

Ovarian cancer is the main cause of death from gynaecological cancer. Around 370 women are diagnosed each year; 80% are over 50 years of age. Most have advanced disease at presentation. Fewer than one-third have stage I or stage II disease at diagnosis. Survival in Ireland is poor - less than 40% at 5 years.

**Data Source:** National Cancer Registry Ireland

**Factors that increase risk:** Increasing age - most cases are post-menopausal; Lifestyle (overweight, smoking) is associated with 20%; Genetic mutations account for 10% (e.g. a woman with a first degree relative with ovarian cancer has a 3-4 fold increased risk. The known mutations, BRCA1 and BRCA2, explain less than 40% of the excess risk of familial cancer); Nulliparity; Prolonged HRT use (e.g. for more than 5 years); Unintentional infertility or use of fertility drugs.

**Factors that decrease risk:** Interruption of ovulation (e.g. pregnancy, oral contraceptive use, tubal ligation).

**Screening of well women for ovarian cancer does not reduce mortality. It is not recommended. Ovaries are not palpable in post-menopausal women. If they are felt, consider malignancy.**

## Symptoms of ovarian cancer

Ovarian cancer has few specific symptoms.

Consider ovarian cancer in women (especially aged over 50 years), who present with the following **persistent and frequent symptoms (i.e. more than 12 times per month):**

- Abdominal distension
- Early satiety
- Loss of appetite
- Pelvic or abdominal pain
- Increasing urinary urgency or frequency
- New onset Irritable Bowel Syndrome (IBS)

Consider ovarian cancer in women who present with **unexplained:**

- Ascites
- DVT
- Change in bowel habit
- Weight loss
- Fatigue

## CA125

- Should not be ordered if a woman has no symptoms.
- Can be elevated in ovarian and other cancers and in many benign conditions.
- Is not an adequate ovarian cancer detection tool when used alone.
- Is raised in 80% of epithelial ovarian cancer but raised in only 50% of early stage disease.

## Pelvic Ultrasound (US)

- A pelvic ultrasound is required to evaluate an ovarian mass. Trans-abdominal and trans-vaginal ultrasounds should be undertaken at the same appointment, if possible.
- An urgent US is needed where CA125 is elevated in a symptomatic woman.
- Pre-menopausal ovarian cysts are common; almost all are benign.

## A woman should be referred directly to gynae-oncology:

- If clinical findings reveal a pelvic mass or unexplained ascites (not obviously uterine fibroids)
- If an ultrasound (US) is suspicious for ovarian cancer. Please include details of where the US was carried out and a copy of the report
- If CA125 > 200kU/L
- If CA125 > 35kU/L and continues to rise on retesting but pelvic ultrasound is normal

## Who can refer to gynae-oncology?

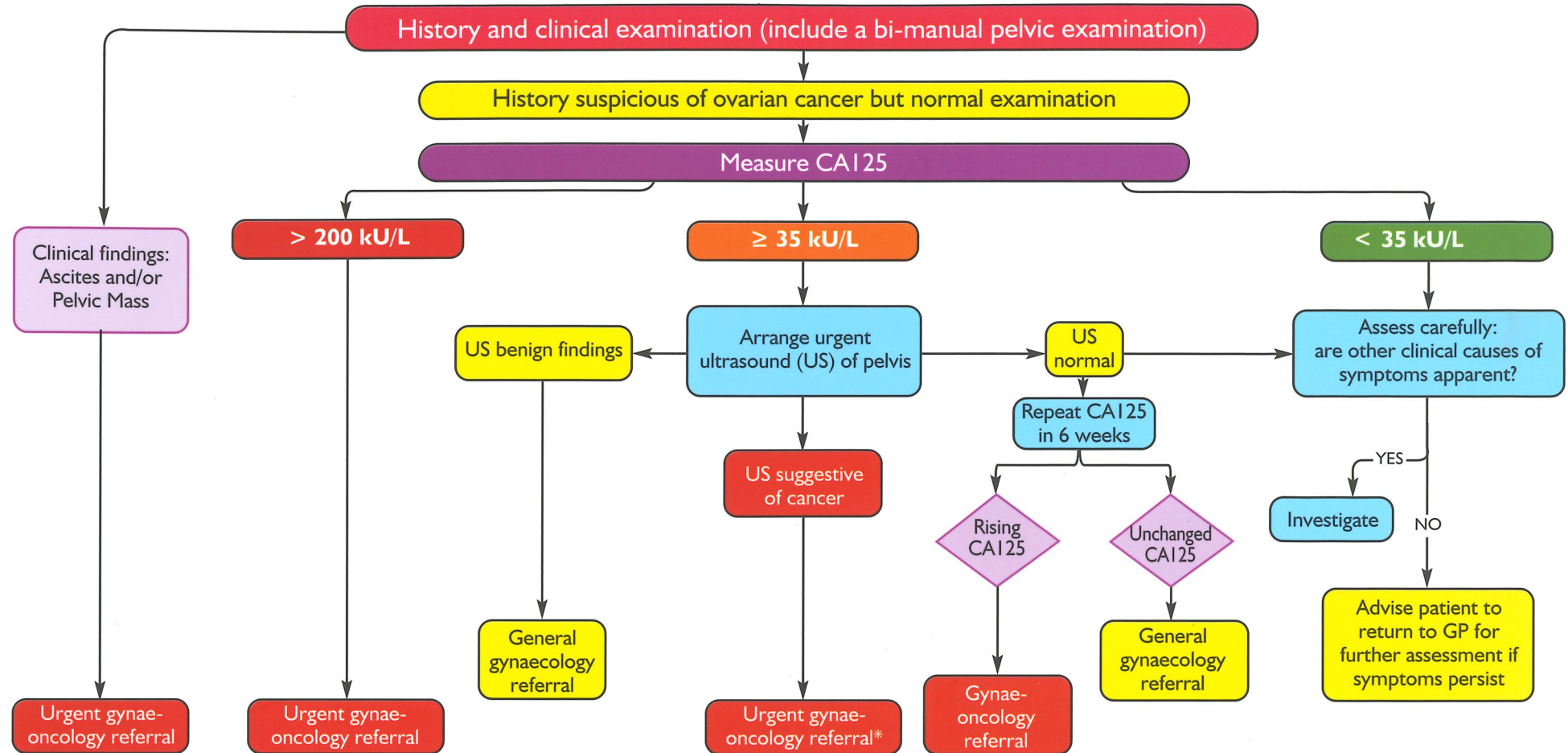
You, the GP, when the patient meets the criteria in this guideline.

Another hospital-based clinician (e.g. from the Emergency Department or Radiology).

## When is a referral to gynae-oncology not appropriate?

If a patient has benign gynaecological conditions referral should be to the general gynaecology service.

# GP REFERRAL PATHWAY FOR SYMPTOMATIC WOMEN



\* **Note:** In some hospitals radiology may trigger a referral to gynae-oncology, but this should not be assumed. In general, you (the GP), will be asked to inform the patient that she is being referred to this service.

## General Recommendations

This referral guideline is to prioritise women with suspected ovarian cancer. You can make a referral using the ovarian cancer referral form to one of these gynae-oncology centres.

Post-menopausal bleeding (1 year after last period) requires an urgent referral to any general gynaecology clinic in your area.

Women with other gynaecology symptoms should be referred routinely to a general gynaecology clinic in your area.

## Gynae-oncology centre contact details

<input type="checkbox"/> Cork University Maternity Hospital	Tel: 021 4920711	Fax: 021 4920677
<input type="checkbox"/> Galway University Hospital	Tel: 091 544529	Fax: 091 542044
<input type="checkbox"/> University Hospital Limerick	Tel: 061 482311	Fax: 061 485305
<input type="checkbox"/> St Vincent's University Hospital	Tel: 01 2216594 [Mon/Tues/Wed]	Fax: 01 221 4318
	Tel: 01 2213055 [Thurs/Fri]	
<input type="checkbox"/> St James's Hospital Dublin 8	Tel: 01 4162239	Fax: 01 4103364
<input type="checkbox"/> Mater University Hospital	Tel: 01 803 4448	Fax: 01 805 6282
<input type="checkbox"/> University Hospital Waterford	Tel: 051 842778	Fax: 051 842132