

**OVARIAN CANCER**

**HISTOLOGY**

- Serous
- Mucoid
- Endometrioid

Most adneocarcinomas

**STAGING**

- I growth limited to Ovaries
- II Ovarian growth with pelvic extension
- III Tumour outside pelvis with +ve nodes
- IV Distant organ involvement including pleural space & liver parenchyma

**TREATMENT**

- Surgical: Total hysterectomy+salpingo-oophrectomy+infracolic omentectomy
- Chemo: Platinum based
- Raditherapy: palliative ONLY

**PROGNOSIS 5 yr**

- Stage I 80-95%
- Stage II 70%
- Recurrence post chemo 20%

**SCREENING**

- Not specific
- ↑ Ca125 80% advanced ca

**INCIDENCE**

- AGE:
  - Increases with advancing age
  - mean age 58
  - usually btwn 5th and 8th decade
- GEOGRAPHY:
  - developed > developing
  - 5th commonest ca in UK females

**PREDISPOSING FACTORS**

- Family Hx:
  - BRCA1 carrier= 40-60% risk
  - BRCA2 carrier= 20-30% risk
- ovulation:
  - Nulliparity
  - 1st child after 35yrs
  - late age menopause
- white race
- Prolonged periods uninterrupted

**CLINICAL FEATURES**

- Present late as often ASYMPTOMATIC
- LATE DIAGNOSIS COMMON
- Pain
- Abdominal Girth increase:
  - bloating
  - ascites
- Urinary retention
- Mass
- Constipation (bowel obstruction)
- Hydronephrosis (ureteric obstruction)