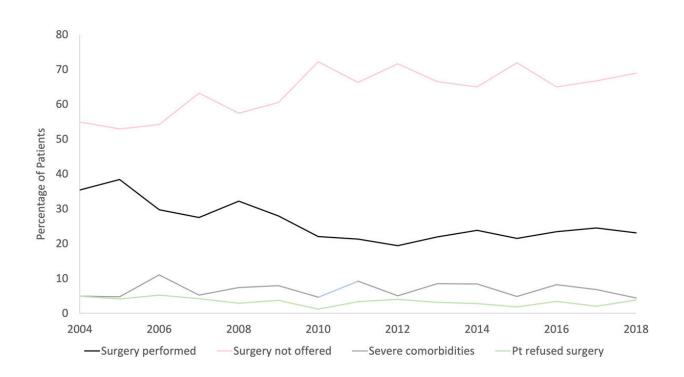


Most pancreatic cancer patients do not get lifesaving surgery, says Texas study

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Trend over time of the rate of curative-intent surgical resection and reason for lack of surgery in patients with early-stage pancreatic cancer (2004–2018). Credit: *Journal of Surgical Oncology* (2023). DOI: 10.1002/jso.27357

Only 22% of Texas patients with early-stage pancreatic cancer received standard-of-care surgery to remove their tumors, researchers at UT Southwestern Medical Center report in a new study. The findings, published in the *Journal of Surgical Oncology*, are a call to action to improve treatment in the Lone Star State for this deadly disease, the



authors say.

"We are failing nearly 80% of patients eligible for <u>surgical resection</u>, which can significantly extend survival or potentially even be curative in combination with chemotherapy," said study leader Patricio Polanco, M.D., Associate Professor of Surgery in the Division of Surgical Oncology at UT Southwestern and a member of the Harold C. Simmons Comprehensive Cancer Center. "Many patients think that this is always an <u>incurable disease</u> and don't pursue <u>aggressive treatment</u>."

Unlike many cancers, which have seen <u>mortality rates</u> decline significantly in recent decades, the prognosis for <u>pancreatic cancer</u> remains dismal, Dr. Polanco explained. Only 11% of patients with this disease survive at least five years, leading to more than 466,000 deaths worldwide each year.

For several decades, the standard of care and only curative treatment option for early-stage pancreatic cancer has been <u>surgery</u> to remove the malignant tumor, typically in combination with chemotherapy. This multimodal treatment has a median survival rate as high as 54 months, according to one recent study.

A previous report by Dr. Polanco and his team found that patients receiving treatment at a facility designated by the National Cancer Institute or one accredited by the American College of Surgeons Commission on Cancer such as UT Southwestern's Simmons Cancer Center were more likely to get the care recommended by national guidelines. These patients also had improved survival rates.

For the current study, Dr. Polanco and his colleagues gathered data from the Texas Cancer Registry (TCR), which collects information on cancer patients from every hospital in the state, to examine surgery rates in early-stage pancreatic <u>cancer patients</u>.



The registry showed 39,157 patients diagnosed with pancreatic cancer between 2004 and 2018, including 4,274 with early-stage disease who were eligible for surgery. However, over this study period, only 22% of these patients had their tumors surgically removed. Most alarmingly, the percentage of eligible patients who received this recommended surgery decreased over the study period, from 31% in 2004 to 22% in 2018, Dr. Polanco said.

Patients who received surgery were more likely to survive longer than those who didn't, the results showed. Post-surgical patients lived a median of 26 months after diagnosis compared with only seven months for those without surgery. In findings similar to previous work, one of the factors most strongly associated with getting appropriate care was treatment at a hospital accredited by the American College of Surgeons Commission on Cancer.

"Most rural and remote places in Texas have access to local medical oncologists who administer chemotherapy, and often radiation oncologists, but not surgical oncologists specialized in pancreatic cancer surgery," Dr. Polanco said.

He noted that better treatments for pancreatic cancer are needed, and several are currently in development.

"But there is a treatment described several decades ago that can actually cure pancreatic cancer and dramatically extend survival, and that is surgery," he said. "While we are spending millions of dollars to find the next new drug, we should spend at least the same amount and effort to ensure that every patient with pancreatic <u>cancer</u> is seen and assessed by an expert team of physicians to increase the awareness of this potentially lifesaving surgery."

More information: Gilbert Z. Murimwa et al, Factors associated with



failure to operate and its impact on survival in early-stage pancreatic cancer, *Journal of Surgical Oncology* (2023). DOI: 10.1002/jso.27357

Provided by UT Southwestern Medical Center

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