

# [Pancreatic cancer](https://assignbuster.com/pancreatic-cancer-essay-samples/)

Approximately, 30, 000 people a year die of pancreatic cancer, the third most common malignancy and fifth leading cause of cancer deaths. And nearly 30, 000 new cases are diagnosed as well in the U. S. This is directly caused because of the complexity of diagnosis in its early stages. By the time, symptoms present themselves, most patients are incurable. The survival rate for 5 years is less than 5%. This cancer arises from both the exocrine and endocrine portions of the pancreas, nearly 95% however begin in the exocrine (ducal epithelium, acinar cells, connective tissue, and lymphatic tissue).

Typically, this type of cancer creates masses in the lymph nodes, then goes to the liver and less likely, to the lungs. Age is the most significant risk factor for pancreatic cancer. Pancreatic cancer is unusual in persons younger than 45 years. “ After age 50 years, the frequency of pancreatic cancer increases linearly. At age 70, mortality incidence due to pancreatic cancer is approximately 60 deaths per 100, 000 persons per year. ” Great study have went into the molecular genetics of pancreatic adenocarcinoma.

Studies report that nearly 80-95% of mutations occur within the KRAS2 gene and nearly 85-98% have mutations or deletions in the CDKN2 gene. “ As in other organs, chronic inflammation is a predisposing factor in the development of pancreatic cancer. Patients with chronic pancreatitis from alcohol, especially those with familial forms, have much higher incidence and an earlier age of onset of pancreatic carcinoma. ” The disease reports the same symptoms of various diseases including anorexia, malaise, nausea, fatigue and back pain. Significant weight loss is a common feature across the board with these cases.

Delayed diagnosis is a common problem, since it is isn’t a common thing for a doctor to examine in a checkup. Most often, the issue of pain brings the disease into light. The mid to lower-back region experiences extreme pain and most often, is a direct clue to an underlying tumor. After years of lab studies, a number of evolving imaging modalities were discovered and are available to help diagnose. Some of these procedures include computed tomography scanning, transcutaneous ultrasonography, endoscopic ultrasonography, magnetic resonance imaging, endoscopic retrograde cholangiopancreatography and positron emission tomography (PET) scanning.

The chosen method depends on the availability and expertise of the medical staff on hand. With computed tomography scanning, the ability and availability to image the whole abdomen and pelvis, has increasingly helped current and future patients. The only positive solution has been surgical resection, however that still hasn’t been as successful as doctors have hoped. That only prolongs the patient’s life, most likely, never fully cures them. Labs continue to work to find a cure that will be an effective procedure in which, people can actually be saved.