Jreissati Pancreatic Centre

Epworth

# Palliative and supportive care

## for pancreatic cancer

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*Acknowledgements*

The Jreissati Pancreatic Centre at Epworth thanks our consumer advisors (Anna Cook, Anna Kalla, Kelly Pollock, John Clements, Julie Loft, Michelle Lewien) and healthcare professionals whose knowledge and insights were vital to the creation of this guidebook. This resource is supported by the Victorian Government through the Victorian Cancer Agency, and Epworth Medical Foundation.

The Jreissati Pancreatic Centre at Epworth acknowledges the Traditional Custodians of Country across Australia. We recognise their continuing connection to land, waters, communities and culture.

We pay our respects to Aboriginal and Torres Strait Islander Peoples and to Elders past, present and emerging.

*Note to readers*

This booklet provides general information about pancreatic cancer. It is not intended to replace advice from your treating team or other qualified professionals. You should always speak with your doctor about decisions that may affect your health. If you require legal, financial or psychological support, we encourage you to seek advice from appropriately trained specialists.

Every effort has been made to ensure the information is accurate at the time of publication. However, evidence and clinical guidance relating to cancer care are continually evolving. The Jreissati Pancreatic Centre at Epworth is not responsible for any loss, injury or damage resulting from reliance on this material.

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# About the Jreissati Pancreatic Centre at Epworth

**Pancreatic cancer is the eighth most diagnosed cancer in Australia. In 2025, it was estimated that 4,825 people would receive a pancreatic cancer diagnosis. This would account for 2.8% of all cancer diagnoses in the country.[1]**

The Jreissati family are all too familiar with the fear and uncertainty that follow a diagnosis of pancreatic cancer, having lived through the experience when Elias was diagnosed at age 54. Knowing the impact the disease has had on their family, Elias, his wife Colleen and the rest of the Jreissati family wanted to change the patient and family experience for others. This led to the establishment of the Jreissati Pancreatic Centre at Epworth in 2021. This Centre provides clinical care and support to patients with a diagnosis of pancreatic cancer, supports early diagnosis and better patient outcomes, advocates for patients and raises awareness and understanding of the disease. 100% of the funding it receives is directed into research, patient support and clinical care.

Our centre comprises three intersecting parts, each of which is integral to improving patient outcomes and experiences

- Comprehensive patient-centred clinical care
- Patient advocacy and support
- Clinical trials and research

We are a specialist centre offering a centralised model of care for pancreatic disease management. This means our patients have access to all healthcare professionals required for their care within a single centre and hospital network. International studies support the view that centralised care improves overall patient outcomes.[2] By managing patients through one main centre, case volume increases, which in turn enhances clinical expertise. This growing expertise drives innovation and leads to advances that will improve patient procedures and treatments in the future.

The **patient experience** is a central focus of our centre. Receiving a diagnosis of pancreatic cancer can be an overwhelming and emotional time, often bringing many questions and uncertainties. Knowing that you are not facing this alone, and understanding where to turn for support, is very important. Once you are referred to the centre, you will meet our pancreatic nurse coordinator, who will be there to guide and support you throughout your care at Epworth. They will be your first point of contact and are always available to answer any questions or concerns you or your family may have.

# Palliative and supportive care for pancreatic cancer

This booklet is for people living with pancreatic cancer. It explains how palliative and supportive care can help improve comfort, wellbeing and quality of life at any stage of illness. These services can support you through symptoms, treatment and decision-making, and can also assist your family or carers.

Inside, you will find information about what these types of care involve, when they might be introduced, and how to access support. You can read the booklet from start to finish, or refer to the sections most relevant to you. You are encouraged to share it with family, friends or carers to help them understand your care and how they can support you.

# What is palliative and supportive care?

**Palliative care is specialised medical care that supports people with serious illness by focusing on quality of life. It helps manage physical symptoms, provides emotional and practical support, and assists with decision-making throughout your care.**

For people with pancreatic cancer, palliative care can be offered at any stage. It does not require you to stop treatment. It can be provided alongside chemotherapy, surgery, or other therapies, and works in partnership with your existing healthcare team.

Supportive care is a broader term. It includes palliative care as well as other services such as physiotherapy, nutrition advice, occupational therapy, and counselling. These services support your wellbeing, comfort and independence while you undergo treatment or manage symptoms.

Together, palliative and supportive care aim to improve how you feel, help you plan ahead, and ensure that you and your family are supported throughout your care.

# When palliative care can help

Palliative care can be introduced at any stage of pancreatic cancer, not only when other treatment options have stopped.

Some people are referred soon after diagnosis, especially if they have symptoms that affect their daily life. Others may be referred later, as their needs change or become more complex. Palliative care can also help manage side effects during chemotherapy or radiation.

You do not need to choose between palliative care and other treatment. Involving a palliative care team early has been shown to improve comfort, support better decision-making, and help people stay at home for longer if that is their preference.

If you are unsure whether palliative care is suitable for you, speak with your treating team. They can explain what services are available and how they may help in your situation.

# Your care team

Palliative and supportive care is delivered by a team of professionals who work alongside your existing doctors to support you and your family.

The team may include:

- Palliative care doctors and nurses to manage your symptoms, pain, and complex care needs
- General practitioner (GP) to support your care, especially in the community
- Specialist doctors such as your oncologist or surgeon, who oversee your cancer treatment
- Nurse specialists or care coordinators to help organise appointments, care plans and referrals
- Pharmacists to assist with managing medications and provide advice on their use
- Dietitians to support with appetite, nutrition, and maintaining strength
- Physiotherapists and occupational therapists to support your mobility and independence in daily activities
- Social workers to provide emotional support and help with practical issues such as finances, transport, or organising care
- Psychologists or counsellors to support your mental health and emotional wellbeing
- Pastoral care or spiritual support for available for anyone who would find this helpful, regardless of beliefs

Your needs may change over time, and your team will adapt the support they offer to suit your situation.

# Managing symptoms and side effects

Palliative care focuses on relieving symptoms so you can feel as comfortable and well as possible.

People with pancreatic cancer may experience a range of symptoms depending on the stage of the disease and the treatments they are receiving.

These may include:

- Pain
- Fatigue or low energy
- Loss of appetite or weight loss
- Nausea or vomiting
- Changes in bowel habits (such as diarrhoea or constipation)
- Shortness of breath
- Anxiety or low mood

Your palliative care team will talk with you about how these symptoms are affecting your daily life. They will suggest strategies that may include medication, non-medication approaches, and referrals to other professionals such as dietitians or psychologists.

Managing symptoms early and consistently can help you stay independent and continue with the activities that matter most to you.

# Emotional and psychological support

Living with pancreatic cancer can affect your emotional wellbeing as well as your physical health. It is common to feel sadness, worry, anger or fear, especially when facing uncertainty, making treatment decisions, or adjusting to changes in daily life.

You do not need to manage these feelings on your own. Support is available through your palliative and supportive care team.

This may include:

- Counsellors or psychologists who can help with difficult thoughts or emotions
- Social workers who offer practical support, advocacy, and someone to talk to
- Support groups where you can connect with others in similar situations
- Pastoral or spiritual care providers if you find comfort in faith or reflection

These services are available to you, your family and your carers at any stage of your care, including while treatment is ongoing.

# Nutrition and staying comfortable

Pancreatic cancer can affect digestion and make eating more difficult. You may notice changes in appetite, taste or weight, or feel discomfort when eating.

Palliative and supportive care can help reduce the stress of eating and improve your comfort and nutrition.

You may be referred to a dietitian who can support you with:

- Finding foods that are easier to eat and digest
- Managing appetite changes or weight loss
- Suggesting smaller, more frequent meals
- Recommending nutritional supplements if needed
- Adjusting your diet to reduce symptoms like nausea or bloating
- Advising on enzyme replacement if your pancreas is not producing enough digestive enzymes

The goal is to make eating more manageable and support your wellbeing. If you are caring for someone else, remember that enjoyment and comfort are just as important as nutrition.

# Advance care planning

**Advance care planning is a way to record and communicate your preferences for care, now and in the future. It helps ensure that your values and wishes are respected if your health changes or you are unable to speak for yourself.**

It may include:

- Talking with your family and healthcare team about what matters most to you
- Thinking about the type of care you would or would not want
- Choosing where you would prefer to receive care, such as at home
- Appointing a substitute decision-maker to act on your behalf if needed
- Completing an Advance Care Directive, a document that outlines your healthcare preferences

An Advance Care Directive is legally binding and only takes effect if you are unable to make or communicate your own decisions (except in the ACT, where different rules apply). You must have decision-making capacity when completing the document, and you can update it at any time.

You may wish to include any religious, spiritual or cultural beliefs that are important to you in your Advance Care Directive.

### Advance Care Planning

Information about planning for your future health care, including advance care directives

1300 208 582

Advance care planning

### My values

A set of specially constructed statements designed to help you identify, consider and communicate your wishes about the medical treatment you would want in the later stages of life.

*Requires registration.*

My values

# Support for families and carers

Family members, friends and carers often play a central role in supporting someone with pancreatic cancer. This support can be meaningful and rewarding, but it can also be physically and emotionally demanding.

Palliative and supportive care also includes support for carers. This may involve:

- Emotional support and counselling
- Information and education about the illness, medications and what to expect
- Practical help such as arranging equipment, home care or transport
- Respite care so that carers can take a break while their loved one is looked after by professionals
- Guidance on accessing financial assistance or carer payments, where eligible

If you are caring for someone, it is important to look after your own health and wellbeing. Accepting help allows you to continue supporting your loved one over time.

Your healthcare team or social worker can help connect you with local carer services.

# Where care can be provided

Palliative and supportive care can be provided in different settings, depending on your needs and preferences.

These may include:

- **At home:** Many people prefer to be cared for at home. Community palliative care services can provide visits from nurses, doctors and other health professionals.
- **In hospital:** If symptoms are difficult to manage at home or you require specialist support, a hospital stay may be recommended.
- **In a hospice or palliative care unit:** These services offer 24-hour care in a calm and supportive environment, often when care needs become more complex.
- **Residential aged care:** If you are living in an aged care facility, palliative care can be provided there as well.

Your care team will work with you and your family to plan the most appropriate setting. This may change over time as your needs change.

Not everyone has family members, friends or other carers available to provide ongoing support at home. If this applies to you, speak with your healthcare team about services that may be able to help you remain comfortably at home. Support may include assistance from hospital social workers, community palliative care services, meal delivery services, transport assistance, and help with household tasks such as cleaning.

# Accessing palliative care services

Palliative and supportive care is available through hospitals, general practices, specialist clinics and community services. You do not need to wait until you are very unwell to access this support.

Your treating team or GP can refer you to a local palliative care service. If you are receiving care in hospital, the hospital team can help arrange free community-based services.

In some areas, you can also contact a service directly. A social worker, care coordinator or nurse can guide you through the process and explain what is available.

Services may vary depending on your location but can include:

- Home visits from nurses and allied health professionals
- 24-hour phone support
- Access to equipment such as hospital beds or shower chairs
- Help with practical matters such as transport or meals
- Short-term respite or inpatient care

If you are unsure where to begin, speak with your doctor or care team. They can help connect you with services that are appropriate for your needs.

# Key takeaways

- Palliative care is about comfort and quality of life. It can begin early and continue alongside other treatments.
- Supportive care includes a wide range of services such as physiotherapy, nutrition advice, counselling and practical support.
- These services help manage symptoms like pain, fatigue, nausea and appetite changes, and support emotional wellbeing.
- Advance care planning ensures your values and wishes for future care are documented and respected.
- Carers can access their own support, including counselling, respite and practical help to manage their role.
- If you do not have a family member or carer to support you, your healthcare team can help arrange practical and community support services.

**Contact us**

**Jreissati Pancreatic Centre at Epworth**

**Phone** 03 9426 8880
**Email** EH-PancreaticCentre@epworth.org.au

pancreaticcentre.org.au

# Glossary

**Advance care directive:** A written statement of your preferences for medical care if you become too unwell to speak for yourself. It can include decisions about treatments you do or do not want.

**Advance care planning:** The process of thinking about, discussing and documenting your values, preferences and goals for future health care. It may involve your family, carers and medical team.

**Appetite loss:** A common side effect of pancreatic cancer or treatment, where you feel less hungry or struggle to eat enough.

**Bereavement support:** Emotional and practical help available for people who are grieving after the death of someone close to them.

**Carer:** A family member, friend or other person who provides unpaid help with care, treatment or daily tasks.

**Comfort care:** Medical care that focuses on relieving symptoms and improving quality of life, especially when cure is not possible.

**End-of-life care:** Support provided in the final weeks or days of life. This may include pain relief, emotional support, and help with decision-making.

**Hospice care:** A type of care that supports people who are nearing the end of life. In Australia, this may happen in a hospice, hospital or at home.

**Multidisciplinary team:** A group of health professionals from different specialties who work together to support a patient. This can include doctors, nurses, dietitians, physiotherapists, and others.

**Nausea:** Feeling sick in the stomach or like you are going to vomit. This is a common symptom that can be managed with medication and care strategies.

**Nutrition support:** Help with eating, digestion and maintaining weight during illness or treatment. This may include dietitian advice or enzyme therapy.

**Palliative care:** Specialised medical care that helps people with serious illness feel as well as possible. It focuses on managing symptoms and improving quality of life, alongside any treatments you may choose to continue.

**Pain management:** A plan for reducing or controlling physical discomfort. This can include medications, complementary therapies and support from specialists.

**Personalised care:** An approach to care that considers your individual needs, values, culture and preferences.

**Respite care:** Short-term care provided to the person with cancer so that their usual carer can have a break.

**Social worker:** A professional who supports patients and families with emotional, financial or practical concerns during illness.

**Spiritual care:** Support that helps people find meaning, comfort or peace. This may be religious, cultural or personal.

**Supportive care:** Services that help manage the physical, emotional, social and practical impacts of cancer and its treatment. This can include pain relief, dietitian support, mental health care and more.

# Additional resources

## Financial and legal advice

### Cancer Council's Financial Assistance Program

Provides advice and support on a variety of topics including legal issues, financial planning, small business accounting, workplace (HR or recruitment) advice.

13 11 20

cancer.org.au/support-and-services/practical-and-financial-assistance

### Community Legal Centres Australia

Provides links to local community legal centres across Australia.

clcs.org.au/legal-help

### Cancer Council's Dealing with Debt factsheet

Information for people who are having trouble paying their debts.

cancer.org.au/assets/pdf/dealing-with-debts

### Services Australia's Financial Information Service

Information on employment, disability, sickness and carer payments.

132 850

servicesaustralia.gov.au

Type 'Financial Information Service' in the search box

### Cancer Council's Help with Bills factsheet

Explains options to help you pay your utility bills, including rebates, discounts, and concessions

cancer.org.au/assets/pdf/help-with-bills-factsheet

### Money Smart

Financial tips from the Australian Securities and Investments Commission (ASIC). Includes the Financial Advisers Register.

1300 300 630

moneysmart.gov.au

### State Trustees

Public Trustees who can help you prepare a will and manage your finances. Contains links to public trustees by state and territory.

willshub.com.au/succession-law-resources/public-trustees/

### Cancer Council's Superannuation and Cancer factsheet

Advice on finding and accessing super, tax implications of accessing super, and super-related insurance.

cancercouncil.com.au/wp-content/uploads/2022/09/Superannuation-and-Cancer.pdf

## Counselling and mentoring services

### Canteen

Free counselling and emotional support to young people and their families who are impacted by cancer.

1800 226 833

canteen.org.au

### Care Search

Australian Government website that provides palliative care information and links to services for people affected by cancer.

caresearch.com.au

### Kids Helpline

Telephone and online counselling service and crisis support for young people aged 5–25.

1800 55 1800

kidshelpline.com.au

### Pancare support groups

Online and face-to-face support groups for patients and carers.

1300 881 698

pancare.org.au/living-well/support-groups/upper-gastrointestinal-cancer-support-groups

### Pankind Support Navigator

(02) 7207 6970

support@pankind.org.au

### Telephone support groups

The below telephone support groups are free, professionally facilitated support groups. They are open groups and you can join in whenever you feel well enough, on an ongoing basis, from anywhere in Australia.

Members are telephoned by Cancer Council so there are no costs to participate. You can be called on a landline or a mobile.

**The Pancreatic Telephone Support Group** meets the first and third Wednesdays of the month from 1.30pm–2.30pm (EST) and accepts new members at any time.

**The Advanced Cancer Telephone Support Group** meets the first and third Tuesday of the month from 1.30pm–2.30pm (EST) and is for people with a variety of cancers, including pancreatic cancer.

**The Carers' Telephone Support Group** meets the second and fourth Wednesdays of the month from 1.30pm–2.30pm (EST) and is for people caring for someone with any cancer, including pancreatic cancer.

To find out more about any of these telephone support groups, 1300 755 632 or email tsg@nswcc.org.au.

## Medicare Safety Nets thresholds

Medicare Safety Nets have thresholds. When you spend certain amounts in gap and out-of-pocket costs, you may reach these thresholds. Once you've reached the thresholds, you'll begin to receive higher Medicare benefits. This means you'll receive more money back for certain Medicare-funded services.

servicesaustralia.gov.au/what-are-medicare-safety-nets-thresholds

Please make sure you register so that your payments are counted towards the threshold.

## Information for carers

### Carer Gateway

Links carers to local support services such as emergency respite care, counselling and peer support groups. Offers practical information, resources and support packages for carers.

1800 422 737

carergateway.gov.au

### Carers Australia

National body working with state and territory Carers Associations to provide information and counselling for carers.

1800 242 636

carersaustralia.com.au

## Advance care planning

### Advance Care Planning Australia

Information about planning for your future healthcare, including advance care directives.

1300 208 582

advancecareplanning.org.au

### My Values

A set of specially constructed statements designed to help you identify, consider and communicate your wishes about the medical treatment you would want in the later stages of life.

myvalues.org.au

## Helpful guides and factsheets

### Cancer Council's Employment and Cancer factsheet

This fact sheet answers some common questions people have about their rights. It explains federal employment laws and protections under anti-discrimination laws.

cancer.org.au/assets/pdf/employment-and-cancer

### Cancer Council's Getting your Affairs in Order factsheet

Instructions on making a will, preparing documents that will help others to make decisions for you if you're not able to make them yourself, nominating a beneficiary for your superannuation and insurance, and sorting out legal and financial paperwork.

cancer.org.au/assets/pdf/getting-your-affairs-in-order-factsheet

### My Aged Care

Established by the Australian Government to help you find and access the right government-funded aged care services.

You can call the My Aged Care Contact Centre on 1800 200 422.

Monday to Friday 8am to 8pm and Saturdays 10am to 2pm

myagedcare.gov.au

## References


1. Cancer Australia, *Pancreatic cancer in Australia statistics*, Cancer Australia, 2025, accessed 1 December 2025.
2. OO Faluyi, JL Connor, M Chatterjee, C Ikin, H Wong and DH Palmer, 'Advanced pancreatic adenocarcinoma outcomes with transition from devolved to centralised care in a regional Cancer Centre', British Journal of Cancer, 2017, 116:424-431.

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epworth.org.au/giving

## Contact us

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pancreaticcentre.org.au

This centre is funded by the generosity of donors to the Epworth Medical Foundation who share our vision for early diagnosis and cutting-edge treatment for patients with pancreatic cancer.

CONSUMER REVIEWED

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