



**Teal Ribbon Day**  
Wednesday  
24 February 2016



## Ovarian Cancer Awareness Month

Ovarian Cancer Awareness Month in February provides the opportunity to focus attention on ovarian cancer, the second most common gynaecological cancer and the most common cause of gynaecological cancer death in women in Australia.

Recent Cancer Australia research showed that almost half of women surveyed were unable to identify *any* symptom of ovarian cancer.

It's important for women to know their own bodies and be aware of the symptoms of the disease, as there is no screening test for ovarian cancer. A Pap test does not detect ovarian cancer - it is designed to screen for cervical cancer.

Cancer Australia has developed a new ovarian cancer awareness resource, *No-one knows your body like you do*. The resource identifies the symptoms to look out for and what women should do. It is designed to be shareable on social media.

For women concerned about their family history of breast or ovarian cancer, their doctor can assess their risk using Cancer Australia's *Familial Risk Assessment – Breast and Ovarian Cancer (FRA-BOC)*, an online family history assessment tool.



## Cancer Australia

### Vision

To reduce the impact of cancer and improve the wellbeing of people affected by cancer

### Mission

To strengthen and provide advice on the Australian Government's strategic focus on cancer control and care<sup>1</sup>

## About ovarian cancer

- ▶ In 2016, it is estimated that 1,480 cases of ovarian cancer will be diagnosed, making it the second most common gynaecological cancer after uterine cancer in Australia.<sup>2</sup>
- ▶ It is estimated that ovarian cancer will be the most common cause of death from gynaecological cancer in Australia during 2016, with approximately 1,040 deaths predicted.<sup>2</sup>
- ▶ While the 5-year relative survival rate for ovarian cancer has improved significantly from 1982–1986 to 2007–2011, it still remains low in comparison with other gynaecological cancers.<sup>2</sup> 43 out of 100 women diagnosed with ovarian cancer survive five years beyond their diagnosis.<sup>2</sup>

# Cancer Australia gynaecological cancer initiatives

Improving outcomes for women diagnosed with gynaecological cancers in Australia through the translation of evidence, development of new resources, investigation of innovative and sustainable models of care and the continued investment in priority areas of gynaecological cancer research

## ▶ Shape *national cancer control* in Australia

- ▶ **The National Framework for Gynaecological Cancer Control** identifies nationally-agreed evidence-based priority areas for action across the cancer control continuum. The Framework aims to guide policy and service delivery directions in national gynaecological cancer control over the next five years. The Framework will be released in April 2016.
- ▶ **The annual Jeannie Ferris Cancer Australia Recognition Award**, which recognises outstanding contributions to improving outcomes for women with gynaecological cancers, honours the late Senator Jeannie Ferris. The successful 2015 award recipients were Ms Bridget Whelan in the Community Member category and Professor Michael Friedlander AM in the Health Professional/Researcher category.

### **Nominate an outstanding contributor!**

To nominate a community member or a health professional/researcher who has made an outstanding contribution to improving outcomes for women with gynaecological cancers, go to the 2016 Jeannie Ferris Cancer Australia Recognition Award [Call for Nominations](#)



Ms Bridget Whelan and Professor Michael Friedlander AM, the 2015 recipients of the Jeannie Ferris Cancer Australia Recognition Award

## ▶ Improve cancer *outcomes*

- ▶ **Published** evidence summaries for health professionals, based on systematic reviews of the evidence, about sentinel node biopsy in early-stage cancer of the vulva and the management of women with 1B2 cervical cancer
- ▶ **Promoted** resources for appropriate assessment of symptoms of ovarian cancer and appropriate referral of women with suspected ovarian cancer for General Practitioners
- ▶ **Published** evidence-based consumer information and statistics about gynaecological cancers in 10 different languages, to ensure consumers can continue to access up-to-date information
- ▶ **Released** a community education resource for Aboriginal health workers and health professionals to facilitate workshops to promote awareness about breast and gynaecological cancers in Aboriginal and Torres Strait Islander women, and improve community access to cancer information through the delivery of 30 Women's Business workshops throughout 2016
- ▶ **Raising** awareness of gynaecological cancers including activities in Ovarian Cancer Awareness Month and on Teal Ribbon Day to promote evidence-based messages for women and health professionals about symptoms awareness of ovarian cancer



# February is Ovarian Cancer Awareness Month



@CancerAustralia



## ► Inform effective and sustainable cancer care

- **Investigating** innovative models for the follow-up of women with endometrial cancer, to increase knowledge and evidence to inform the appropriateness and design of follow-up care

Resources for GPs to assist in the appropriate referral of women with suspected ovarian cancer

**Assessment of symptoms that may be ovarian cancer**  
a guide for general practitioners

**Symptoms**  
Most women diagnosed with ovarian cancer report symptoms. Symptoms of ovarian cancer are often vague and generalised and not specific to the reproductive system.

**Types of symptoms reported by women diagnosed with ovarian cancer**

- Abdominal bloating
- Increased abdominal girth
- Loss of appetite
- Loss of weight
- Feeling full after a small amount of food
- Change in bowel habits
- Change in menstrual cycle
- Unexplained weight loss
- Back pain
- Abdominal and/or pelvic pain
- Feeling of pressure in the abdomen

**Frequency of reporting of symptoms categories**

Abdominal symptoms	77%
Constipation	50%
Unexplained weight loss	34%
Back pain	28%

**Physical examination:** Abdominal palpation, pelvic examination, and chest examination. The woman should be sufficiently undressed to allow for complete physical examination.

**Findings to note:** persistence on abdominal palpation, unexplained fullness, hard nodular mass in the pouch of Douglas, adnexal masses.

**Chronic disease of the liver:** Constipation, loss of appetite, non-malignant ascites, jaundice, weight loss, anorexia, polyphagia, oedema, systemic lymphadenopathy, central obesity.

**Other conditions:** Any disseminated intra-abdominal cancer, gynaecological conditions, and endocrine, especially metabolic, conditions.

**Appropriate referral of women with suspected ovarian cancer**

**Symptoms of ovarian cancer**

Most women with ovarian cancer experience at least one symptom in the year prior to their diagnosis. Symptoms of ovarian cancer are often vague, generalised and non-specific.

- abdominal bloating/feeling full
- appetite loss
- constipation, heartburn
- back pain
- frequent urination
- abdominal/pelvic pain
- fatigue

Features that suggest malignancy include:

- septation
- papillary projections
- solid areas
- ascites

CA125 results can be used in combination with a woman's CA125 level and menopausal status to calculate the Risk of Malignancy Index (RMI) (see over) to help identify those women who should be referred to a gynaecological oncologist.

**Why not use a CA125 test by itself?**

CA125 alone should not be used to determine if a patient has ovarian cancer. While a very high value may assist in confirming the diagnosis, a low value does not exclude ovarian cancer due to the non-specific nature of the test.

**Why refer to a gynaecological oncologist?**

- A woman with a suspicious or persistent adnexal mass needs surgical exploration.
- Survival for women with ovarian cancer has been shown to be improved when all or part of the tumour is removed at surgery.
- Optimal surgical cytoreduction and appropriate staging is most frequently achieved by a gynaecological oncologist.

Visit the Australian Society of Gynaecological Oncologists website at [www.asgo.net.au](http://www.asgo.net.au)

canberra.gov.au

## ► Strengthen capability for national cancer control

- **Awarded** research grants in gynaecological cancers, through Cancer Australia's Priority-driven Collaborative Cancer Research Scheme (PdCCRS), a national project grants scheme that brings together Government and non-Government funders in a nationally coordinated process. Through this scheme over \$13.6 million has been provided to gynaecological cancer grants in the period 2007-2015, 18 of which were for ovarian cancer research projects.
- **Building** capacity to conduct cancer clinical trials in Australia. Between July 2013 and June 2016, Cancer Australia will provide \$1.4 million to the Australia New Zealand Gynaecological Oncology Group (ANZGOG) to develop industry-independent cancer clinical trials in gynaecological cancers.



## References

1. Cancer Australia, 2014. Cancer Australia Strategic Plan 2014-2019, Cancer Australia, Surry Hills, NSW.
2. Australian Institute of Health and Welfare, 2014. Cancer in Australia: an overview, 2014. Cancer series no 90. Cat. no. CAN 88. Canberra: AIHW.

## What you can do to help reduce the impact of gynaecological cancer in Australia

- ▶ **Share** Cancer Australia's new ovarian cancer awareness flyer *No-one knows your body like you do*

Suggested posts

Can you name a symptom of ovarian cancer? @CancerAustralia says know your own body and what to look for <http://ow.ly/Ys8Bs>



@CancerAustralia



- ▶ **Nominate** a community member or health professional for the Jeannie Ferris Cancer Australia Recognition Award to recognise their outstanding contribution to improving outcomes for women with gynaecological cancers.

Call for nominations opens 23 February - 31 March 2016.

Visit [canceraustralia.gov.au](http://canceraustralia.gov.au)

- ▶ **Ensure** health professionals follow best practice in the appropriate assessment and referral of ovarian cancer, and the assessment of risk of breast and ovarian cancer for women concerned about their family history.

Suggested posts

1. @CancerAustralia Assessment of symptoms that may be #OvarianCancer - an important guide for GPs <http://ow.ly/YmsAc>
2. Appropriate referral for women with suspected #OvarianCancer. View @CancerAustralia resource to help guide referrals <http://ow.ly/YmsFE>
3. GP assessment of family history - use @CancerAustralia online assessment tool (FRA-BOC) <http://ow.ly/Ypb6M>



@CancerAustralia



- ▶ **Share** this newsletter with your organisation and membership.

## About Cancer Australia

Cancer Australia was established by the Australian Government to benefit all Australians who are diagnosed with cancer, their families and carers.

Cancer Australia aims to reduce the impact of cancer, address disparities and improve outcomes for people affected by cancer, by:

- ▶ leading and coordinating national, evidence-based interventions across the continuum of care
- ▶ focusing on populations which experience poorer health outcomes, including Aboriginal and Torres Strait Islander peoples and people living in rural and remote Australia
- ▶ building and analysing the evidence base and translating the latest scientific cancer research and data to inform policy and practice
- ▶ providing information and expert advice on cancer control to governments, health professionals and the community.

Cancer Australia harnesses expertise, creates effective partnerships and utilises a collaborative model to foster engagement across the health system.

Find out more about  
Ovarian Cancer



[ovarian-cancer.canceraustralia.gov.au](http://ovarian-cancer.canceraustralia.gov.au)