

Tests for ovarian cancer



Ovacome is a national charity providing support and information to anyone affected by ovarian cancer.

We run a free telephone and email support line and work to raise awareness and give a voice to all those affected by ovarian cancer.

This booklet is part of a series giving clinical information about ovarian cancer.

It gives information about the tests and investigations used to diagnose ovarian cancer.



Patient Information Forum

Tests for ovarian cancer

Ovarian cancer is diagnosed in around 7,500 people every year, making it an uncommon cancer.

The lifetime risk of developing it is around one in 50. Ovarian cancer is most likely to occur in those aged over 45 and after the menopause.

Symptoms of ovarian cancer

It can be difficult to diagnose ovarian cancer because its symptoms can be very similar to other more common and less serious conditions.

People can experience vague and varied symptoms, such as generally feeling unwell, changes in bowel or urinary habits and other symptoms that seem more related to abdominal rather than gynaecological problems.

The most recognised symptoms are:

- Persistent abdominal bloating
- Persistent abdominal or pelvic pain
- Feeling full quickly when eating
- Changes in urination and bowel habits

If you experience any of these symptoms you should visit your GP and be offered tests for ovarian cancer.

Physical examination

You may be given a physical examination. If your doctor finds that you have ascites, which is fluid in your abdomen causing bloating and swelling, or detects a lump in your abdomen or pelvis, you should be referred to your local gynaecological oncology centre on the suspected cancer pathway.

CA125 blood test

You should be offered a blood test to measure the level of CA125. This is a protein that acts as a cancer marker. The results will usually be back in about a week. If the level is 35 or above it could indicate ovarian cancer – but it could also indicate much less serious conditions too, so further tests are needed. You should then be sent for an ultrasound scan.

If the CA125 level is found to be less than 35, and you continue to have symptoms that could indicate ovarian cancer, you should be reassessed by your GP after a month.

It is important that the CA125 cancer marker test is offered to those over 50 with symptoms that could suggest irritable bowel syndrome (IBS). This condition arises very rarely for the first time in older people and sometimes IBS is misdiagnosed in those who actually have ovarian cancer.

Ultrasound scan

Those with symptoms of possible ovarian cancer and raised levels of CA125 should be sent for an ultrasound scan. This should be an urgent referral and will probably be to your nearest hospital.

Ultrasound scanning works by using high frequency sound waves to create a picture of internal organs. You will be asked to lie down, and gel will be applied to your abdomen and pelvis. A small transducer (microphone) is then moved smoothly over the skin and images of internal organs appear on a screen.

Often a trans-vaginal scan will be needed to get a clearer image of your ovaries. This means a very small transducer is placed in your vagina, which may be uncomfortable but not painful. If you do not want to have an internal ultrasound, let the doctor know. You do not have to give a reason.

You may be given the result of your scan straight away, or a report will be sent to your GP who will discuss it with you.

If the scan showed possible evidence of ovarian cancer, your GP will refer you on the suspected gynaecology cancer pathway to the gynaecological oncology team at your nearest cancer centre or hospital for further investigations. If the scan showed no evidence and your ovaries looked normal and healthy your GP should ask you to monitor your symptoms and, if they continue, to return in a month for further assessment.

CT scan

The first appointment with the gynaecological oncology team will be as an outpatient to be assessed and probably to arrange a CT scan (computerised tomography, which uses x-rays) of your abdomen and pelvis.

On the day of the scan, you may be given a contrast medium that shows up the internal organs. It is given through a cannula (a thin tube) in a vein in your arm, which will be removed after the scan. Sometimes the contrast medium can be swallowed as a drink, sometimes both methods are required. Before it is given you should be asked if you have any allergies or asthma, or have had previous allergic reactions to contrast medium.

You will need to change into a hospital gown and remove jewellery. You will then be asked to lie on a couch in front of the scanner, which is shaped like a big ring, and stay still while the scanner moves above your abdomen and pelvis.

The CT scan takes a series of x-rays which build up a detailed image of the organs inside your body. It will show any abnormalities which may suggest a diagnosis of ovarian cancer.

The scan images will help the gynaecological oncology team to decide on a provisional diagnosis and recommend a treatment plan. The results will probably be given to you at a follow-up appointment with your gynaecological oncology consultant. This will be arranged by the hospital.

Having a biopsy

If the results of the blood tests and scans show that you could have ovarian cancer, but are not well enough to have surgery, you will need a biopsy so tissue samples can be taken using a local anaesthetic. These will be examined in the laboratory and used to confirm a diagnosis.

Having a laparotomy

You may be admitted to hospital to have a laparotomy. This is an operation to open the abdomen and look at your organs and the abnormalities that were shown on the CT scan.

During the operation the surgeon may take samples of tissue to be analysed in the laboratory, this will be your histopathology results. If you are not well enough to have surgery to remove the cancer, or if the CT scan showed that the cancer had spread, your doctors will discuss this with you and plan other treatment.

You can see information about surgery for ovarian cancer here:www.ovacome,org.uk/surgery-for-ovarian-cancer.booklet

Test results

The tissue samples taken during surgery or at biopsy, will be sent for testing to confirm your diagnosis. It may take two or three weeks for results to become available. If you are found to have ovarian cancer your clinical team will plan your treatment with you. We welcome your feedback on this booklet. Please email ovacome@ovacome.org.uk or call 0800 008 7054. If you would like to discuss anything about ovarian cancer, please phone our support line on 0800 008 7054 Monday to Friday between 10am and 5pm. You can also visit our website at <u>www.ovacome.org.uk</u>.

Reviewed by Valerie Ng, Macmillan nurse specialist in gynaecological cancer, Imperial College Healthcare NHS Trust

Disclaimer

.Disclaimer: Ovacome booklets provide information and support. We make every effort to ensure the accuracy and reliability of the information at the time of publication. The information we give 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 any liability for any inaccuracy in linked source

Version 2.3 | Date last updated September 2024 | Date for review September 2027

ovarian cancer

Support line: 0800 008 7054 Office phone: 0207 299 6654 Website: www.ovacome.org.uk Email: ovacome@ovacome.org.uk

Ovacome is a charity. We receive no government funding and most of our funding is provided by our community of supporters. We want to continue providing free support and information to people when they need it most. If you can, then please help us by making a donation. You can **scan the QR code** to the right or visit **www.ovacome.org.uk/donate**.





Charity number 1159682