

## **NICE opens consultation on first ever guidelines to tackle ovarian cancer**

For the first time, national guidelines are being developed for the NHS in England and Wales to aid earlier diagnosis and promote more effective management and support specifically for women with ovarian cancer. Ovarian cancer is the fifth most common cancer in women with around 6,800 cases being diagnosed each year in the UK<sup>1</sup>.

The National Institute for Health and Clinical Excellence (NICE), which is developing this guidance, is today (24 September), publishing its draft recommendations for consultation. Charities, patient groups, NHS organisations and others who have registered an interest in this guideline, now have the opportunity to provide feedback on the proposed recommendations to help develop them further, ahead of the final guideline being published next year.

**Dr Fergus Macbeth, Director of the Centre for Clinical Practice at NICE and a practising oncologist, said:** “Overall survival rates for ovarian cancer are low – only around one in three women will live for at least five years after diagnosis. This is mainly because women who develop ovarian cancer and their GPs often only realise something may be seriously wrong when the cancer is advanced.

“Women can also experience delays between visiting their GP, seeing a specialist, getting a diagnosis and receiving treatment. This guideline will seek to overcome these hurdles to ensure women receive a diagnosis and subsequent treatment in a more timely manner. The earlier the cancer is identified, the more likely treatment is to be successful because it tackles the disease at a less advanced stage.”

The draft guideline, on which registered stakeholders can comment, focuses on the signs and symptoms of ovarian cancer, how best to detect the disease in a primary care setting (e.g. GP surgery), the most effective ways to establish a diagnosis and treat both early and advanced disease, and providing effective support and information to women who have been newly diagnosed. Recommendations include:

- Initiating tests in primary care if a woman (especially over the age of 50) reports having any of the following symptoms on a persistent and frequent basis – particularly more than 12 times per month:
  - persistent abdominal distension (women often refer to this as ‘bloating’)
  - difficulty eating and/or feeling full (early satiety)
  - pelvic or abdominal pain
  - increased urinary urgency and/or frequency
- Measuring serum CA125 levels<sup>2</sup> in women with symptoms suggestive of ovarian cancer. If serum levels are greater than 35 IU/ml, arrange for an ultrasound of the abdomen and pelvis to be carried out.
- If an ultrasound suggests ovarian cancer, performing a CT scan of the pelvis, abdomen and thorax to establish the extent of disease. Do not use MRI routinely for assessing women with suspected ovarian cancer.
- Do not include systematic retroperitoneal lymphadenectomy<sup>3</sup> as part of the standard surgical treatment of suspected ovarian cancer in women whose disease appears to be confined to the ovaries.
- Offering all women with newly diagnosed ovarian cancer information about psychosocial and psychosexual issues.

**Frances Reid, Director of Public Affairs for the charity Target Ovarian Cancer, is part of a group of experts who are helping to develop the NICE guideline.**

**She said:** “The development of this guidance by NICE is a major step forward. Never again should ovarian cancer be called a ‘silent killer’. The guidance, backed by a robust evidence base has the potential to help GPs make informed decisions about referrals and tests using up to date knowledge, and women understand when they should seek medical help. Of the women who responded to the Target Ovarian Cancer Pathfinder Study in 2009, a third waited more than six months for an accurate diagnosis, and a third did not have their emotional and practical support needs met. This means that the new guidance has the potential to impact positively on the lives of thousands of women, and further strengthens our recent work with the Department of Health and others to support GPs diagnosing this challenging condition. On publication of the final guidance, Target Ovarian Cancer will update the GP Online Continuing Professional Development module published by the BMJ that has already proved very popular - [www.targetovarian.org.uk/cpd](http://www.targetovarian.org.uk/cpd).”

Stakeholders wishing to submit their comments on the draft guideline are invited to do so via the [NICE website](#) by Friday 19 November 2010.

## Notes to Editors

### About ovarian cancer

- Key symptoms of ovarian cancer are<sup>4</sup>:
  - Persistent pelvic and abdominal pain
  - Increased abdominal size/persistent bloating – not bloating that comes and goes
  - Difficulty eating and feeling full quickly
- There are certain risk factors that may increase a woman's chances of developing ovarian cancer. These include:
  - Getting older
  - A family history of ovarian and/or breast cancer
  - Not having children
  - Hormone Replacement Therapy (HRT)
  - Being overweight
- The risk of ovarian cancer is lower in women who have:
  - Taken the contraceptive pill
  - Had children
  - Breastfed their children
  - Had their 'tubes tied' (tubal ligation) or had a hysterectomy

### About the guideline

- The draft guideline on ovarian cancer is available to view at: <http://guidance.nice.org.uk/CG/Wave17/22> (from Friday 24 September 2010)
- This guideline is being jointly developed with the National Collaborating Centre for Cancer

### About NICE

1. The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.
2. NICE produces guidance in three areas of health:
  - **public health** – guidance on the promotion of good health and the prevention of ill health for those working in the NHS, local authorities and the wider public and voluntary sector
  - **health technologies** – guidance on the use of new and existing medicines, treatments, procedures and medical technologies within the NHS
  - **clinical practice** – guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS.

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<sup>1</sup> Office for National Statistics. Cancer Statistics registrations: [Registrations of cancer diagnosed in 2007, England. Series MB1 no.38](#). 2010; ISD Online. [Cancer Incidence, Mortality and Survival data](#). 2010; Northern Ireland Cancer Registry. [Cancer Registrations in Northern Ireland, 2007](#). 2010; Welsh Cancer Intelligence and Surveillance Unit. [Cancer Incidence in Wales](#). 2010

<sup>2</sup> CA125 is a protein that is found in the blood. It is also called a bio-marker because it is produced by some ovarian cancers. Levels of CA125 are measured using a blood test. It is thought that around half of all women with early stage ovarian cancer will have raised CA125 levels in their blood.

<sup>3</sup> The term systematic retroperitoneal lymphadenectomy refers to the surgical removal of lymph nodes at the back of the abdomen.

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<sup>4</sup> The Department of Health: [Key messages for ovarian cancer for health professionals](#), February 2009.