

# Symptoms of pancreatic cancer:



## What to watch out for

Approximately 4,000 Australians each year are diagnosed with pancreatic cancer. It is estimated that a person has a 1 in 69 (or 1.5%) risk of being diagnosed with pancreatic cancer by the age of 85.

Pancreatic cancer is the 8th most common cancer diagnosed but, due to the poor survival, it is the 3rd most common cause of cancer death. Most people are diagnosed when their cancer has spread beyond the pancreas into nearby blood vessels or to other organs, so it cannot be removed surgically.

Reducing delays in diagnosis of pancreatic cancer might increase the chance of having surgery, and therefore improve survival, although this is not yet proven. Diagnosing people earlier will give people more time to adjust to their illness and to take part in clinical trials of new treatments.

The symptoms of pancreatic cancer are generally non-specific. That is, they are also caused by other, usually much less severe, health conditions. The guide below aims to help you understand what combinations of symptoms and risk factors are potentially concerning. If you are experiencing any of these symptoms you should see your general practitioner, and make sure you describe all your symptoms, even if they are very mild.

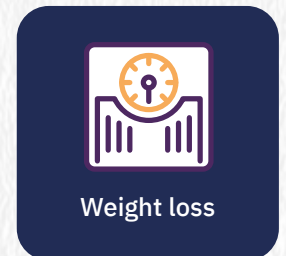
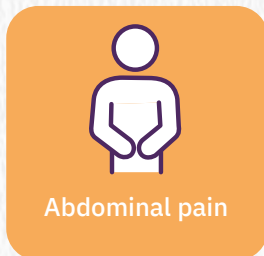
Don't forget that pancreatic cancer is rare. If you have these symptoms you are unlikely to have pancreatic cancer. Your doctor is the best person to consider whether you should have a scan of your pancreas.

# SELF-ASSESSMENT FOR POTENTIAL SIGNS OF PANCREATIC CANCER

The following information is based on the Pancreatic Cancer Decision Support tool. This self-assessment is intended to guide people on when to seek advice from a doctor.

## I SEE/ FEEL

SIGN,  
SYMPTOM  
OR RISK  
FACTOR:



## MORE DETAIL

DESCRIPTION  
OF SIGN,  
SYMPTOM  
OR RISK  
FACTOR:

Pain in the upper part of your abdomen, in the area just below your ribs or sternum (breastbone). The pain is persistent; it may go away for a while, but it returns. The pain may also:

- radiate to your back,
- cause you to wake from sleep, OR
- get worse after eating a fatty or heavy meal.

Symptoms of jaundice are:

- a yellow tinge to the skin and whites of eyes
- urine that is dark in colour
- pale-coloured stools
- itchy skin.


Fatty stools, also called steatorrhea, is characterised by stools that:

- are pale and loose
- smell especially bad
- are difficult to flush down the toilet.

Unexplained loss of weight of about 5% of your original weight within 6 months.


## NEXT STEP

WHAT YOU  
SHOULD DO  
IF YOU HAVE  
A SIGN OR  
SYMPTOM:


 **Seek advice within 2 weeks**

If you have been advised that you have a medical condition that is known to cause this type of abdominal pain, you should discuss this symptom with your doctor at your next appointment.

If you have not been diagnosed with a condition that is known to cause this type of abdominal pain, seek advice from a doctor within 2 weeks.

 **Seek urgent medical advice**

If you have not been diagnosed with a condition known to cause jaundice, such as liver disease, seek advice from a doctor URGENTLY.

 **Seek advice within 2 weeks**

If you have been diagnosed with a condition that is known to cause problems absorbing fat, such as coeliac disease, please discuss this symptom with your GP at your next appointment.

If you have not been diagnosed with a condition that is known to cause fat malabsorption, seek advice from a general practitioner within 2 weeks.

 **Seek advice within 2 weeks**

If you have experienced rapid loss of weight for no reason, seek advice from a doctor within 2 weeks. Advise your doctor if you have also experienced any of the following symptoms, as these may assist with investigations:

- Upper back pain that is not due to injury or known musculoskeletal concern
- Abdominal pain (any kind)
- Nausea
- Changed bowel habits.

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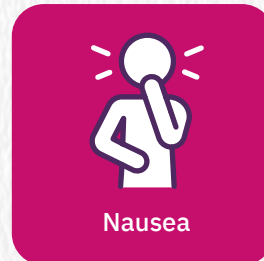
SIGN,  
SYMPTOM  
OR RISK  
FACTOR:



New-onset  
diabetes mellitus



Existing diabetes  
mellitus that has  
become difficult  
to manage



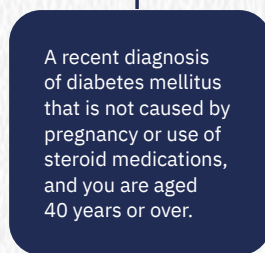
Nausea



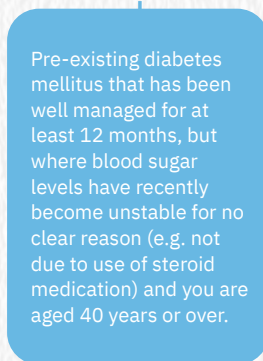
Loss of appetite,  
or change in food  
preferences

## MORE DETAIL

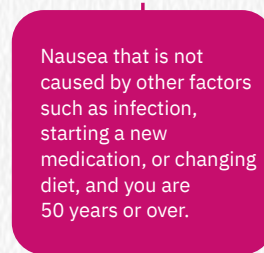
DESCRIPTION  
OF SIGN,  
SYMPTOM  
OR RISK  
FACTOR:



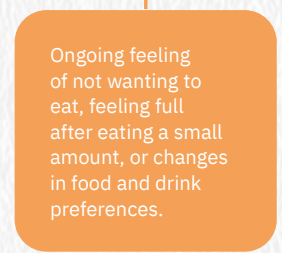
A recent diagnosis of diabetes mellitus that is not caused by pregnancy or use of steroid medications, and you are aged 40 years or over.



Pre-existing diabetes mellitus that has been well managed for at least 12 months, but where blood sugar levels have recently become unstable for no clear reason (e.g. not due to use of steroid medication) and you are aged 40 years or over.



Nausea that is not caused by other factors such as infection, starting a new medication, or changing diet, and you are 50 years or over.



Ongoing feeling of not wanting to eat, feeling full after eating a small amount, or changes in food and drink preferences.

## NEXT STEP

WHAT YOU  
SHOULD DO  
IF YOU HAVE  
A SIGN OR  
SYMPTOM:

**Discuss with your doctor**

Discuss the possibility of pancreatic problems with your doctor. Advise your doctor if you also have:

- Pain in your abdomen or back
- A family history of pancreatic disease
- A personal history of pancreatitis
- Consumed cigarettes regularly within the past 10 years
- Consumed more than 3 alcoholic drinks per day within the past 10 years.

**Seek advice within 6 weeks**

If your diabetes mellitus is not well controlled within 6 weeks, discuss the possibility of pancreatic problems with your doctor. Advise your doctor if you also have:

- Pain in your abdomen or back
- A family history of pancreatic disease
- A personal history of pancreatitis
- Consumed cigarettes regularly within the past 10 years
- Consumed more than 3 alcoholic drinks per day within the past 10 years.

**Seek advice within 1 month**

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