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.

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).

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 US is required to evaluate an ovarian mass.
- 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 gynaec-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

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.

Who can refer to gynaec-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 gynaec-oncology not appropriate?
If a patient has benign gynaecological conditions referral should be to the general gynaecology 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 gynaecology 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.

*Note: In some hospitals radiology may trigger a referral to gynaecology, 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.*

**Gynaecology centre contact details**

- **Cork University Hospital**
  - [To be confirmed]
  - [Tel: 091 544529](tel:091-544529)
  - [Fax: 091 542044](fax:091-542044)

- **Galway University Hospital**
  - Tel: 091 542311
  - Fax: 091 545305

- **University Hospital Limerick**
  - Tel: 01 2213055 [Mon/Tues/Wed]
  - Tel: 01 2216508 [Thurs/Fri]
  - Fax: 01 2214318

- **St Vincent’s University Hospital**
  - Tel: 01 2216594 [Mon/Tues/Wed]
  - Tel: 01 2213055 [Thurs/Fri]
  - Fax: 01 2216594 [Mon/Tues/Wed]
  - Fax: 01 2213055 [Thurs/Fri]

- **St James’s Hospital Dublin 8**
  - Tel: 01 4162239
  - Fax: 01 4103364

- **Mater University Hospital**
  - Tel: 01 803 4448
  - Fax: 01 805 6282

- **University Hospital Waterford**
  - Tel: 051 842778
  - Fax: 051 842132