

PRIMARY CARE 10 TOP TIPS



**WE ARE
MACMILLAN.
CANCER SUPPORT**

To aid early diagnosis of ovarian cancer for GPs

Evidence has shown that in women with potential symptoms of ovarian cancer there can be delays in seeking help from their GPs and also difficulties for GPs in making the diagnosis. This set of top tips was developed by doctors, in conjunction with people affected by ovarian cancer, to improve communication and reduce the potential for misunderstanding and delays.

To access free accredited online CPD modules about ovarian cancer symptoms visit targetovariancancer.org.uk/CPD

1 Some symptoms are particularly significant: take note of persistent bloating, pain in the pelvis or abdomen, early satiety or urinary urgency or frequency.

2 Less common symptoms experienced by women that could still indicate ovarian cancer include unexplained weight loss, changes in bowel habit, unexplained fatigue and loss of appetite.

3 Be alert for combinations of symptoms, or any single symptom, that is frequent, persistent and unusual for the patient, particularly if they occur more than two to three times per week (12 times in a month).

4 Consider asking your patient to use a diary to record the nature and frequency of their symptoms, this may help in assessing them. You or your patient can download Target Ovarian Cancer's Symptoms Diary at targetovariancancer.org.uk/symptomsdiary

5 A family history, both maternal and paternal, of not only ovarian but also breast cancer is significant.

6 Ovarian cancer may be misdiagnosed as Irritable Bowel Syndrome (IBS) or urinary infection. First presentation with IBS in the over 50s is rare and unexplained urinary symptoms can be an important early sign of ovarian cancer.

7 Any suspicious mass or suggestion of ascites on exam should trigger an urgent suspected cancer referral. However, remember, abdominal and pelvic examinations in women with symptoms are important but can miss ovarian cancer. Arrange a CA125 blood test and, if raised, request an urgent ultrasound scan. Consider an urgent ultrasound scan even if CA125 is normal but symptoms persist.

8 Both CA125 and ultrasounds can be falsely reassuring so always proactively reassess women (consider review within one month) and refer anyway if concern persists.

9 Be clear to the patient in what circumstances you might want to see them again. If you want to see the patient within a specific timescale, make the appointment there and then.

10 Practice nurses are ideally placed to give information about ovarian cancer symptoms and what steps should be taken if women have concerns at the time of a smear test. 47% of women mistakenly believe that a normal smear test rules out ovarian cancer.

For more information on symptoms and tests, go to targetovariancancer.org.uk/GP

This edition: February 2016
Next planned review: February 2018
To access a list of references we used for this publication please call 020 7923 5475.