What Everyone Should Know About Ovarian Cancer
The National Ovarian Cancer Coalition’s mission is to raise awareness and promote education about ovarian cancer.

The Coalition is committed to improving the survival rate and quality of life for women with ovarian cancer.
Ovarian cancer is a disease in which malignant (cancerous) cells are found in the tissues of the ovary. An ovary is one of two small reproductive organs—about the size of an almond or slightly larger—located on each side of the uterus that produce female hormones and eggs. Ovarian cancer is the leading cause of death from all gynecologic cancers and the fifth leading cause of cancer-related deaths among women in the United States. The American Cancer Society estimates that about 22,000 American women will be diagnosed this year and 13,850 will die of the disease.

What is the general outlook for women diagnosed with ovarian cancer?

Because each woman diagnosed with ovarian cancer has a different profile, it is impossible to give a general prognosis. If diagnosed and treated early when the cancer is confined to the ovary, the five-year survival rate is nearly 93 percent. Unfortunately, ovarian cancer symptoms are non-specific and there is no effective screening test for the disease. As a result, only 20 percent of all ovarian cancer cases are caught at an early stage. Most women are diagnosed at advanced stages, and fewer than 50 percent live longer than five years after diagnosis.
Is ovarian cancer hereditary?
A woman can inherit an increased risk for ovarian cancer from either her mother’s or father’s side of her family, particularly if a first-degree relative (grandmother, mother, sister, or daughter) has, or has had cancer of the breast, colon, uterus, or rectum. Furthermore, women with a strong family history of ovarian cancer are more likely to develop the disease at an early age (younger than 50).

Studies show that inheriting a defect in the BRCA1 or BRCA2 gene can also increase a woman’s risk of developing ovarian cancer by about 15 to 40 percent.

Normally, these genes help to prevent cancer, but if a woman has inherited a mutated BRCA1 or BRCA2 gene, her ovaries and breasts are more susceptible to the development of cancer. Women of Ashkenazi (Eastern European) Jewish descent have a potentially greater risk for ovarian cancer since they have a higher risk of carrying BRCA mutations. Mutations in several other genes have also been linked recently to a higher risk for the disease. Further studies will allow researchers to confirm their results.

What are some of the risk factors linked to ovarian cancer?
While the presence of one or more risk factors may increase a woman’s chance of getting ovarian cancer, it does not necessarily mean that she will develop the disease. Risk factors include:

- Genetic predisposition
- Personal or family history of breast, ovarian, colon, or rectum cancer
- Increasing age. The disease affects all ages, but most women are 55+ when diagnosed
- Never pregnant
- Long-term use of hormone replacement therapy
- Obesity
CAN OVARIAN CANCER BE PREVENTED?
At present, there is no known method to prevent ovarian cancer, but some things appear to reduce a woman’s risk of developing the disease. They include:

**Oral contraception:** Birth control pills reduce the risk of ovarian cancer especially among women who use them for five or more years.

**Breast feeding and pregnancy:** Having one or more children, particularly if the first is born before age 25, and breast feeding may decrease a woman’s risk.

**Tubal ligation:** This is a surgical procedure in which the fallopian tubes are tied to prevent pregnancy. This procedure reduces the relative risk of developing ovarian cancer. Its use as a risk reduction strategy may be appropriate for high-risk individuals and should be discussed with your physician.

**Hysterectomy:** A hysterectomy, the surgical removal of the uterus, has been demonstrated to reduce the relative risk of ovarian cancer. A woman should not have a hysterectomy exclusively to avoid the risk of ovarian cancer, but if one is being performed for valid medical reasons and she has a family history of ovarian or breast cancer or is over age 40, she should discuss concurrent removal of the ovaries and fallopian tubes with her gynecologist.

**Preventive Surgery:** A salpingo-oophorectomy is the surgical removal of one or both ovaries and the fallopian tubes. A preventive, or “prophylactic” salpingo-oophorectomy is only recommended for high-risk patients. The operation significantly reduces the risk of ovarian cancer, but not the risk of primary peritoneal cancer, which can develop after the ovaries are removed. This type of cancer looks and acts identical to ovarian cancer and the treatment is the same. Discussion with your physician is necessary to determine your individual risk and options for surgery.
What are some of the symptoms of ovarian cancer?

- Swelling of the stomach, sudden weight gain, or bloating
- Persistent pelvic or abdominal pain or pressure
- Trouble eating or feeling full quickly
- Feeling the need to urinate urgently or often

Other symptoms of ovarian cancer can include:

- Feeling very tired all the time
- Upset stomach or heartburn
- Back pain
- Pain during sex
- Constipation
- Unusual vaginal bleeding

DID YOU KNOW

- All women are at risk
- Symptoms exist—they can be vague, but increase over time
- Early detection increases survival rate
- A Pap test DOES NOT detect ovarian cancer

These symptoms are common for some women, and may not mean there’s ovarian cancer. If, however, these symptoms are new and persist daily for more than two or three weeks, a woman should ask her physician about ovarian cancer. If there is suspicion of the disease, she should be referred to a gynecologic oncologist before undergoing surgery.

Treatments and research are always evolving, check in often for the latest information. You can visit our website www.ovarian.org, call 1-888-OVARIAN, or contact your local NOCC Chapter.
What are some diagnostic tests that can be used to detect ovarian cancer?

Although new methods for early screening of ovarian cancer are being investigated, at present there is no accurate test to screen for early detection of the disease. The Pap test does not test for ovarian cancer; it screens for cervical cancer. The following tests are available:

- **Annual physical exam** for women age 18 and above and annual rectovaginal exam for women age 35 and above (Physician inserts fingers in the rectum and vagina simultaneously to feel for abnormal swelling and to detect tenderness).

- **Transvaginal sonogram.** An ultrasound probe is inserted into the vagina and is used to bounce sound waves off of tissues to create a picture called a sonogram. It can often reveal irregularities on the surface of the ovaries and within cysts that form within the ovaries.

- **Blood test** to determine if the level of a tumor marker called CA-125 is elevated. The protein is produced by ovarian cancer cells and is elevated in some 80 percent of women with advanced ovarian cancer. It is also used to detect closely related cancers, such as fallopian tube and primary peritoneal cancer. However, the CA-125 misses about half of all early stage cancers, even though the disease is present. It is also not uncommon for the CA-125 count to be elevated due to conditions unrelated to ovarian cancer. One of the most important uses of the test is the monitoring of women previously diagnosed and treated for ovarian cancer. Rising numbers over several tests suggest that a woman is experiencing a recurrence of her disease.

If any of these tests are positive, you should consider a consultation with a gynecologic oncologist. A CT scan or MRI may be performed. If there is a pelvic mass requiring surgery, your physician may suggest an OVA1 test. This blood test was approved by the Food and Drug Administration in 2009 to help evaluate whether a mass is malignant or benign.
What are the treatment options for ovarian cancer?

Women should always discuss treatment options with a physician because optimal treatment will vary with respect to the stage of disease, the woman’s age, and the overall condition of her health. There are three main types of treatment for ovarian cancer.

- **Surgery**: Surgery to remove the cancerous growth is the primary method for diagnosis and therapy for ovarian cancer. It is best performed by a qualified gynecologic oncologist. For more information, visit our website, www.ovarian.org, or call the Foundation for Women’s Cancer at 1-800-444-4441.

- **Chemotherapy**: Chemotherapy relies on the use of drugs that travel through the bloodstream to kill cancerous cells both in and outside of the ovaries. It is used in the majority of cases as a follow-up therapy to surgery.

- **Radiation Therapy**: Radiation therapy uses high-energy X-rays to kill cancer cells and shrink tumors. It is only rarely used in the treatment of ovarian cancer in the United States.

SEE A GYNECOLOGIC ONCOLOGIST

Over the past two decades, research has shown that treatment by a gynecologic oncologist improves survival in women with ovarian cancer and decreases rates of recurrence. Gynecologic oncologists not only are skilled surgeons but they have extensive and specialized training in prescribing appropriate treatment and care for cancers of the female reproductive organs.

You can find such a specialist by searching the Foundation for Women’s Cancer’s national list at www.foundationforwomenscancer.org.
National Ovarian Cancer Coalition

About NOCC
Since its inception in 1995, the National Ovarian Cancer Coalition (NOCC) has been committed to raising awareness of ovarian cancer in communities across the country through education and support. As the first and only national ovarian cancer organization with a network of local chapters located throughout the United States, NOCC has established itself as the leading advocate for patients and families coping with ovarian cancer. NOCC works to advance its mission through national awareness and survivorship programs, a comprehensive website, a toll-free information line, peer support, professional education, and publications like this one.

NOCC’s national programs include:
- The Take Early Action & Live (teal) initiative provides education and increases awareness of ovarian cancer.
- Faces of Hope provides up-to-date information, hope, and support to women with ovarian cancer, their families, friends and loved ones.
- The Run/Walk to Break the Silence on Ovarian Cancer raises awareness, celebrates survivors, and remember those lost to the disease.

NOCC also works to promote ovarian cancer research. For more information about NOCC, visit www.ovarian.org or call 1-888-OVARIAN.

How can I get involved with NOCC?
NOCC chapters work to raise awareness about ovarian cancer in local communities throughout the United States. These chapters understand the specific needs of individual communities and
promote and expand patient, public, and professional education about ovarian cancer. At the local level, NOCC volunteers are trained to offer support to patients, family members, and caregivers. They organize awareness events, sponsor educational programs and continuing medical education symposia, disseminate literature, and educate organizations through NOCC’s Speakers Bureau.

You too can experience the value of helping others. Please contact NOCC for volunteer opportunities in your community. If you are interested in starting a local chapter or finding out other ways to get involved, we can provide you with additional information.

**Join NOCC**

Join NOCC’s call to arms. The lack of public awareness and education about ovarian cancer is an important women’s health issue.

Be part of our effort to bring the life-saving message about ovarian cancer to the public and to the medical profession. Your support will help to further our efforts in the fight against ovarian cancer. Join our mailing list and receive NOCC’s newsletter and periodic email updates. There are no required fees but donations are always appreciated. To join, call NOCC at 1-888-OVARIAN or go to www.ovarian.org.

**Opportunities for Donating to NOCC**

Your donation helps advance the mission of NOCC. Following are some giving options:

**Honor Gift Program**

Celebrate the anniversary of a special couple, a loved one’s birthday or an accomplishment. Make a donation in memory of a loved one or friend. Honor your physician or nurse. Make donations in your guests’ names in lieu of party and wedding favors. NOCC will send a card to notify the recipient of your generosity.
Matching Gifts
Increase the power of your gift. Check to see if your company has a matching gift program. If you submit your gift online, please mail the matching gift form with your employee information to NOCC.

Workplace Giving
Federal employees may donate to NOCC in the Combined Federal Campaign (CFC). NOCC is a member of CancerCure and is listed as “Ovarian Cancer Coalition, National.”

Outside Fundraisers
Host a fundraising event in your area.

Include a Gift in Your Will
Support ovarian cancer education and awareness beyond your lifetime by including a gift to NOCC in your will or trust. NOCC should be identified as National Ovarian Cancer Coalition, Inc., a Texas not-for-profit corporation with offices at 2501 Oak Lawn Ave., Suite 435, Dallas, Texas 75219. Contact NOCC for further information.

You may donate by mail,
by phone (1-888-OVARIAN),
or online (www.ovarian.org).

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Break the Silence on Ovarian Cancer

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