## Early Detection Essential in the Fight Against Ovarian Cancer

(NAPSA)—Ovarian cancer is often referred to as the silent killer due to the advanced stage at which most cases are discovered. In the last 30 years, however, medical advancements have allowed us to wage a better fight against the disease, thereby increasing survival rates.

According to Julian Schink, MD, chief of gynecologic oncology at Chicago's Northwestern Memorial Hospital, "Women diagnosed with ovarian cancer today live an average of five times longer than women affected by the disease 30 years ago due to significant advances in how we detect and treat ovarian cancer, and increased awareness of warning signs."

## **Warning Signs**

Diagnosing ovarian cancer is difficult because there is no reliable screening test. In addition, there were no officially recognized symptoms associated with ovarian cancer until 2007, when the Gynecologic Cancer Foundation, Society of Gynecologic Oncologists, and American Cancer Society issued a statement formally noting the following:

- Bloating
- Pelvic or abdominal pain
- Difficulty eating or feeling full quickly
- Urinary symptoms (urgency or frequency)

Doctors stress that the frequency and number of symptoms are key and that women who experience a combination of these symptoms almost daily for two to three weeks should see their doctor. "Patients should listen to their bodies, be assertive and tell their doctor if a change occurs. It's



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important to investigate symptoms thoroughly in order to catch ovarian cancer early," says Schink.

## **Reducing Your Risk**

One in 55 women will develop ovarian cancer in her lifetime and the risk increases for women who are genetically predisposed. However, Schink notes there are steps you can take to lower your risk:

- *Oral contraceptives*—women who use birth control pills for at least five years are three times less likely to develop ovarian cancer.
- *Tubal ligation*—permanent forms of birth control such as tubal ligation reduce the risk of ovarian cancer by 50 percent.
- Removal of ovaries—women with an extensive family history of breast or ovarian cancer, or who carry altered versions of the BRCA genes, may opt for a prophylactic oophorectomy to remove both ovaries, lowering the risk of ovarian cancer by up to 80 percent.

## Treatment

While difficult to detect, specialized centers such as the Northwestern Ovarian Cancer Early Detection and Prevention Program, a collaborative effort between the hospital and the Robert H. Lurie Comprehensive Cancer Center, have strategies for monitoring women at risk.

Patients are monitored with ultrasound and blood tests every six months. "The goal of the program is to catch cancer that may develop early, so patients can receive treatment before it reaches an advanced stage," says Schink. "Studies show that patients who go to a center of excellence committed to treating ovarian cancer have better outcomes and a greater chance that their cancer will be successfully removed."

Treatment for ovarian cancer includes surgery to remove the ovaries, uterus and tissues that ovarian cancer often spreads to, the appendix and, in some cases, lymph nodes in the pelvic region. Doctors at Northwestern Memorial also use a form of chemotherapy called intraperitoneal chemotherapy, which is injected directly into the abdominal cavity and has been linked to a 15-month improvement in survival.

When asked about the future of ovarian cancer, Schink states he is encouraged by the progress that has been made and that with new drugs, treatments and surgical strategies on the horizon, he is optimistic. "The best scenario would be to prevent this cancer entirely. Until that day comes, we will continue to aggressively seek the best treatment and provide the highest level of care possible to our patients."

For more information, visit www.nmh.org or call (877) 926-4664