Clinical Summary: Screening for Pancreatic Cancer

Population	Asymptomatic adults (not known to be at high risk of pancreatic cancer)
Recommendation	Do not screen.
	Grade: D

Risk Assessment	Persons with certain inherited genetic syndromes or a history of familial pancreatic cancer are at high risk of pancreatic cancer. This recommendation does not apply to these high-risk populations. Other factors such as new-onset diabetes, preexisting diabetes, older age, cigarette smoking, obesity, or a history of chronic pancreatitis increase risk to a lesser degree. Asymptomatic persons who have these risk factors are included in this recommendation.
Screening Tests	The USPSTF does not recommend screening for pancreatic cancer in the general population using any method. Imaging-based methods, such as the computed tomography scan, magnetic resonance imaging, and endoscopic ultrasonography, have been studied as screening tests in trials of screening persons at high risk of pancreatic cancer due to inherited genetic syndromes or familial pancreatic cancer. There are currently no accurate, validated biomarkers for early detection of pancreatic cancer
Treatment or Interventions	Surgery (pancreaticoduodenectomy [known as the Whipple procedure] or total or distal pancreatectomy) is the generally recommended treatment for pancreatic cancer that is deemed to be resectable at the time of diagnosis. Neoadjuvant or adjuvant chemotherapy may be recommended, depending on the stage of cancer and other factors.

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to https://www.uspreventiveservicestaskforce.org.