

Ovarian cancer: A review of this scary diagnosis

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Although ovarian cancer is not the biggest killer of women, it is a leading cause of gynecologic malignancy in the United States. According to recent cancer statistics, there are about 22,000 new cases of and 14,000 deaths from this cancer. (1)

As we age, the incidence of cancer, including that of the ovary, goes up. The average age at diagnosis of ovarian cancer is 63 years old. Based on data from 2010 through 2012, approximately 1.3 percent of women will be diagnosed with ovarian cancer during their lifetime. (2) The strongest risk factor for ovarian cancer is a family history. Unlike with breast and colon cancer which



have mammograms and colonoscopies, respectively, there are no routine screening tests to detect this scary disease. Much attention has been brought to the tumor marker CA-125. Levels of this marker are elevated in half of women with early stage ovarian cancer and in about 80 percent in women with advanced disease. (3)The problem with CA 125 and part of the reason why it is not used in wide screening protocols, is that it is not very specific. For example, CA 125 can be elevated for benign reasons such as with endometriosis, cirrhosis, and other cancers. (4,5,6) Furthermore, levels can fluctuate with the menstrual cycle. (7) Although using the marker for screening may be more reliable in post menopause, studies have failed to prove that it is specific and accurate enough for widespread screening. Studies also have not shown that ultrasound is an effective screening intervention for early-stage cancer. (8)For women with an isolated incidence of a close family member with breast cancer (for example a mother or sister), screening recommendations are the same as for other women. However, a female with a suspected hereditary ovarian syndrome should likely meet with a genetic counselor for possible testing for the BRCA genes. Risk factors for this cancer type include the BRCA gene, polycystic ovarian syndrome, endometriosis, and cigarette smoking. (9) On the other side, protective factors against ovarian cancer are oral contraceptives (the birth control pill), bearing many pregnancies/children, breastfeeding and surgical ovary and fallopian tube removal/hysterectomy. (10,11,12)The symptoms of ovarian cancer can be vague and include abdominal bloating or fullness, and pelvic discomfort. In more advanced cases, a woman may develop fluid in her lungs and shortness of breath. Bowel movement changes, nausea, and vomiting may through up a red flag as well. Urinary changes such as more frequent urination or a sense of urgency can also be an indicator and these symptoms should warrant a trip to the doctor for evaluation. (13)Occasionally, a mass can be felt by a clinician during a well-woman exam. In this case, a pelvic ultrasound may ensue to examine the area. Upon diagnosis, surgery usually follows to take out the tumor, and typically involves removal of uterus, ovaries and fallopian tubes (complete hysterectomy). This also allows for staging which in turn, dictates how it will

be treated. Lymph nodes are often removed as well. Chemotherapy is also used in the treatment of ovarian cancer.



The earlier an ovarian cancer is detected, the better chance for survival. If the cancer is diagnosed when it is only in the ovary (localized), then the five-year survival rate is over 90 percent. If it has spread to regional lymph nodes then the chances of surviving five years is at 73 percent. And if at diagnosis the cancer has spread to other parts of the body, the survival rate drops to 28 percent. (2) Unfortunately, 60 percent of ovarian cancer cases are found with distant metastases. (2) Often thought as a disease that whispers, a change in a woman's normal abdominal or pelvic function should warrant evaluation by her skilled health care provider. **Michele Brannan is a certified Physician Assistant of Internal Medicine and has been in practice in the River Bend area for over 10 years. The health information provided herein is not**

intended to replace the advice or discussion with a healthcare provider and is for educational purposes only. Before making any decisions regarding your health, speak with your healthcare provider.*REFERENCES:*

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