Pancreatic cancer is one of the leading causes of cancer death in the United States. Surgical resection of tumors is considered the only curative form of treatment and can occur only when tumors are diagnosed early. Currently, researchers are attempting to develop screening tests to detect pancreatic cancer while at an early stage. Until the tests are perfected, primary care providers need to be aware of the earliest symptoms of pancreatic cancer and know which tests will assist in diagnosing pancreatic cancer at an early stage. The purpose of this article is to educate primary care providers about the early symptoms of pancreatic cancer and appropriate diagnostics to order.

Screening for Pancreatic Cancer

Anorexia, early satiety, and sudden onset asthenia are early symptoms that may be present six months before the more common symptoms of pancreatic cancer, which include abdominal pain and jaundice (Gullo, Tomassetti, Migliori, Casadei, & Marrano, 2001). Also, dysgeusia, diabetes mellitus, pancreatitis, pruritis, psychological disturbances, skin changes, and thrombophlebitis may be present for as long as 24 months prior to the onset of pain or jaundice (Von Hoff et al., 2005).

Currently, no prevention or screening strategies for pancreatic cancer exist. Presenting clinical complaints and laboratory results may be nonspecific or normal. Despite such challenges, early detection and diagnosis result in a better prognosis. Thus, the challenge for clinicians is to develop an algorithm that allows the disease to be diagnosed while in an early stage. Demographic information such as age may be used as an initial screening factor. Pancreatic cancer is rare in individuals younger than 40 but is present in greater numbers among those aged 70–80. Diabetes mellitus, a prior history of pancreatitis, any history of abdominal surgery, a family history of pancreatic cancer, and smoking increase the susceptibility for this disease. Although