

Top Ten Research Priorities for Pancreatic Cancer Therapy

[https://doi.org/10.1016/S1470-2045\(20\)30179-0](https://doi.org/10.1016/S1470-2045(20)30179-0)

For which topic were research priorities identified?

pancreatic cancer therapy

In which location was the research priority setting conducted?

Europe - Germany

Why was it conducted at all?

Pancreatic cancer is predicted to rise by almost 80% by 2040. Annually, 610 000-915 000 quality-adjusted life-years are lost to pancreatic cancer in Europe, substantially impairing the quality of life (QOL) of patients and caregivers. Treatment options for pancreatic cancer are limited, and only 10-20% of all patients qualify for curative resection with adjuvant chemotherapy. The rate of recurrence after surgery is high, and palliative treatment is associated with toxicities and reduced QOL.

What was the objective?

to select and prioritize different aspects of research preferences relevant to non-research stakeholders

What was the outcome?

a ranking list of 10 research questions

How long did the research prioritization take?

August 2017 - December 2019

Which methods were used to identify research priorities?

JLA method

How were the priorities for research identified exactly?

Step 1: setting up PSP: steering group established, stakeholders and partner organizations identified. Step 2: collecting uncertainties: via survey, 519 research questions submitted, further 47 uncertainties added after screening guidelines. Step 3: data processing: combining duplicates, out-of-scope removed, indicative questions formulated, check against literature, resulting in 63 indicative questions. Step 4: interim ranking: with 63 indicative questions. Step 5: final prioritization: workshop

Which stakeholders took part?

Patients living with pancreatic cancer, their carers, members of patient support groups, and healthcare professionals. Survey: 140 participants (52% patients and carers). Interim ranking: 211 participants (51% patients and carers). Workshop: 25 participants: 7 patient representatives, 13 relatives or carers, and 12 healthcare professionals.

How were stakeholders recruited?

No information provided.

Were stakeholders actively involved or did they just participate?

Stakeholders not only participated but were also actively involved in the research prioritization process: They were part of a steering group. The steering group consisted of equal numbers of professional stakeholders and patients with their caregivers. The members decided jointly on all aspects of the PSP.