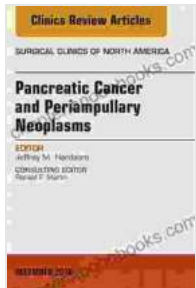


Pancreatic Cancer and Periampullary Neoplasms: An Essential Guide for Surgeons



Pancreatic Cancer and Periampullary Neoplasms, An Issue of Surgical Clinics of North America (The Clinics: Surgery Book 96) by Leon Barnes

★★★★☆ 4.5 out of 5

Language : English
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Pancreatic cancer and periampullary neoplasms are complex and challenging diseases that require a multidisciplinary approach to diagnosis and management. This issue of Surgical Clinics provides a comprehensive overview of the latest developments in the diagnosis and management of these diseases, with a focus on surgical oncology.

Diagnosis

The diagnosis of pancreatic cancer and periampullary neoplasms can be challenging, as these diseases often present with nonspecific symptoms. Imaging studies, such as computed tomography (CT) and magnetic resonance imaging (MRI), are essential for diagnosing these diseases and determining their stage.

Surgical Management

Surgery is the primary treatment for pancreatic cancer and periampullary neoplasms. The type of surgery performed depends on the location and stage of the disease. The Whipple procedure, also known as pancreaticoduodenectomy, is the most common surgery for pancreatic cancer. This surgery involves removing the head of the pancreas, the duodenum, and the common bile duct.

Laparoscopic and robotic pancreatic surgery are minimally invasive techniques that can be used to perform the Whipple procedure and other pancreatic surgeries. These techniques offer several advantages over open surgery, including reduced pain, blood loss, and recovery time.

Non-Surgical Management

Non-surgical management options for pancreatic cancer and periampullary neoplasms include chemotherapy, radiation therapy, and targeted therapy. These therapies can be used to shrink tumors, relieve symptoms, and improve survival.

Prognosis

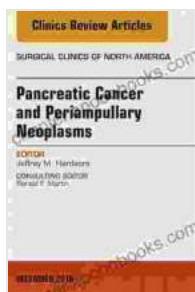
The prognosis for pancreatic cancer and periampullary neoplasms depends on the stage of the disease at diagnosis. The five-year survival rate for pancreatic cancer is 9%, while the five-year survival rate for periampullary neoplasms is 20%.

Pancreatic cancer and periampullary neoplasms are complex and challenging diseases, but significant progress has been made in their diagnosis and management. This issue of Surgical Clinics provides a comprehensive overview of the latest developments in the field, with a

focus on surgical oncology. This information is essential for surgeons who care for patients with these diseases.

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