PCOS and Pancreatic Cancer

What emerging research means for awareness, risk, and self-advocacy

THE ESSENTIAL TAKEAWAY **Research has found an association between PCOS and pancreatic cancer, but it has not proven that PCOS causes pancreatic cancer. The evidence remains limited, and more prospective research is needed.**

What PCOS can affect

PCOS is a lifelong hormonal and metabolic condition. It can affect periods, fertility, insulin response, blood pressure, cholesterol, sleep, and emotional health. Many people with PCOS have insulin resistance or develop prediabetes or type 2 diabetes.

What is known about pancreatic risk

Diabetes, excess body weight, smoking, chronic pancreatitis, older age, and certain inherited conditions are recognized pancreatic cancer risk factors. PCOS is not currently listed by NCI as an established risk factor, but several studies have reported an association that needs more research.

What the research has found

Three observational studies have reported higher pancreatic cancer estimates among people with PCOS. Observational studies can identify patterns, but they cannot by themselves prove cause and effect. Differences in diabetes, body weight, medications, health care access, or other factors may influence results.

Study	Estimate	How to interpret it
Sweden, 2019	**HR 3.40**	Only 5 pancreatic cancers occurred among people with PCOS; the wide confidence interval means the estimate is uncertain.
U.S., 2022	**OR 1.88**	A case-control study found higher odds after adjusting for age, race/ethnicity, BMI, and estrogen use. After adding diabetes, the estimate weakened and crossed statistical significance.
Taiwan, 2024	**OR 1.38**	A claims-based case-control study found higher adjusted odds; the authors said additional studies are needed.

Bottom line: PCOS should prompt lifelong metabolic care and informed conversations with a clinician. It should not create panic, and current evidence does not support pancreatic screening solely because a person has PCOS.

Possible shared pathways

- Insulin resistance and type 2 diabetes: PCOS often involves insulin resistance. Diabetes is a recognized pancreatic cancer risk factor, and new-onset diabetes can sometimes be a sign of pancreatic disease.
- Body weight and metabolism: Excess body weight is a recognized pancreatic cancer risk factor, but people of every body size can have PCOS.
- Inflammation and hormones: Researchers are studying whether long-term metabolic and hormonal changes help explain the observed association. No single mechanism has been confirmed.

Race and Ethnicity Statistics for U.S. Women

Use the numbers to ask better questions - not to assume an individual diagnosis

Pancreatic cancer rates among U.S. women

Rates are age-adjusted per 100,000 women. Black women's incidence was 1.25x White, 1.27x Hispanic, 1.18x AI/AN, and 1.57x Asian/PI rates. Mortality ratios were 1.23x, 1.48x, 1.23x, and 1.71x, respectively.

Women by race or ethnicity	New cases 2019-2023	Deaths 2020-2024
Non-Hispanic Black	**15.4**	**12.3**
Non-Hispanic White	12.3	10.0
Hispanic	12.1	8.3
Non-Hispanic AI/AN	13.0	10.0
Non-Hispanic Asian/PI	9.8	7.2

Source note: NCI SEER incidence uses 2019-2023 data; mortality uses 2020-2024 U.S. death data. Race and ethnicity categories follow SEER reporting.

PCOS diagnosis rates are not the same as true prevalence

Non-Hispanic Black	Non-Hispanic White	Hispanic	Non-Hispanic Asian
4.4%	9.9%	8.2%	7.8%

CDC's 2022-2023 survey measured whether women had ever been diagnosed with PCOS. The Black diagnosis percentage was 0.44x the White, 0.54x the Hispanic, and 0.56x the Asian percentage. This does not prove PCOS is biologically less common; diagnosis rates can reflect recognition and access to care.

Know the signs and when to speak up

Pancreatic symptoms to discuss promptly

- Yellowing of the skin or eyes, dark urine, light stools, or itching
- Upper or middle abdominal pain that may reach the back
- Unexplained weight loss, appetite loss, fatigue, nausea, or persistent bloating
- New-onset diabetes without typical risk factors or sudden worsening of diabetes

Your PCOS and prevention checklist

- Ask for glycemic testing at diagnosis and repeat every 1-3 years based on your risks.
- Review blood pressure, cholesterol, sleep, medications, smoking, and family cancer history.
- Ask about genetic counseling if close relatives have pancreatic cancer or related inherited cancers.
- Remember: no standard pancreatic screening is recommended for average-risk adults; PCOS alone is not a current screening indication.

Trusted sources and further reading

CDC and NCHS: PCOS diagnosis statistics, 2022-2023
NCI: Pancreatic cancer risk factors
NCI: Pancreatic cancer screening
NCI SEER: Pancreatic cancer statistics
Chung et al., International Journal of Clinical Practice, 2024
CDC: PCOS and diabetes
NCI: Pancreatic cancer symptoms
NCCN Guidelines for Patients: Pancreatic Cancer
Peeri et al., JAMA Oncology, 2022
2023 International Evidence-based PCOS Guideline

Medical disclaimer: This newsletter is for education and awareness only. It does not diagnose disease or replace individualized medical advice. Seek urgent care for severe or rapidly worsening symptoms.