

Strategies In Surgery

The OU Southwest Program for Pancreatic Cancer

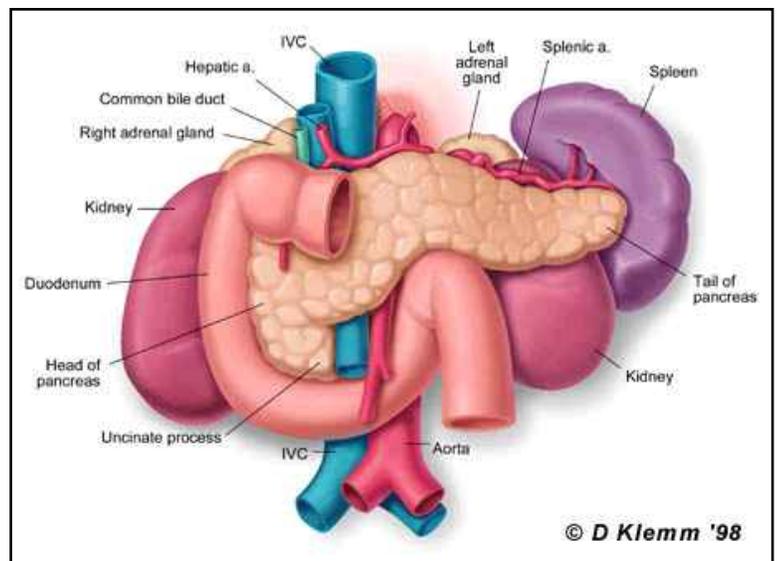
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Pancreatic cancer is a dismal disease. Two years ago, 32,300 people in the U.S. were diagnosed with pancreatic cancer and 30,000 died. Fewer than 4 percent of patients diagnosed survive long-term. It is the fourth most common cause of cancer death in the United States. In 2001, a Progress Review Group (PRG) submitted a detailed analysis of the state of the disease to the National Cancer Institute (NCI). It was the feeling of this PRG that there had been little real progress made in pancreatic cancer understanding or treatment and that an increased awareness and funding on the part of the NCI was necessary if any real improvements were to be made.

At OU Physicians, we are building a substantial clinical program for patients with pancreatic

cancer. Our experience has helped us begin to understand the disease better.

The mainstay of potentially curative therapy for patients with pancreatic cancer is the Whipple operation. This is a complicated procedure in which the mortality and morbidity rate is closely linked to physicians' experience and volume of patients operated upon by the surgical team. We have three surgeons, Larry Pennington, M.D., Jeffrey Bender, M.D. and Russell Postier, M.D., all of whom do a sufficient volume of pancreatic resections to be able to achieve success rates as



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good as that of any program in the country. In addition, our gastroenterologists, medical oncologists and radiation oncologists apply state-of-the-art techniques in neoadjuvant and adjuvant therapies that allow us to be on the forefront of clinical care. Patients undergoing the Whipple resection with post-operative adjuvant interferon-based chemotherapy and radiotherapy have two-year and three-year survival rates of 84 percent and 65 percent respectively.

Unfortunately, long-term survival is substantially less and, as a result, it is absolutely imperative that basic research techniques be applied to this problem with the goal of rapid translation of research findings into clinical care. In addition, most patients, at presentation, have unresectable disease and are not candidates for curative therapy. Much remains to be learned.

In response to this situation, a multi-disciplinary program in pancreatic cancer, the OU Southwest Program for Pancreatic Cancer, has been organized. This program encompasses clinical care, research, medical student and resident education, patient education and patient advocacy. The goal of this program is to provide patients in Oklahoma and the Southwest United States with state-of-the-art care in pancreatic cancer and to advance research in this disease. Details about the program can be obtained by visiting our web site at www.ouhsc.edu/surgery/pancan/

The research component of the OU Southwest Program for Pancreatic Cancer is utilizing cutting-edge technology in high-throughput gene expression analysis, proteomics and metabolomics to better understand the molecular mechanisms governing the development and spread

of pancreatic cancer. Our goal is to identify markers of early tumor development and targets for therapy so that we have more weapons in the fight against this devastating disease. We will apply these techniques to fresh and archival human tissue, to cell culture lines of human pancreatic cancers and to tissue obtained in animal models. To further the research component of our program, we're applying for a multi-million dollar, multi-year Program Project Grant from the National Cancer Institute this fall.

It is clear that patients with pancreatic cancer are best treated in centers with a major dedication to fighting the disease. OU Physicians has made this commitment. If you have a patient with this disease that you would like to refer for state-of-the-art care, call 405-271-5781 or toll free outside of the metro area 800-271-6989.

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