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Autor(en) des Beitrags:
Bartsch, D K; Slater, E P; Carrato, A; Ibrahim, I S; Guillen-Ponce, C; Vasen, H F A; Matthäi, E; Earl, J; Jendryschek, F S; Figiel, J; Steinkamp, M; Ramaswamy, A; Vázquez-Sequeiros, E; Muñoz-Beltran, M; Montans, J; Mocci, E; Bonsing, B A; Wasser, M; Klöppel, G; Langer, P; Fendrich, V; Gress, T M

Titel des Beitrags: Refinement of screening for familial pancreatic cancer.

Abstract: Surveillance programmes are recommended for individuals at risk (IAR) of familial pancreatic cancer (FPC) to detect early pancreatic cancer (pancreatic ductal adenocarcinoma, PDAC). However, the age to begin screening and the optimal screening protocol remain to be determined. IAR from non-CDKN2A FPC families underwent annual screening by MRI with endoscopic ultrasonography (EUS) in board-approved prospective screening programmes at three tertiary referral centres. The diagnostic yield according to age and different screening protocols was analysed. 253 IAR with a median age of 48 (25-81) years underwent screening with a median of 3 (1-11) screening visits during a median follow-up of 28 (1-152) months. 134 (53%) IAR revealed pancreatic lesions on imaging, mostly cystic (94%), on baseline or follow-up screening. Lesions were significantly more often identified in IAR above the age of 45 years (p=24 months intervals (n=30). It appears safe to start screening for PDAC in IAR of non-CDKN2a FPC families at the age of 50 years. MRI-based screening supplemented by EUS at baseline and every 3rd year or when changes in MRI occur appears to be efficient.