

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on screening for pancreatic cancer. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from February 5, 2019 through March 4, 2019. The Task Force welcomes your comments.

Screening for Pancreatic Cancer

The Task Force issued a **draft recommendation statement** on *Screening for Pancreatic Cancer*. The Task Force recommends against screening for pancreatic cancer. Screening for pancreatic cancer with tests that are currently available can lead to harms. New, effective

screening tests are needed that can find pancreatic cancer earlier.

This recommendation applies to adults who have no signs or symptoms of the disease and are not at high-risk for the disease.

What is pancreatic cancer?

Pancreatic cancer is an abnormal growth of cells in your pancreas — a long, flat organ that sits behind the stomach. The pancreas helps with digestion and manages blood sugar.

Facts about Pancreatic Cancer and Screening for Pancreatic Cancer

Pancreatic cancer is not common, only about 1 person in 10,000 get the disease each year. However, it is the third leading cause of cancer death in the United States. In most cases, pancreatic cancer is not found early enough to be treated effectively and the likely outcomes are poor. Even when the cancer is found early and treated with surgery, the average survival is only 36 months.

Pancreatic cancer begins in the pancreas, an organ in the abdomen (mid-section) behind the stomach, and usually spreads quickly to nearby organs.

People at high-risk for developing pancreatic cancer include people who have a strong family history of pancreatic cancer (two or more first-degree relatives, such as a parent, sibling, or child) or certain genetic conditions.

Signs and symptoms of pancreatic cancer can include:

- Abdominal bloating or fluid in the abdomen
- Pain (usually in the abdomen or back)
- Digestive problems
- Jaundice (yellowing of the skin)
- Changes in stools
- Unexplained weight loss
- Blood clots
- Newly developed (new-onset) diabetes

If a patient experiences any of these symptoms, prompt evaluation from a clinician is important as they could be signs of a number of conditions.

Currently, there is no effective test to screen for pancreatic cancer in people without signs or symptoms who are not at high-risk for the disease.

Potential Benefits and Harms of Screening for Pancreatic Cancer

The Task Force looked at evidence on the potential benefits and harms of screening for pancreatic cancer. The goal of screening is to find cancer early, when it is more likely to be able to be treated. However, the Task Force did not find any evidence that screening for pancreatic cancer in people without signs or symptoms led to reducing the chance of dying from the disease.

The Task Force also found that the tests used for pancreatic cancer screening can lead to harms such as pain, bad reactions to anesthesia, and potentially risky treatment. Test results may also indicate that cancer is present when in fact it is not, which can lead to anxiety and unnecessary treatment. Follow-up treatments such as surgery to remove all or a portion of the pancreas can have significant harms including bleeding, weeks of recovery time, and a small risk of death.

New, effective screening tests are needed that can find pancreatic cancer earlier, when it may be treatable.

The Draft Recommendations on Screening for Pancreatic Cancer: What Does It Mean?

Here is the Task Force's draft recommendation on screening for pancreatic cancer. It is based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **D Grade**, it recommends against screening because the benefits do not outweigh the harms.

Before you send comments to the Task Force, you may want to read the [draft recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

The USPSTF recommends against screening for pancreatic cancer in *asymptomatic* adults. **D Grade**

Notes

asymptomatic
Not having signs or symptoms of a condition.

What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the [Task Force Web site](#).

[Click Here to Learn More about Screening for Pancreatic Cancer](#)

[Pancreatic Cancer](#)
(National Cancer Institute)

[Pancreatic Cancer](#)
(Medline Plus)

USPSTF Recommendation Grades	
Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

[Click Here](#) to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received between February 5, 2019 and March 4, 2019.



All comments will be considered for use in writing final recommendations.