

## Surgical Treatment of Pancreatic Cancer

**COVID-19 update:** We know that our patients and their families have questions related to care during this time. Please see [COVID-19 Information and FAQs for Patients With Cancer](#) for the latest updates.

If at all possible, your doctor will recommend surgery for your cancer. However, only about 20 percent of pancreatic cancer patients are surgical candidates. Most cases of fast-spreading pancreatic cancer are discovered after the cancer has already metastasized beyond the primary location within the pancreas.

Patient who are eligible for surgery have access to the nation's top surgical oncologists with expertise in the highly complex operations available for pancreatic cancer. Our surgeons perform more pancreatic cancer surgeries than any other medical center in the region. [Meet our surgical team.](#)

### Whipple Procedure

The surgical technique most used for pancreatic cancer patients is the Whipple procedure, or pancreaticoduodenectomy. A complex operation for the most common, exocrine tumors of the pancreas, the procedure involves removal of the pancreas head and then the duodenum, the first portion of the small bowel. Sometimes the body of the pancreas and nearby lymph nodes may be removed, as well.

It takes several hours because there are a number of blood vessels around the tumor. In addition, the reconstruction is extensive as surgeons make new connections between the small bowel, the pancreas and bile duct (so that bile can flow for proper food digestion), and a new connection between the small bowel and the stomach.

Following surgery, patients stay in the hospital for one to two weeks. Over the past 10 years, the operative procedure has improved to make this complex surgery safer. Patients have a

shorter hospital stay and a faster recovery time.

## Other Surgical Procedures

If the tumor is in the tail of the pancreas, surgeons perform a left-sided pancreatectomy, which is also called a distal pancreatectomy, and a splenectomy to remove the spleen.

Additional surgical procedures for some types of pancreatic cancer (ask your doctor if you are a candidate) include:

- **Laparoscopic pancreatectomy** and a central, or middle pancreatectomy for certain tumor types. Laparoscopic surgery is minimally invasive and generally reserved for tumors of the body and tail of the pancreas. These procedures offer the benefit of smaller incisions with less associated pain and a quicker return to normal activities. The middle or central pancreatectomy is a procedure in which tumors of the pancreatic neck or body are removed sparing the head and tail. This procedure is associated with preservation of more normal pancreas and thus can decrease the risk of post surgical diabetes and need for pancreatic enzyme replacement.
- **Enucleation** is a type of operation for removal of benign cyst or small neuroendocrine tumors that involve removing only the lesion itself while sparing all surrounding pancreas. These can be done via a traditional surgical approach or through the laparoscope.

A total pancreatectomy — removing the entire pancreas and spleen — was once used for tumors in the body or head of the pancreas. It is seldom used today, however, as there doesn't seem to be any advantage to removing the whole pancreas, and patients without a pancreas develop insulin-dependent diabetes.

Pancreatic surgeons at UC San Diego Health are among a handful of surgeons nationwide with experience in these highly specialized types of pancreatic surgery.

## Appointments & Referrals

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- 858-822-2124
- [For Referring Physicians](#)

## Location

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## La Jolla

- [Moores Cancer Center](#)

## Meet Our Specialists

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- [Pancreatic Cancer Team](#)

## Clinical Trials

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- [Find a clinical trial.](#)

## Patient Education

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Learn more about pancreatic cancer in our Health Library:

- [What Is Pancreatic Cancer?](#)
- [Pancreatic Cancer Overview](#)



