

Fact Sheet 3

The stages of ovarian cancer

Ovacome is a national advice and support organisation that works to connect patients, their family and friends; provide information on treatments, screening and research; raise awareness and support and give a voice to all those affected by ovarian cancer.

There is a glossary with this fact sheet, to explain words you may not be familiar with.

This fact sheet explains the stages of ovarian cancer and the reasons why doctors put cancers into stages. There is also some information about the treatment for each stage.

The stage of ovarian cancer means where the disease is at the time it is discovered.

After surgery, your doctor may be able to see what stage your cancer is at. Laboratory reports will confirm exactly what stage and type of ovarian cancer you have.

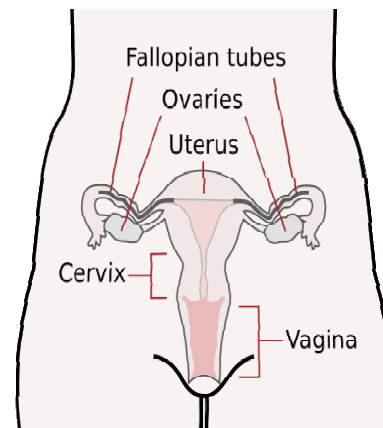


Diagram of the female reproductive system

There are four stages of ovarian cancer.

Stage 1

This is the earliest stage and means that the cancer affects only one or both of the ovaries.

At this stage the cancer causes few symptoms and most women are not aware that anything is wrong. Only a small number of women (15%) have their cancer found at this early stage.

At surgery, even if a cancer appears to affect only the ovary, it is possible that it has spread. To be certain that a cancer is at stage 1, samples from other areas are taken and examined under the microscope.

The stages of ovarian cancer are classified further using the letters a, b, and c.

If cancer is confirmed as stage 1, the outlook is good. This is particularly the case if the cancer is just inside one ovary (stage 1a) or both ovaries (stage 1b). In this case, surgery may be enough to treat the cancer.

If the cancer involves the surface of the ovary or ovaries or there are cancer cells in the body fluid around the ovaries (stage 1c), you may also need chemotherapy.

Stage 2

If the ovarian cancer is at stage 2, the cancer has spread outside the ovary into the pelvis or has gone into the uterus (womb).

Ovarian cancer at stage 2 is only found in about 10% of women with the disease. This is because the lining of the pelvis and abdomen are not separated, so the cancer usually spreads to the abdomen at the same time as the pelvis.

Ovarian cancer is classified as stage 2a when the tumour has spread to the uterus (womb) or fallopian tubes, but there are no cancer cells in the body fluid around the ovaries.

Stage 2b is when the tumour has spread into other pelvic tissues but there are no cancer cells in the body fluid around the ovaries.

Stage 2c is when the tumour has spread to the pelvic tissues and there are cancer cells in the body fluid around the ovaries.

If you have stage 2 ovarian cancer, you are more likely to have chemotherapy as well as surgery.

Stage 3

This is the most common stage and is found in approximately 65% of women with ovarian cancer.

At this stage the cancer may have spread to the lining of the abdomen, the surface of the bowel, the omentum and the lymph nodes in the pelvis or around the aorta.

The tumour on the lining of the abdomen releases fluid which collects inside the abdomen. This collection of fluid is called ascites.

Stage 4

Approximately 10% of women with ovarian cancer will have stage 4 cancer.

Stage 4 means the cancer has spread beyond the abdomen to the liver or lungs.

Sometimes the cancer spreading to your lungs may be the first symptom of the cancer, if it causes you to feel short of breath or cough. An x-ray will show whether the cancer has spread to your lungs.

Stage 4a is when the cancer has spread to your lungs.

Stage 4b is when the cancer has spread to your liver.

If you have stage 4 ovarian cancer, you may have surgery and chemotherapy, or just chemotherapy.

Written by Professor Sean Kehoe,
Professor of Gynaecological Cancer,
John Radcliffe Hospital, Oxford.

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Important questions to ask

- Will I be referred quickly to a medical team that specialises in diagnosing and treating gynaecological cancers?
- Will medical professionals discuss the surgery and chemotherapy with me before my treatment?
- Will the surgery be done by a gynaecologist trained in managing gynaecological cancers?
- Will my chemotherapy be carried out by staff with a special interest in gynaecological cancers?
- Can I see a specialist nurse or counsellor and a symptom-control (palliative care) team?
- Can I and my family get information on support services?
- Will I get information on any ongoing clinical trials?

If you would like more information or if you would like to discuss anything about ovarian cancer, please phone our supportline on 0845 371 0554 Monday to Friday between 10.00 hrs and 17.00hrs.

Alternatively, please visit our website at www.ovacome.org.uk

Disclaimer:

Ovacome factsheets are designed to provide information, advice and support about ovarian cancer to health care professionals, patients and the public. Whilst Ovacome makes every attempt to ensure the accuracy and reliability of the information contained in the factsheet, it is not a formal legal document. The information provided is accurate at the time of printing; please take into account the fact that medical research is constantly changing. The information provided here is not a substitute for professional medical care. If you suspect you have cancer you should consult your doctor as quickly as possible. Ovacome cannot accept liability for any inaccuracy via third party information from sources to which we link.

Ovacome
PO Box 68599, London, EC1P 1DE
Phone: 0845 371 0554
Website: www.ovacome.org.uk
Email: ovacome@ovacome.org.uk



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Glossary

Aorta	The abdominal aorta is the largest artery in the abdomen. An artery is a blood vessel carrying blood away from the heart.
Chemotherapy	Treating cancer with medication, such as cytotoxic drugs (drugs that kill cancer).
Gynaecology	The study of diseases of women.
Lymph nodes	These are small pearl-like glands that are connected to the lymph system and act as filters to bacteria or cancer cells.
Omentum	A sheet of fat in the abdomen that protects the intestines.