

Many patients with pancreatic cancer miss out on treatment that may extend survival

May 27 2019



Axial CT image with i.v. contrast. Macrocystic adenocarcinoma of the pancreatic head. Credit: public domain

Despite potential for prolonging survival with treatment, one-third of patients with metastatic pancreatic cancer do not see a medical oncologist, and even more do not receive cancer-directed treatment,

found new research published in *CMAJ (Canadian Medical Association Journal)*.

Pancreatic cancer has a high death rate and is often diagnosed in advanced stages.

"The data suggest that there are many missed opportunities for important discussions between patients and cancer specialists," says Dr. Natalie Coburn, an author of the study and a surgical oncologist at Sunnybrook Health Sciences Centre and the University of Toronto, Toronto, Ontario. "We have better chemotherapy drugs than in the past, but those standards of care aren't reaching patients. Spreading the reach of the standards of care, starting with a consultation with a medical oncologist, would have a big impact."

The study looked at data on 10 881 patients with a new diagnosis of advanced [pancreatic cancer](#) in Ontario from 2005 to 2016, and examined how many people saw a medical oncologist and how many received [treatment](#) after consultation. About 65% of patients had a consultation with a medical oncologist, and 38% of all patients received cancer-directed treatment. More than half of patients who did not receive cancer-directed treatment did not have a [medical oncology](#) consult.

By contrast, about 80% to 90% of patients with colorectal cancer see a medical oncologist and undergo treatment for the disease.

The study aims to raise awareness of this issue for pancreas and other high-fatality cancers.

"We want to debunk the idea that it's 'not worth treating' pancreas cancer. We want more people to access a medical oncologist so that they can have informed discussions about [treatment options](#), symptom management and [palliative care](#)," says coauthor Dr. Julie Hallet, a

[surgical oncologist](#) at Sunnybrook Health Sciences Centre and the University of Toronto. "We could achieve better results by getting more people to an oncologist and [better access](#) to best practice treatments right now than with new and often expensive experimental drugs in the future."

The authors suggest that changes to health policies are necessary to ensure all patients have equal opportunities for assessment and treatment.

"We also want to raise awareness amongst policy-makers about gaps in the health care system—how can we ensure people are accessing the standard of care? How can we make it easier to reach a specialist in a timely manner?," she says.

"Low rates of specialized cancer consultation and cancer-directed therapy for incurable pancreatic adenocarcinoma: a population-based analysis" is published May 27, 2019.

More information: *Canadian Medical Association Journal* (2019). www.cmaj.ca/lookup/doi/10.1503/cmaj.190211

Provided by Canadian Medical Association Journal

Citation: Many patients with pancreatic cancer miss out on treatment that may extend survival (2019, May 27) retrieved 26 April 2024 from <https://medicalxpress.com/news/2019-05-patients-pancreatic-cancer-treatment-survival.html>

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