Although it is the 4th leading cause of death by cancer, research on pancreatic cancer receives less than 2% of all cancer research funding in Europe.

Pancreatic cancer arises when malignant cells in the pancreas, a glandular organ behind the stomach, begin to multiply and form a mass. It has the lowest survival rate of all cancers.

What is pancreatic cancer?

Thanks to improved screening and treatment, survival rates in prostate cancer, breast cancer and colorectal cancer have significantly increased. Between 1975 and 2011, the incidence and mortality of breast cancer decreased by 43% due to the uptake of mammographic screening and improvements in therapy.

While it represented 16.8% of the mortality from the deadliest cancers in 2012, pancreatic cancer only represented 3.4% of parliamentary questions on these cancers tabled in the European Parliament between 2009 and 2014. There is a discrepancy between the severity and mortality of the disease and its political prioritization.

How is the research on pancreatic cancer funded?

Although pancreatic cancer is the 4th biggest cause of death from cancer there is no mention of its burden or any policies related to it in the European Commission’s 2014 Report on “Cancer screening in the European Union.”

How can I have more information?

In November 2014, a European Multi-Stakeholder platform on Pancreatic cancer was created. It is composed of European experts, academics, patients, journalists, clinical practitioners and policy makers who are committed to raising awareness around pancreatic cancer with a view to improving standards of care, diagnosis and data collection for patients suffering from pancreatic cancer across Europe. For more information, please consult our website (www.pancreaticcancereurope.eu). The platform is financially supported by Celgene and Baxalta now part of Shire.

Additional resources should be created to fund research into pancreatic cancer. Improved survival rates depend on an improved knowledge of the disease, increasing the ability to diagnose it earlier.

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In the UK, £42 million are allocated to breast cancer research, while £3.2 million go to pancreatic cancer research.

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Pancreatic cancer is the only cancer with a mortality on the rise in both sexes. In 40% of patients diagnosed, the disease stage is advanced and cancer is already metastatic. Due to severe underdiagnosis, the overall median survival for a person diagnosed with metastatic pancreatic cancer is 4.6 months. Only 20% of all cases of pancreatic cancer are operable. A prime reason for inability to treat patients is late diagnosis. Today, a diagnosis of pancreatic cancer is generally associated with a death sentence and few patients are alive one year after diagnosis, while an earlier diagnosis could help reduce the mortality of the disease. If diagnosed in time, chances of survival increase. How severe is it? What are the key symptoms? How is pancreatic cancer diagnosed? Who is at risk? What are the standards of therapy? Has there been any progress on this disease in the past years?

Only 20% of all cases of pancreatic cancer are operable. A prime reason for inability to treat patients is late diagnosis. It has the lowest survival rate of all cancers. Patients affected with pancreatic cancer lose 98% of their healthy life expectancy at the point of diagnosis. Due to severe underdiagnosis, the overall median survival for a person diagnosed with metastatic pancreatic cancer is 4.6 months. Cigarette smoking accounts for nearly 1/3 of cases. Obesity increases the risk in approximately 12% of all pancreatic cancers. Age is the biggest risk factor for pancreatic cancer. Its incidence increases from the age of 45. Pancreatic cancer affects men and women equally. Pancreatic cancer is most often caused by long term drinking of alcohol. Chronic pancreatitis is most often caused by long term drinking of alcohol. People with diabetes have twice the risk of developing pancreatic cancer. People with a family history of pancreatic cancer have almost double the risk of having it. Pancreatic cancer affects men and women equally. Obesity increases the risk in approximately 12% of all pancreatic cancers. People with diabetes have twice the risk of developing pancreatic cancer. People with a family history of pancreatic cancer have almost double the risk of having it.

What are the key symptoms? How is pancreatic cancer diagnosed? Who is at risk? What are the standards of therapy? Has there been any progress on this disease in the past years?

Pancreatic cancer affects men and women equally. Obesity increases the risk in approximately 12% of all pancreatic cancers. People with diabetes have twice the risk of developing pancreatic cancer. People with a family history of pancreatic cancer have almost double the risk of having it.

GP visit
Referral to a specialist
Tests and investigations (blood tests, ultrasound scan and radiography scans, biopsy)

In 40% of patients diagnosed, the disease stage is advanced and cancer is already metastatic. Due to the lack of identified biomarkers, genes or imaging modalities, diagnosis is difficult to make. Chemotherapy and/or chemoradiation
Adjuvant chemotherapy
Palliative and supportive therapy
Surgery

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Chronic pancreatitis is most often caused by long term drinking of alcohol. Previous cancers and other conditions (Gastrointestinal inflammatory diseases, chronic pancreatitis and gum disease) are associated with an increased risk of pancreatic cancer. Pancreatic cancer is the only cancer with a mortality on the rise in both sexes. It has the lowest survival rate of all cancers. Patients affected with pancreatic cancer lose 98% of their healthy life expectancy at the point of diagnosis. Due to severe underdiagnosis, the overall median survival for a person diagnosed with metastatic pancreatic cancer is 4.6 months. Cigarette smoking accounts for nearly 1/3 of cases. Obesity increases the risk in approximately 12% of all pancreatic cancers. Age is the biggest risk factor for pancreatic cancer. Its incidence increases from the age of 45. Pancreatic cancer affects men and women equally. Obesity increases the risk in approximately 12% of all pancreatic cancers. People with diabetes have twice the risk of developing pancreatic cancer. People with a family history of pancreatic cancer have almost double the risk of having it.

What are the standards of therapy? Has there been any progress on this disease in the past years?

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How is pancreatic cancer diagnosed?

Surgery
Adjuvant chemotherapy
Palliative and supportive therapy

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Has there been any progress on this disease in the past years?

Due to late diagnosis and low treatment approval, survival rates in pancreatic cancer have not changed meaningfully during the last 40 years. Little progress on new therapies is notably due to low research funding.