

ovacome..
ovarian cancer

Stage 3 ovarian cancer



Ovacom 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 is for those who have been diagnosed with stage 3 ovarian cancer and want more information about their cancer and how it is treated.



Stage 3 ovarian cancer

The ovarian cancer stage means how far your cancer has spread at the time it is discovered.

Cancer staging

There may be evidence that you have stage 3 ovarian cancer during the initial investigations, or it may be indicated by your symptoms. For instance, abdominal bloating may be caused by fluid in the abdomen which is a symptom of stage 3 disease.

Sometimes the stage of the cancer is only apparent when it is seen during surgery. A range of samples from around the abdomen, as well as samples of fluid used to wash out the abdomen during surgery, are sent away for examination under a microscope. It is usually possible to identify the stage of your cancer from these samples.

The system of staging also applies to fallopian tube and primary peritoneal cancers.

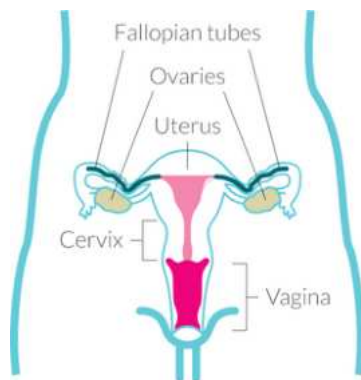
What is stage 3 ovarian cancer?

Stage 3 ovarian cancer is when the cancer is in one or both ovaries or fallopian tubes and has extended beyond the pelvis into the abdomen and sometimes into the lymph nodes.


It is the most common stage at which ovarian cancer is diagnosed.

Stage 3 ovarian cancer is divided into three further categories:

- Stage 3a is diagnosed when an examination under a microscope finds cancer cells too small to be seen by eye in tissue samples taken from the lining of the abdomen. Stage 3a1 means that cancer cells have been found in lymph nodes behind the pelvis. Stage 3a1(i) is a secondary cancer of less than 10 millimetres (mm). Stage 3a1(ii) is a secondary cancer of more than 10mm. Stage 3a2 is when microscopic cancer cells have spread beyond the pelvis.
- Stage 3b means small tumours, two centimetres (cm) or less in size, have spread beyond the pelvis and are on the surface of the liver and spleen.
- Stage 3c is when larger tumours, greater than two cm in size, are growing on the lining of the abdomen (peritoneum) or the surface of the liver or spleen.



A diagram of the female reproductive system

A woman with shoulder-length blonde hair is seen from behind, walking in a crowd. She is wearing a long-sleeved shirt with horizontal green and white stripes. A purple bag is slung over her shoulder. The background is a blurred outdoor setting with other people.

Stage 3 is the most common stage at which ovarian cancer is diagnosed.

Photo credit: Bridger
Film and Photography

Grading stage 3 ovarian cancer

Your cancer will also be graded to show how active it is and how quickly or slowly it may grow.

Grade 1 (sometimes called well differentiated cancer) means that when it is seen under a microscope the cells look similar to normal cells which means they are likely to grow slowly.

Grade 2 (moderately differentiated) means the cells look more abnormal and are expected to be slightly faster growing.

Grade 3 (poorly differentiated or undifferentiated) means the cells look very different from normal cells and are expected to grow more quickly.

Ascites

At this stage, the tumour on the lining of the abdomen may cause fluid to collect inside the abdomen. This collection of fluid is called ascites.

If this happens and becomes uncomfortable then your team may try and reduce it using chemotherapy, or a simple procedure called ascitic drainage is carried out to drain off the fluid.

How is stage 3 ovarian cancer treated?

Stage 3 ovarian cancer is treated by a combination of surgery and chemotherapy. This may be surgery followed by chemotherapy, or three cycles of chemotherapy (sometimes more) followed by surgery and then three further cycles of chemotherapy.

Your surgeon will remove your ovaries, fallopian tubes, womb and abdominal lining. They will also aim to remove any cancer growing on other organs. Lymph nodes close to where the cancer has spread may also be removed. This surgery is called optimal cytoreduction or debulking surgery. You can see more information here:

<https://www.ovacome.org.uk/surgery-for-ovarian-cancer-booklet>

Occasionally the cancer will have affected the bowel, and it may be necessary to remove a section of the bowel and create a colostomy or ileostomy. This is where an opening is created in your abdomen so that waste from your bowel can be collected in a small bag. This can be temporary; specialist staff will help you to manage this process.

You will need a period of some weeks to recover from your surgery. After this you will begin or resume your chemotherapy treatments, given every three weeks. It is likely that your consultant will recommend the use of two chemotherapy drugs called carboplatin and Taxol (paclitaxel).

You can see more information here:

<https://www.ovacome.org.uk/chemotherapy-booklet>

Sometimes a consultant will also recommend treatment with a third drug called Avastin, a targeted therapy (monoclonal antibody) which interferes with the cancer's blood supply. You can see more about targeted therapies here: <https://www.ovacome.org.uk/targeted-therapies-booklet>

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 www.ovacome.org.uk. This is one of a series of information booklets produced by Ovacome. You can see them here: ovacome.org.uk/information.

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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 sources.

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