

## 34. Neuroendocrine Tumors of the Pancreas

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### Authors

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### Emerging Prognostic Factors for Clinical Care

#### Pancreastatin

Pancreastatin is a posttranslational product of CgA whose blood level inversely correlates with prognosis.<sup>1,2</sup> Levels also correlate with the number of liver metastases and may be useful in monitoring for recurrence after surgery or for response to therapy.<sup>1,2</sup> Perioperative pancreastatin level is an independent predictor of outcome in resected small bowel NETs and pancreatic NETs.<sup>3</sup> Additional studies are needed to validate these findings. Compared with CgA, pancreastatin may have better specificity in diagnosing NETs because it is not affected by PPI use or atrophic gastritis.<sup>4-6</sup> There are at least three large CLIA-certified and CAP-accredited reference laboratories that routinely measure pancreastatin. AJCC Level of Evidence: III

#### Risk Assessment Models

The AJCC recently established guidelines that will be used to evaluate published statistical prediction models for the purpose of granting endorsement for clinical use.<sup>7</sup> Although this is a monumental step toward the goal of precision medicine, this work was published only very recently. Therefore, the existing models that have been published or may be in clinical use have not yet been evaluated for this cancer site by the Precision Medicine Core of the AJCC. In the future, the statistical prediction models for this cancer site will be evaluated, and those that meet all AJCC criteria will be endorsed.

#### Recommendations for Clinical Trial Stratification

Histologic grade (G1, G2 vs. G3)

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