

TIP SHEET

Ovarian Cancer

WE CAN'T LET CANCER WIN.

THAT'S WHY RPCI'S HIGH RISK OVARIAN CANCER CLINIC IDENTIFIES WOMEN AT HIGHEST RISK AND PROVIDES EARLY DETECTION, MONITORING AND PREVENTIVE TREATMENTS.

90%
of women diagnosed with early stage ovarian cancer (confined to the ovary) survive

5 years

Only **15%**
of women are diagnosed when their cancer is at this early stage.

The ovaries are two almond-sized organs in the female reproductive system, which produce the eggs and female hormones. When cancer develops in the ovaries, it often goes undetected until an advanced stage.

Ovarian cancer is the leading cause of death among gynecologic cancers.

What can you do?

- **Know your family history**
- **See your gynecologist regularly**
- **Pay attention to symptoms. See your doctor if any of these symptoms persist daily for two weeks:**

- Nausea, indigestion, gas, constipation or diarrhea
- Pelvic or abdominal pain, pressure, discomfort, bloating or swelling
- Sudden weight gain or weight loss
- Indigestion or feeling full quickly
- Fatigue
- Urinary frequency
- Abnormal or post-menopausal bleeding
- Pain during intercourse

Are you at high risk?

There is no test to effectively screen all women for early signs of ovarian cancer. Identifying women at increased risk, and targeting them for advanced screenings, diagnostics and genetic testing improves chances for prevention, early detection and successful treatment. You may be at higher risk for ovarian cancer if you have:

- Had breast cancer before age 40
- A male relative with breast cancer
- A family history of ovarian, fallopian tube, or primary peritoneal cancer in a first or second degree relative (mother, sister, grandmother)
- A personal or family history of hereditary non-polyposis colorectal cancer (Lynch II syndrome) in a first or second degree relative
- A personal or family history of a BRCA mutation
- A history of infertility
- Ashkenazi Jewish ancestry

HOW RPCI CAN HELP

The **High Risk Ovarian Cancer Clinic** offers surveillance, early detection and preventive options for women at high risk for ovarian cancer, including:

- Comprehensive ovarian cancer risk assessment
- Genetic counseling and testing
- Risk reduction options, including preventive surgery
- Regular screening and diagnostic testing (which may include transvaginal ultrasound and CA-125 blood test) to monitor ovarian health

Why Roswell Park Cancer Institute?

Setting the National Standards. Our experts serve on boards of the National Comprehensive Cancer Network (NCCN), to create guidelines that specify the best ways of preventing, detecting, and treating specific types of cancer. RPCI's **Shashikant Lele, MD**, Clinical Chief of Gynecologic Oncology, serves on the NCCN Ovarian Cancer guidelines panels.

Nationally Recognized. RPCI is a National Cancer Institute (NCI) designated Comprehensive Cancer Center. For the third year in a row, RPCI was named to the Leapfrog Group Top Hospitals list in recognition of healthcare safety, quality and affordability.

Access to the Latest Therapies. The newest treatments, available through clinical research studies, are important options for many patients. About 50% of RPCI patients are eligible for a clinical study. Whether or not you choose to participate is entirely your choice.

Treatment the RPCI Way

We believe every patient is unique, and we approach ovarian cancer treatment on an individual and personal basis, treating the whole person, not just the cancer. We offer the highest level of cancer care, including:

- **A multidisciplinary care approach** by a team of gynecologic oncologists, surgical, medical and radiation oncologists plus psychologists, social workers, dietitians and other experts, who work collaboratively to provide the highest level of comprehensive and integrated care—all under one roof.
- **Minimally-invasive robot-assisted surgery** for gynecological procedures, including hysterectomy, and surgery to remove the ovaries, fallopian tubes, and any necessary lymph nodes.
- **Ability to provide chemotherapy directly to the abdomen.** In this treatment, Intraperitoneal Chemotherapy (IP), higher doses of chemotherapy drugs bathe the entire tumor site in anticancer agents.



In the Pipeline

OVARIAN CANCER VACCINE

Under development at RPCI is a vaccine that harnesses the body's immune system to help prevent ovarian cancer recurrence after treatment. **Adekunle Odunsi, MD, PhD**, Chair of Gynecologic Oncology, and colleagues created a vaccine that targets a specific protein (antigen NY-ESO-1). Early studies showed promise in patients with tumors that tested positive for the protein.

Familial Ovarian Cancer Registry

This registry, based at RPCI, is a national computer database that stores information researchers use to study familial ovarian cancer in their quest to:

- Identify new genes associated with ovarian cancer, thereby improving genetic and psychosocial counseling for women and families.
- Determine whether use of oral contraceptives or hormone replacement therapy affect ovarian cancer risk.

Women over age 18 with a family history of ovarian, fallopian tube or primary peritoneal cancer are encouraged to join the registry. **Learn more at the registry's web site at: www.ovariancancer.com or call 1-800-OVARIAN (1-800-682-7426).**

Meet the Doctors



Stacey Akers, MD
Gynecologic Oncology



Peter Frederick, MD
Director, Minimally Invasive Surgery,
Gynecologic Oncology



Shashikant Lele, MD
Clinical Chief, Gynecologic Oncology



David Mattson, Jr., MD
Director, GYN Radiation Program



Adekunle Odunsi, MD, PhD
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Robert Lohman, MD
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