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Summary

ASSESSMENT OF GLUCOSE AND HBA1C MONITORING IN A PANCREATIC CANCER SURVEILLANCE PROGRAM FOR HIGH-RISK INDIVIDUALS

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Glucose and HbA1c monitoring did not contribute to pancreatic ductal adenocarcinoma detection in a surveillance cohort of 404 high-risk individuals with hereditary predisposition.

KEY POINTS

- Among 404 high-risk individuals followed in the Familial Pancreatic Cancer surveillance study, 9 developed PDAC and 4 non-PDAC individuals were diagnosed with new-onset diabetes.
- Glucose levels ranged 3.4-10.7 mmol/L (mean 5.4 ± 0.7) and HbA1c levels ranged 25-68 mmol/mol (mean 37.3 ± 3.6) across the cohort.
- The percentage with at least one elevated glucose value was comparable between PDAC and non-PDAC groups (33% versus 27%, p=0.707), as was elevated HbA1c (22% versus 14%, p=0.623).
- The authors conclude that larger and longer term studies are needed to determine the role of glucose and HbA1c monitoring in PDAC surveillance of high-risk individuals.

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