Cancer of the Exocrine Pancreas.

From Oncogenes to Unresectable Tumors

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Drug Dosage
The authors and the publisher have exerted every effort to ensure that drug selection and dosage set forth in this text are in accord with current recommendations and practice at the time of publication. However, in view of ongoing research, changes in government regulations, and the constant flow of information relating to drug therapy and drug reactions, the reader is urged to check the package insert for each drug for any change in indications and dosage and for added warnings and precautions. This is particularly important when the recommended agent is a new and/or infrequently employed drug.

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Preface
The indefatigable Prof. Delmont has produced another superb book, this time bringing together an impressive array of international experts to report on cancer of the pancreas. For the gastroenterologist, to say nothing of his patients, this tumor remains the most discouraging and painful malignancy in adults. Ductal cell cancer of the pancreas ranks as the fourth leading cause of cancer deaths in males and females in the United States. Pancreatic cancer death rates for both sexes rose slowly between 1930 and 1970. From 1981 the trend appears to be leveling off. Most tumors are inoperable by the time of diagnosis. One of the crudest ironies resides in the fact that superbly sensitive diagnostic studies, notably the various imaging techniques, have allowed earlier diagnosis but to no therapeutic avail. Arguments have raged for many years about the value of surgery for the few patients whose tumors are resectable when first seen. In point of fact very few surgeons of long experience can recall more than 1 or 2 cases where cure seems to have been accomplished by the Whipple procedure or total pancreatectomy. The 1-year survival is 1% for lesions of the body and tail. There are many who feel that from the moment of the first pain there is no hope of cure. Chemotherapy is woefully inadequate and can only be considered experimental. Radiation therapy utilizing newer approaches, such as intraoperative radiation and high linear energy transfer external beam radiation, offers faint hope and trials are underway in several centers. Early diagnosis could conceivably improve the outlook, but screening techniques to detect the disease in its presymptomatic phase are not yet good enough, as the comprehensive and lucid review in this book tells us. The much publicized war on cancer is not being won very fast, if at all, as critics have pointed out.

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Is there any basis for optimism in all of this? Perhaps not, but, on the other hand, to defeat the enemy one must understand him thoroughly. Periodic assessments and state-of-the-art summaries are essential way stations as the biomedical sciences move along toward eventual understanding and cure of cancer. Roughly a third of Prof. Delmont's book concerns the basic sciences from which the critical information will come. In the meantime, physicians and surgeons concerned with ongoing care of their patients must do the best they can. This book will help them enormously.

Douglas B. McGill
President,
American Gastroenterological Association
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J. P. Delmont