gutflix
GI learning, personalised

Summary

Pancreatic cancer: Europe's new rule book for a tough opponent

Marc G. Besselink

UEG Week Barcelona 2026 | Presentation

Digestive Oncology | Primary Care | Pancreas

October 20, 2026

The speaker presented the first multidisciplinary European evidence-based guideline for pancreatic cancer, focusing on knowledge gaps, and a new €10 million EU-funded project to improve care for locally advanced disease across 12 countries.

KEY POINTS

- The guideline, now submitted to Lancet Oncology, involved all major European societies and patient organizations, addressed 39 knowledge gaps across 13 clinical domains, and required 75% expert agreement for each recommendation.
- The speaker stated that in expert centres 1 in 4 patients with locally advanced pancreatic cancer receive resection, compared to only 1 in 20 in most hospitals, representing a major care disparity the project aims to address.
- The guideline recommends pancreatic surveillance only for high-risk individuals with hereditary syndromes or germline variants, not for those with only one or two family members with pancreatic cancer.
- For biliary drainage, ERCP or EUS-guided approaches are recommended as first-line, with percutaneous drainage only as second-line; in expert centres, endoscopic drainage bypassing the pancreas can be considered though evidence for improved outcomes is lacking.
- The top three research priorities identified were neoadjuvant therapy for primary resectable disease, routine screening for high-risk individuals, and optimal neoadjuvant or induction chemotherapy regimens.
- The EU-funded project includes randomized trials comparing surgery versus ablative radiotherapy for locally advanced disease and evaluating repeated percutaneous injection of radioactive phosphorus, alongside multidisciplinary team training in five countries.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/45eb00dc-d150-11f1-be04-daaa6dbee0a2

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.