

OVARIAN CANCER



BASIC INFORMATION

DESCRIPTION

A malignant growth in the ovary that is likely to spread to other body parts and threaten life. It affects females of all ages but is most common after age 50. There are many different types of ovarian cancer. Epithelial tumors account for the majority and are the most aggressive. Other ovarian cancers are slow growing or metastasized from other cancers in the body.

FREQUENT SIGNS AND SYMPTOMS

Frequently no symptoms occur until the tumor becomes large.

The earliest symptoms include:

- Vague discomfort in the lower abdomen.
- Gastrointestinal upsets.
- Irregular menstrual periods.

Later symptoms:

- Deep voice.
- Excessive hair growth.
- Unexplained weight loss.
- An enlarged, hard and sometimes tender mass in the lower abdomen.
- Pain with intercourse.
- Anemia.

CAUSES

The predominant type of ovarian cancer is believed to result from repetitive injury to the surface of the ovary.

RISK INCREASES WITH

- Family history of ovarian cancer.
- Late pregnancies (over age 30).
- Never having had children.
- Women who have previously been diagnosed with cancers of the breast, uterus, colon or rectum.

PREVENTIVE MEASURES

- Have a yearly pelvic examination, which offers the best chance of early detection and cure.
- Oral contraceptives may help with prevention.
- Preventive surgery (removal of the ovaries) has been suggested for some women who have mother or sisters with ovarian cancer.

EXPECTED OUTCOMES

25% to 50% of women with ovarian cancer survive at least 5 years after treatment. The prognosis is related closely to the stage of the disease when it is first diagnosed. With aggressive treatment, the long-term survival rate is improving.

POSSIBLE COMPLICATIONS

- Pleural effusion.
- Reaction to radiation and/or anticancer drugs or therapy.
- Ascites.
- Death from spread of cancer to other body parts.



TREATMENT

GENERAL MEASURES

- Diagnostic tests may include a pelvic examination, laboratory blood studies, ultrasound of the abdomen, X-rays of the abdomen and CT scan or MRI. There are several blood tests (tumor markers) available, the most common being CA-125, and additional tests as needed to determine if the cancer has spread to other body parts.
- Specific treatment varies depending on the stage of the disease, the type of cancer cell and the patient's age.
- Surgery (cytoreductive) is usually performed to remove the cancerous ovary and other affected areas, including fallopian tubes, uterus and the other ovary (sometimes). The goal of surgery is to remove as many of the cancer cells as possible so chemotherapy will be more effective. In young patients who want to retain reproductive capacity, it may be possible to remove only the ovary and the tube. In some cases, follow-up surgery is required to determine the effectiveness of the treatment.
- Chemotherapy, depending on cell type and stage of disease, is usually recommended along with surgery for the best outcome. Radiation therapy is used less often.
- Counseling and joining a support group are recommended to learn to accept and cope with cancer.
- Additional information is available from the American Cancer Society at (800) ACS-2345; web site: <http://cancer.org>; or from the National Cancer Institute at (800) 4-CANCER; web site: <http://www.nci.nih.gov>.

MEDICATIONS

- Anticancer drugs (chemotherapy); usually a combination of drugs is recommended.
- Pain relievers, as needed.

ACTIVITY

No restrictions after recovery from surgery.

DIET

Eat a normal, well-balanced diet that is high in protein to promote repair of body tissues.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of an ovarian tumor.
- The following occur after surgery:
 - Increased pain, swelling, redness or drainage from the surgical wound.
 - Pain or swelling in the leg.
 - Signs of infection, such as fever, chills, headache or muscle aches.