask your doctor which ones you will get and what to expect.

Clinical trials

Clinical trials are research studies that test new drugs or other treatments in people. They compare standard treatments with others that may be better.

Clinical trials are one way to get the newest cancer treatment. They are the best way for doctors to find better ways to treat cancer. If your doctor can find one that’s studying the kind of cancer you have, it’s up to you whether to take part. And if you do sign up for a clinical trial, you can always stop at any time.

If you would like to learn more about clinical trials that might be right for you, start by asking your doctor if your clinic or hospital conducts clinical trials. See Clinical Trials\textsuperscript{12} to learn more.

What about other treatments that I hear about?

When you have cancer you might hear about other ways to treat the cancer or treat your symptoms. These may not always be standard medical treatments. These treatments may be vitamins, herbs, special diets, and other things\textsuperscript{13}. Some of these are known to help, but many have not been tested. Some have been shown not to help. A few have even been found to be harmful. Talk to your doctor about anything you’re thinking about using, whether it’s a vitamin, a diet, or anything else.

Questions to ask the doctor

- What treatment do you think is best for me?
- What’s the goal of this treatment? Do you think it could cure the cancer?
- Will treatment include surgery? If so, who will do the surgery?
- What will the surgery be like?
- Will I need other types of treatment, too? What’s the goal of these treatments?
- What side effects could I have from these treatments?
- What can I do about side effects that I might have?
- Is there a clinical trial that might be right for me?
• What about special vitamins or diets that friends tell me about? How will I know if they are safe?
• How soon do I need to start treatment?
• What should I do to be ready for treatment?
• Is there anything I can do to help the treatment work better?
• What’s the next step?

What will happen after treatment?

You’ll be glad when treatment is over. For years after treatment ends, you will see your cancer doctor. Be sure to go to all of these follow-up visits. You will have exams, blood tests, and maybe other tests to see if the cancer has come back. At first, your visits may be every 3 to 6 months. Then, the longer you’re cancer-free, the less often the visits are needed.

Some treatments may not cure your cancer. You many need to keep getting treatment and care. From time to time tests will be done to see how your treatment is working.

Having cancer and dealing with treatment can be hard, but it can also be a time to look at your life in new ways. Call us at 1-800-227-2345 or talk to your cancer care team to find out what you can do to feel better. You can’t change the fact that you have cancer. What you can change is how you live the rest of your life.

For connecting and sharing during a cancer journey

Anyone with cancer, their caregivers, families, and friends, can benefit from help and support. The American Cancer Society offers the Cancer Survivors Network (CSN), a safe place to connect with others who share similar interests and experiences. We also partner with CaringBridge, a free online tool that helps people dealing with illnesses like cancer stay in touch with their friends, family members, and support network by creating their own personal page where they share their journey and health updates.

Hyperlinks

15. csn.cancer.org/
16. www.caringbridge.org/
17. www.cancer.org

Words to know

**Adenocarcinoma** (AD-no-KAR-suh-NO-muh): Cancer that starts in the glandular cells that line certain organs and make and release substances into the body, such as mucus, digestive juices, or other fluids.

**Angiography** (AN-jee-AH-gruh-fee): This is an x-ray test that looks at blood vessels. A small amount of dye is injected into an artery to outline the blood vessels, and then x-rays are taken. This test can be useful in finding out if a pancreatic cancer has grown through the walls of certain blood vessels.

**Endocrine cells** (EN-doh-krin): Cells in the pancreas that produce hormones (such as insulin) that help control sugar in the blood.

**Exocrine cells** (EK-soh-krin): Cells in the pancreas that make special juices that help your body digest food after you eat.

**Pancreatic Enzymes**: The proteins made by the pancreas that help in the digestion of food. Together these enzymes are commonly referred to as pancreatic juice.

**Targeted therapy**: These drugs affect mainly cancer cells and not normal cells in the body. These drugs often have milder side effects than chemo.
How can I learn more?

We have a lot more information for you. You can find it online at www.cancer.org (www.cancer.org)\textsuperscript{17}. Or, you can call our toll-free number at 1-800-227-2345 to talk to one of our cancer information specialists.

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