

Ovarian Cancer

PART OF A WOMAN'S REPRODUCTIVE SYSTEM, OVARIES MAKE THE EGGS necessary for conceiving a child. The ovaries are attached to the **uterus** (the womb) by the fallopian tubes. Like other organs in the body, ovaries can become cancerous. Ovarian cancer can be difficult to detect and is often found when it is at a late stage or has already spread (**metastasized**). Ovarian cancer is the fifth leading cause of cancer death in women aged 35 to 74 years. About 1 to 2 women in 100 get ovarian cancer during their lifetime. Because ovarian cancer is usually found at an advanced stage, the survival rate is lower than for other types of cancer (such as breast cancer) that are easier to detect at an early stage. If ovarian cancer is found early and treated, survival rates improve to more than 90%. The most common type of ovarian cancer is **epithelial** ovarian cancer, which arises from the surface (**epithelium**) or perhaps the inner surface of the fallopian tube. **Germ cell** and **stromal** tumors of the ovary are rare. The June 8, 2011, issue of JAMA includes an article about screening for ovarian cancer.

SIGNS AND SYMPTOMS

Symptoms of ovarian cancer are often vague and may include abdominal fullness or discomfort, bloating, nausea, difficulty eating or indigestion, fatigue, back pain, pain during sex, or urinary urgency or frequency.

TESTING AND DIAGNOSIS

- Medical history and physical examination are the first steps in evaluating ovarian cancer.
- A **complete blood count** checks for anemia. Blood chemistry tests check kidney and liver function.
- X-rays, ultrasound, **computed tomography** (CT), and **magnetic resonance imaging** (MRI) may be used to look at the body's internal structures. Tumor size and possible spread of the cancer may show up on these tests.
- Family history of ovarian and breast cancers increases a woman's risk of developing ovarian cancer.

TREATMENT

Hysterectomy (surgical removal of the uterus), along with removal of both ovaries and fallopian tubes, is the primary treatment for ovarian cancer. Because most cases of ovarian cancer are found at an advanced stage, chemotherapy is usually offered as well.

PREVENTION

- Taking birth control pills, especially for more than 5 years, reduces a woman's risk of developing ovarian cancer.
- Based on your family history, genetic testing and counseling may be obtained to make more informed decisions about reducing risk of ovarian cancer.
- Removing the ovaries at the same time a hysterectomy is performed (not for cancer) may be recommended if a woman is older than 40 years or if she has a family history of ovarian or breast cancer.
- Surgical removal of the ovaries solely to prevent ovarian cancer is recommended only for women with a very high risk of developing ovarian cancer.

Sources: National Cancer Institute, American Cancer Society, National Ovarian Cancer Coalition, American Congress of Obstetricians and Gynecologists

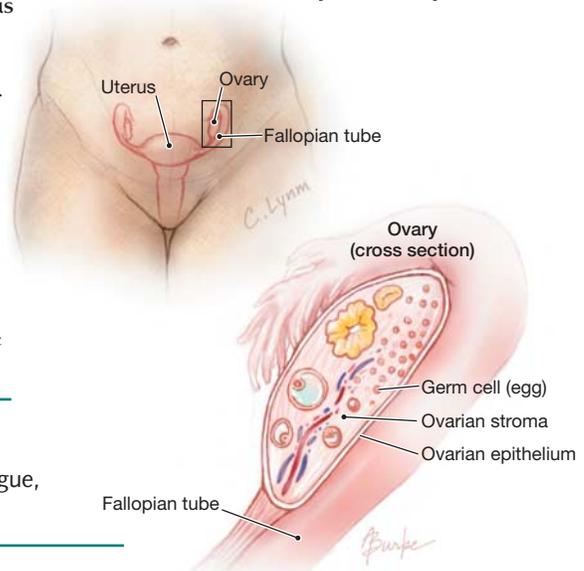
Janet M. Torpy, MD, Writer

Alison E. Burke, MA, Illustrator

Robert M. Golub, MD, Editor

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Normal anatomy of the ovary



FOR MORE INFORMATION

- American Cancer Society
www.cancer.org
- National Cancer Institute
www.cancer.gov
- National Ovarian Cancer Coalition
www.ovarian.org
- American Congress of Obstetricians and Gynecologists
www.acog.org

INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page Index on JAMA's Web site at www.jama.com. Many are available in English and Spanish. A Patient Page on hysterectomy was published in the March 24/31, 2004, issue; one on endometrial cancer was published in the October 2, 2002, issue; one on cancer chemotherapy was published in the June 11, 2008, issue; and one on carcinoma of the cervix was published in the November 21, 2007, issue.

