Pancreatic Disorders & Therapy

Editorial

Pancreatic Cancer and its Complications

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The pancreas is a flat pear shaped gland organ which is located in the abdomen. It is surrounded by the stomach, small intestine, liver, spleen and gallbladder. The pancreas has two main functions: an exocrine function that helps in digestion and an endocrine function that regulates blood sugar.

Problems with the pancreas can lead to many health problems. These include

- Pancreatitis, or inflammation of the pancreas: This happens when digestive enzymes start digesting the pancreas itself
- Pancreatic cancer
- Cystic fibrosis, a genetic disorder in which thick, sticky mucus can also block tubes in your pancreas

PANCREATIC CANCER AND ITS COMPLICATIONS

Pancreatic cancer begins in the tissues of your pancreas. The majority of pancreatic cancers start in the exocrine cells.

Several types of growths can occur in the pancreas, including cancerous and noncancerous tumors. The most common type of cancer that forms in the pancreas begins in the cells that line the ducts that carry digestive enzymes out of the pancreas (pancreatic ductal adenocarcinoma).

Diagnosis of Pancreatic Cancer

- CT scan
- MRI
- Endoscopic ultrasound
- Laparoscopy
- Endoscopic retrograde cholangiopancreatography
- Percutaneous transhepatic cholangiography
- Biopsy

General Complications following Pancreatic Resection

The relatively high incidence of post-operative complications refers to the complexity of surgery with multiple anastomoses of different types and the rather poor nutritional status and high background co-morbidity of the patient group. Medical complications evoked as a consequence of surgery include cardiac problems (angina, infarction and arrhythmias), cardiovascular accidents (strokes), cardiorespiratory distress, renal dysfunction, pneumonia, thrombosis, pulmonary embolism, psychological disturbances and hepatic and metabolic dysfunction. The extent of surgery is correlated with the rise of medical complications. Post-operative complications contribute to the overall mortality despite the experience of specialist units. In the medium to long term there is a risk of pancreatic exocrine insufficiency and post-operative weight loss for a variety of reasons. Late surgical complications include anastomotic stricture, bleeding gastritis, adhesions and marginal ulceration. The post-operative medical complication rate is in the order of 4-19%.

Surgical Complications following Pancreatic Resection

Many of the post-operative complications respond to medical treatment, radiological intervention and endoscopic intervention without the need for surgical intervention. Complications that require operative re-intervention are associated with an increased mortality that ranges between 23 and 67%.

Prevention

You may reduce your risk of pancreatic cancer if you:

- Stop smoking
- Maintain a healthy weight
- A diet full of colorful fruits and vegetables and whole grains may help reduce your risk of cancer

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PANCREATIC CANCER TREATMENT

There are various treatments for pancreatic cancer, including surgery, chemotherapy, and radiation therapy.

Pancreatic Disorders & Therapy is an open access peer-reviewed journal, founded in the year 2011. The journal seeks to publish manuscripts on studies related to the impact, survival as well as perceptions among patients and the family members about

pancreatic disorders including cancer, in order to assist doctors and scientists in becoming more effective patient advocates.

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