

What doctors want patients to know about pancreatic cancer

MAY 22, 2026



Benji Feldheim

Contributing News Writer

Pancreatic cancer is considered the 11th most common cancer in the U.S. But predictions based on current data show that it is trending to become the second most common cause of cancer-related deaths by the year 2030.

Symptoms usually don't appear in the early stages, but when they do happen, they can include jaundice, abdominal and back pain, loss of appetite and issues relating to diabetes among others. It is important for patients to know that no two cases of pancreatic cancer are the same. Pancreatic cancer can affect people differently, including—and especially—the outcome after a person is diagnosed.

The AMA's What Doctors Want Patients to Know™ series gives physicians a platform to share what they want patients to understand about today's healthcare headlines.

In this installment, Joanna Law, MD, a gastroenterologist with Confluence Health, took time to discuss what patients should know about pancreatic cancer.

[Confluence Health](#) is part of the [AMA Health System Member Program](#), which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

Pancreatic cancer is an aggressive tumor

“Pancreatic cancer is a disease in which abnormal cells grow uncontrollably in the pancreas,” said Dr. Law, noting that the pancreas is “a gland that is located just below the stomach and in front of the spine that aids digestion and regulation of blood sugar.”



Joanna Law, MD

“These cancer cells can affect the body’s ability to digest food and also regulate blood sugar,” she said.

There are two main types of pancreatic cancer

The two types of pancreatic cancer are “exocrine pancreatic cancers and neuroendocrine tumors,” Dr. Law said. “Exocrine pancreatic cancers account for about 90–95% of cases of which pancreatic ductal adenocarcinoma (PDAC) is the most common type.”

“Neuroendocrine tumors (NETs) are much less common and arise from the hormone producing cells of the pancreas,” she said. “These can produce excess hormone—functioning tumors—which result in symptoms while others do not produce hormones, or are non-functioning, and in turn are silent. NETs have a better prognosis than PDAC.”

Early symptoms of pancreatic cancer may be absent

“Pancreatic cancer is often hard to recognize early because symptoms may be mild, nonspecific or completely absent at first,” said Dr. Law. “Many people don’t notice clear signs until the cancer has grown or begun to affect nearby organs.”

When symptoms do occur, they can include:

Jaundice (yellowing of the skin and eyes). “This is one of the most common early signs, especially when the cancer is located in the head of the pancreas,” she said. “It happens when a tumor blocks the bile duct. People may also notice dark urine, pale or greasy stools, or itching.”

Abdominal or back pain. “A persistent, dull pain in the upper abdomen that can radiate to the back is common,” Dr. Law said. “The pain may worsen after eating or when lying flat and improve when leaning forward.”

Loss of appetite and unintentional weight loss. “Many patients experience decreased appetite and weight loss due to changes in digestion, metabolism, or early feelings of fullness,” she said.

Digestive changes. “Because the pancreas plays a key role in digestion, pancreatic cancer can cause bloating, diarrhea, nausea, or greasy, floating stools that are difficult to flush,” Dr. Law explained. “This happens when the pancreas isn’t producing enough digestive enzymes to properly absorb nutrients.”

New onset diabetes or worsening blood sugar control. “In some people, pancreatic cancer disrupts insulin production, leading to newly diagnosed diabetes or sudden difficulty controlling blood sugars,” she said, “particularly in older adults without a strong family history of diabetes.”

Fatigue and weakness. “Ongoing tiredness is common and may be related to the cancer itself, poor nutrition or anemia,” Dr. Law said.

Blood clots. “Some patients develop unexplained blood clots in the legs or lungs,” she said, “which can occasionally be an early warning sign.”

Mood changes or depression. “Depression or anxiety can sometimes appear before other physical symptoms,” Dr. Law said, “though the exact reason for this link isn’t fully understood.”

“Because these symptoms are common and can be caused by many less serious conditions, pancreatic cancer is often diagnosed at a later stage,” she said. “It’s important

not to ignore persistent or worsening symptoms, especially jaundice, unexplained weight loss or new onset diabetes. Seeing a doctor early can help ensure appropriate evaluation and testing.”

Pancreatic cancer is caused by a combination of factors

“In most cases, the exact cause of pancreatic cancer is not known,” said Dr. Law. “We know that if the cells of the pancreas acquire genetic changes, or mutations, that cause them to grow and divide uncontrollably, this leads to the development of a cancer.”

For “the majority of patients, there is no single cause but rather a combination of factors that can increase risk over time,” she said. “The mutations that lead to tumor growth can be inherited from birth—germline mutation—or acquired due to aging, environmental exposures or from chronic inflammation of the pancreas.”

Common complications include jaundice, digestion issues and pain

“As pancreatic cancer grows or spreads, it can affect multiple organs and body systems” said Dr. Law. “The complications a person experiences depend on the stage of the cancer, where it has spread, and how the pancreas and surrounding structures are affected.”

“These complications can significantly impact quality of life, which is why supportive and symptom-focused care is an important part of treatment,” she said.

Common complications of progressive pancreatic cancer include:

- Jaundice and liver problems.
- Digestive insufficiency and malnutrition.
- Abdominal or back pain that grows into nearby nerves or organs.
- Diabetes and blood sugar change, which are more difficult to control.
- Bowel obstruction, leading to nausea, vomiting, constipation or difficulty eating.
- Blood clots (thrombosis) in the legs or lungs.

- Fatigue and weakness.
- Metastasis, which is when the cancer spreads to other organs, such as the liver, lungs or lining of the abdomen.

Diagnosis of pancreatic cancer requires a range of testing

“Diagnosing pancreatic cancer can be challenging, especially in the early stages, because symptoms are often vague and routine screening tests do not exist for most people,” said Dr. Law. “Diagnosis usually involves a combination of medical history, imaging tests and sometimes biopsy.”

It starts with a medical history and physical exam where “a doctor will ask about symptoms such as jaundice, weight loss, abdominal pain, digestive changes or new-onset diabetes, as well as personal and family medical history,” she explained. “The physical exam may look for signs like yellowing of the skin or abdominal tenderness.”

Meanwhile, “routine blood tests can look for liver abnormalities, elevated bilirubin levels—which may suggest bile duct blockage—or changes related to inflammation or nutrition,” Dr. Law said. “A tumor marker called CA 19?9 may also be checked. While this blood test can be helpful in some cases, it is not reliable enough to diagnose pancreatic cancer on its own, as levels can be normal in early disease or elevated for other reasons.”

“Imaging also plays a key role in diagnosis and staging. CT scan—pancreas?protocol CT—is often the first and most important imaging test to look for a pancreatic mass and determine whether it has spread,” she said, adding that an “MRI may be used to better evaluate the pancreas or bile ducts. An endoscopic ultrasound allows doctors to view the pancreas from inside the stomach and duodenum and is especially useful for detecting smaller tumors.”

“A definitive diagnosis usually requires a biopsy, in which a small sample of tissue is examined under a microscope,” Dr. Law said. “This is most commonly done during an endoscopic ultrasound using a fine needle. In some cases, biopsy may be delayed if

surgery is clearly planned based on imaging findings.”

Additional imaging may be needed

“Once pancreatic cancer is diagnosed, additional imaging may be performed to determine whether the cancer has spread, or metastasized,” Dr. Law said. “Staging helps guide treatment decisions and may include CT scans of the chest or other targeted studies.”

“Because pancreatic cancer is complex, diagnosis and staging are often best done at centers with expertise in pancreatic disease,” she said. “Early referral to specialists can help ensure accurate diagnosis, appropriate treatment planning, and access to the full range of care options.”

Treatment is challenging but options are available

“Treatment for pancreatic cancer depends on several factors including the stage of the cancer, its location in the pancreas, whether it has spread, and a person’s overall health and goals of care,” said Dr. Law. “Treatment is often coordinated in a multidisciplinary fashion that may include medical and radiation oncologists, surgeons, gastroenterologists and supportive care.”

“Pancreatic cancer can sometimes be cured when found early enough that it can be removed with surgery,” she said. “Unfortunately, the majority of cases are diagnosed at a later stage when cure is less likely. However, treatments can help control the disease, relieve symptoms and prolong life.”

“Clinical trials offer access to new and promising therapies and are an important option for patients at different stages of the disease,” Dr. Law said. “Participation in a clinical trial may provide additional treatment choices and also advance future care.”

Outlook of pancreatic cancer varies

“The outlook of someone with pancreatic cancer varies widely and depends on key factors including the stage at diagnosis, the type of pancreatic cancer, whether the tumor can be surgically removed, and a person’s overall health,” said Dr. Law. “In general, pancreatic cancer is challenging because it is often detected at a later stage—when symptoms are present because the cancer has spread.”

“If the cancer is found early and can be completely removed with surgery, outcomes are much better,” she said. “However, for people whose cancer cannot be surgically removed, chemotherapy and radiation can help slow the growth of the cancer, relieve symptoms and extend survival.”

“We cannot predict what will happen for any one individual. Some patients respond very well to treatment while others may have a more aggressive disease,” Dr. Law said.

“Advances in chemotherapy, supportive care, and individualized treatment planning help in improving outcomes.”

Focus on lifestyle choices to lower risks

“While pancreatic cancer cannot always be prevented, there are steps people can take that may reduce risk and improve overall health,” said Dr. Law.

That includes:

- **Don’t smoke.** “Avoiding tobacco—and quitting smoking if you currently smoke—can significantly lower risk over time,” she said.
- **Maintain a healthy weight.** “Regular [physical activity](#) and a [balanced diet](#) can help reduce obesity-related risk factors,” Dr. Law explained.
- **Eat a nutritious diet.** “A diet rich in fruits, vegetables, whole grains and lean proteins supports overall health and may decrease cancer risk,” she said.
- **Limit alcohol intake.** “Reducing [excessive alcohol use](#) can lower the risk of chronic pancreatitis and other pancreatic damage,” she said.
- **Manage diabetes well.** “Keeping blood sugar under control and following medical advice can help protect pancreatic health,” Dr. Law said.

- **Know your family history.** “People with a strong [family history](#) of pancreatic cancer or known genetic mutations—such as BRCA1, BRCA2, PALB2 or Lynch syndrome—should discuss genetic counseling and possible screening with their doctor,” she explained.

“It’s important to remember that many people with pancreatic cancer have **no identifiable risk factors**, and having a risk factor does not mean someone will develop the disease,” said Dr. Law. “Focusing on healthy lifestyle choices and staying attentive to new or persistent symptoms can help support early evaluation and overall well-being.”

Routine pancreatic cancer screening isn’t always recommended

“Routine screening for pancreatic cancer is not recommended for the general population,” said Dr. Law. This is because “the disease is relatively uncommon, and no screening test has proven effective for average-risk individuals.”

“However, for people at high genetic risk, screening may be recommended at specialized centers and should be discussed with a doctor,” she said.

Call your doctor with any persistent symptoms

“Because pancreatic cancer can be difficult to detect early,” said Dr. Law, “it’s important to pay attention to **persistent or unexplained symptoms**, especially if they worsen over time or don’t have an obvious cause.”

She recommends contacting your doctor if you experience:

- **Yellowing of the skin or eyes (jaundice).** This is always abnormal and should be evaluated promptly.
- **Unexplained weight loss or loss of appetite.** Losing weight without trying, especially along with digestive symptoms, deserves medical attention.

- **Persistent abdominal or back pain.** Ongoing pain—particularly pain that radiates to the back, worsens after eating, or doesn't improve—should not be ignored.
- **Changes in digestion.** This includes greasy or floating stools, ongoing diarrhea, bloating, or difficulty digesting food.
- **New?onset diabetes or worsening blood sugar control.** Sudden development of [diabetes](#), especially in an older adult without typical risk factors, should prompt further evaluation.
- **Unusual fatigue or weakness.** Persistent tiredness that interferes with daily activities may be a sign of an underlying medical issue.
- **Unexplained blood clots.** Blood clots in the legs or lungs without a clear cause should always be evaluated, as they can sometimes be linked to cancer.

“People with a strong family history of pancreatic cancer or known inherited genetic mutations should also talk with their doctor—even if they feel well—about whether genetic counseling or specialized screening may be appropriate,” said Dr. Law. “Also, people with pancreatic cysts should talk with their doctor about surveillance or following their pancreas as cysts can increase your risk of developing pancreatic cancer.”

“Most symptoms of pancreatic cancer can also be caused by far more common and less serious conditions,” she said. “Still, **it's better to check than to wait**. Seeing a doctor early allows for appropriate testing, peace of mind when symptoms are explained, and earlier diagnosis if something more serious is present. Listening to your body, advocating for yourself, and seeking care when something doesn't feel right are important steps in protecting your health.”

Each case of pancreatic cancer is unique

“One of the most important things for patients and families to understand about pancreatic cancer is that no two journeys are the same,” said Dr. Law. “This disease affects people differently, and outcomes can vary widely based on the biology of the tumor, the stage at diagnosis, and how someone responds to treatment.

“Statistics can be helpful at a population level, but they do not define an individual person’s future,” she said.

Pancreatic cancer is not your fault

“It’s also essential to emphasize that pancreatic cancer is not anyone’s fault,” Dr. Law said.

“Many people diagnosed with pancreatic cancer have no identifiable risk factors and did everything ‘right.’

“Feelings of guilt or blame are common but misplaced, and patients should be supported with compassion and reassurance,” she added.

Research to improve care is ongoing

“Patients should also know that **advances are being made**,” **Dr. Law said**. “Research into earlier detection, better chemotherapy combinations, targeted therapies, genetic testing and clinical trials is ongoing and continues to expand treatment options.

“Many patients benefit from tumor genetic testing and should ask whether this is appropriate for them,” she added.

Open communication with your doctor is key

“Finally, open communication matters,” said Dr. Law. “Patients are encouraged to ask questions, speak up about symptoms, express their goals and values, and involve loved ones in decision-making. Being informed and supported helps patients feel more in control during an overwhelming time.”

“Pancreatic cancer is a serious diagnosis, but no one should face it alone,” she said. “With a dedicated care team, supportive resources and ongoing advances in treatment, patients and families can find clarity, comfort and hope throughout their care.”