



Federaal Kenniscentrum voor de Gezondheidszorg
Centre Fédéral d'Expertise des Soins de Santé
Belgian Health Care Knowledge Centre

Ovarian Cancer: diagnosis, treatment and follow-up

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Background information

- +/- 900 women every year in Belgium
- 2nd most frequent gynaecological tumour
- Typically spreads to peritoneal cavity and LN
- Relative 5-year survival: 46,9% (19% for stage IV disease)
- Quality project following this guideline

Methods

- **11 research questions:**
 - 6 questions: Dutch Cochrane Centre
 - 5 questions: KCE
- **GRADE**
- **Patient values and preferences:**
 - Literature review
 - Patient group Esperanza

Scope

- **Borderline and invasive epithelial ovarian, fallopian tube and primary peritoneal cancer**
- **Diagnosis and first-line treatment early and advanced stage ovarian cancer**
- **Follow-up after treatment**
- **Not included: screening, treatment of recurrent disease, bevacizumab**

Early stage

- **'Pelvic mass'**
- **Comprehensive surgical staging**
- **Adjuvant chemotherapy**

Malignant or benign?

- **IOTA simple rules & ADNEX model**
 - **Ultrasound**
 - **Tumour marker**
 - **Age, setting**
- **Intra-operative frozen section**

Early stage

Lymphadenectomy

- Not for borderline tumours (strong)
- Not for Gr I stage IA and stage I mucinous expansile type (weak)

Adjuvant chemotherapy

- Not for borderline tumours, micro-invasive tumours, low risk tumours



Early stage

Laparoscopy

- Can be considered in specific cases: small tumours, low risk for peritoneal spread

Advanced stage

- **Spread throughout the abdominal cavity**
- **Cytoreductive surgery (debulking)**
- **Chemotherapy**

Advanced stage

Surgery?

- Laparoscopy or DW-MRI
- Not PET-CT

Surgery: no macroscopic disease!

- Both for primary and interval cytoreductive surgery



Advanced stage

Primary surgery or neoadjuvant chemotherapy?

- Neoadjuvant chemotherapy if high tumour load, expected high morbidity or stage IV

Advanced stage

Intraperitoneal chemotherapy

- Not routinely recommended

Weekly (dose-dense) chemotherapy

- Can be considered



Follow-up: CA125

Routine CA125 measurement

- Asymptomatic raised CA125 no indication to start chemotherapy

Colophon

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