



Pancreatic cancer: Causes, Symptoms and Diagnosis

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Pancreatic cancer occurs when cells in the pancreas, begin to multiply uncontrollably and build mass. Adenocarcinoma originates within the part of the pancreas that makes digestive enzymes. Signs and symptoms of the most common type of pancreatic cancer may include yellow skin, abdominal or back pain, unexplained weight loss, pale stools, dark urine, and loss of appetite. Usually, no symptoms are seen in the early stages of the disease, and symptoms that are clear enough to elevate pancreatic cancer usually do not develop until the disease has reached an advanced stage. Risk factors for pancreatic cancer include smoking, obesity, diabetes, and some rare genetic predisposition. Pancreatoblastoma is a rare form, most common in childhood, and has a relatively high prognosis. Other exocrine cancers include adenosquamous carcinomas, signet ring cell carcinomas, hepatoid carcinomas, colloid carcinomas, non-differentiated carcinomas, and non-differentiated carcinomas with large cells such as osteoclast. Solid pseudopapillary tumor is a rare low-grade neoplasm that mainly affects young women, and often has a very positive predictor. Since pancreatic cancer usually does not cause symptoms at its onset, the disease is usually not diagnosed until it has spread beyond the pancreas itself. The area of pain may indicate the part of the pancreas where the tumor is located. The pain may get worse at night and may develop over time and become worse. Jaundice, a yellowish-white color of the eyes or skin, is painful or absent, and is probably combined with dark urine, resulting in pancreatic cancer blocking the normal gallbladder as it runs through the pancreas. Unexplained weight loss, either as a result of loss of appetite, or loss of exocrine function leading to poor digestion. The tumor can suppress neighboring organs, disrupt digestive processes, and cause diarrhea, which can cause nausea and a feeling of fullness. Excessive alcohol consumption is a major cause of chronic pancre-

atitis, which causes pancreatic cancer, but many studies have failed to establish strong alcohol consumption as a direct risk factor for pancreatic cancer. Exocrine cancer is thought to come from several types of malignant lesions within the pancreas, but these lesions do not always develop into cancer, and growing numbers have been identified as a byproduct of increased CT scan use for other reasons not all cured. Symptoms of pancreatic adenocarcinoma do not usually appear in the early stages of the disease, and do not differentiate individually from the disease. Diagnosis symptoms vary depending on where the cancer is, the anatomists who classify it as a thick head, neck and body movement, ending with a tail. Palliative Care is medical care that focuses on treating the symptoms of a serious illness, such as cancer, and improving quality of life. Because pancreatic adenocarcinoma is usually diagnosed after it has progressed to the advanced stage, palliative care as a symptomatic treatment is often the only possible treatment. Preliminary research on pancreatic cancer includes genetic studies and early detection, treatment for various stages of cancer, surgical techniques, and targeted therapies, such as preventing growth factors, antibodies, and vaccines. Both surgery and major malignant tumors often lead to disruption of the digestive system due to a lack of exocrine products of the pancreas. This can be treated by taking pancreatin which contains pancreatic enzymes produced, and is better taken with food.

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Conflict of Interest

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