

Patient information from BMJ

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Ovarian cancer: what treatments work?

Ovarian cancer is cancer that affects women's ovaries. It can also affect organs and tissues near to the ovaries. It is a serious disease but if it is diagnosed at an early stage it can usually be cured. And even cancers that are more advanced can be treated and their progress slowed.

You can use our information to talk to your doctor and decide which treatments are best for you.

What is ovarian cancer?

The cells in your body usually grow, die off, and get replaced in a regular way. But if groups of cells start to grow out of control they can form a lump called a tumour.

Not all tumours are dangerous. For example, many women have growths on their ovaries called cysts. These cysts aren't usually cancer and they often go away by themselves.

But if they cause symptoms, or if your doctor is worried that they could be cancer, you might be advised to have surgery to remove them.

Cancerous ovarian tumours are serious. This is partly because pieces of the tumour can break off and spread to other parts of the body.

Most ovarian cancers start in cells on the outside of an ovary. When they spread it tends to be to nearby organs such as the womb, bladder, and bowels, causing new spots of cancer in these areas.

Ovarian cancer is most common in women over 50. Having a close family member with the disease can also slightly increase your chance of getting it.

What treatments work?

The main treatment for ovarian cancer is surgery to remove the cancer. This is often followed by chemotherapy. Between 70 and 80 in 100 women are cured by these treatments at the first attempt.

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The type and amount of treatment you need will depend on how advanced your cancer is, or what 'stage' it's at.

When your surgeon operates, he or she might try to remove all problem tissue at the same time as the stage is being determined.

If your cancer is at an early stage this might be the only treatment you need.

If your cancer is at a more advanced stage you will probably also need treatment with drugs (chemotherapy) after surgery, to kill off any cancer cells that might have been left behind.

Some women have treatment the other way around - with chemotherapy first, followed by surgery. This is usually because they are not well enough to have surgery straight away.

This might be because they have another medical condition that is making them ill. These women will usually have chemotherapy to shrink their tumour as much as possible before surgery.

Surgery

There are two types of operation to check for and remove ovarian cancer. Whichever kind you have, you'll be given a general anaesthetic so that you'll sleep through it.

If you have **laparoscopic surgery** your surgeon makes two small cuts in your abdomen.

Tiny instruments and a camera are put through the cuts to get a close look at your ovaries, take samples of tissue (biopsies), and remove a cyst or other tissue or organ.

You should recover quicker from this surgery than from standard surgery. But if your surgeon finds cancer he or she might need to do a laparotomy (standard surgery).

During **standard surgery** your surgeon makes a large cut in your abdomen to look at your ovaries.

If your surgeon finds a tumour on your ovary that could be cancer he or she will probably remove your whole ovary. Surgeons do this because cutting away just a piece of the ovary could let cancer cells get out.

Your surgeon will send the tumour to the laboratory immediately to check if it is cancer. This is sometimes done during the operation.

If the laboratory finds that you have ovarian cancer your surgeon will try to remove as much of the cancer as possible to give you the best chance of staying well.

If your cancer has spread and is at an advanced stage, your surgeon might need to remove other affected organs, such as your womb (an operation to remove the womb, or uterus, is called a hysterectomy), your other ovary, and fallopian tubes. You might also need to have surgery on your bowel if it has been affected.

You'll probably need to stay in hospital for about one week after your operation.

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Some people have complications after surgery that mean they need more time in hospital. These complications include a lot of bleeding straight after your operation, blood clots in your legs, or just taking longer than usual to heal.

But once you've recovered from the operation you should be able to do all the things that you did before.

If you haven't already gone through the menopause you might get some of the symptoms of it after surgery, such as hot flushes, sweating at night, and a dry vagina, as well as thinning of your bones (osteoporosis). You can talk to your doctor about treatments for these problems.

Having ovarian cancer is a worrying time and you might need time to adjust to what is happening. You might not feel like having sex for some time. Let your partner know that you need support and understanding. It might help to talk to a counsellor about this.

Chemotherapy

Women whose cancer is at an early stage might not need chemotherapy after surgery. But many women need this treatment, which is intended to kill off any cancer cells left behind after surgery.

If you have chemotherapy you usually start the treatment about four weeks after your operation. You'll usually have between three and six treatments.

The chemotherapy is given through a tube that's inserted into a vein (an IV or intravenous drip). It's usually given during the day and you won't have to stay in hospital overnight for this treatment.

All chemotherapy can cause side effects in some women. Different cancer drugs can cause different side effects. But common ones include:

- anaemia (a reduction in the number of red blood cells you have, which can make you feel tired)
- temporary hair loss
- nausea and vomiting. You can have medicines to try and prevent this
- numbness and tingling in your hands and feet
- hearing problems
- tiredness
- being more prone to infections
- mouth sores
- loss of appetite.

In some women the cancer comes back after surgery and chemotherapy. It might be possible to have more chemotherapy. Some women with cancer at an advanced stage need to have chemotherapy injected directly into the abdomen as well as through an IV.

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