

How Do I Know My Risk of Ovarian Cancer?



Ultimately you must talk to your doctor to fully understand your individual risk for ovarian or any other cancer. The descriptions in the following Table provide some useful information to help you with that conversation.

RISK PROFILE

General Risk (1 in 70 women at this level will have ovarian cancer in her lifetime). You have...

- No family history of breast or ovarian cancer.
- No difficulty getting pregnant.
- Never taken hormone replacement therapy.

Slightly Increased Risk (up to 1 in 20 women at this level will have ovarian cancer in her life-time).

You have any of the following...

- A history of difficulty getting pregnant.
- A history of endometriosis.
- Taken hormone replacement therapy to help manage menopausal symptoms.

Moderately Increased Risk (up to 1 in 10 women at this level will have ovarian cancer in her lifetime).

You have any of the following...

- A close blood relation (i.e. mother, sister, daughter, grandmother, granddaughter, aunt or niece), on either your mother's or father's side of the family, who has had ovarian cancer at any age.
- Personally had breast cancer before age 45.
- Personally had breast cancer before age 50 and have at least one close relative who has had breast cancer prior to age 50 or ovarian cancer at any age.
- Two or more close relatives on the same side of the family (either your mother's or father's) that have had breast cancer before age 50 or ovarian cancer at any age.
- Eastern European (Ashkenazi) Jewish ancestry and you or a close relative, on either side of your family, has had breast cancer before age 50 or ovarian cancer at any age.

Very Increased Risk (up to 1 in 2 women at this level will have ovarian cancer in her lifetime).

You have had...

- Genetic testing indicating you have a cancer causing change (mutation) in either the *BRCA1* or *BRCA2* gene.

RECOMMENDATIONS

- Have a gynecological exam* once a year.
- **Talk to your doctor immediately if you experience bloating, pelvic or abdominal pain, difficulty eating or feeling full quickly, or urinary symptoms (such as urgency or frequency) which are new and occurring on an almost daily basis for 2-3 weeks.**

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- Talk to your doctor immediately if you experience bloating, pelvic or abdominal pain, difficulty eating or feeling full quickly, or urinary symptoms (such as urgency or frequency) which are new and occurring on an almost daily basis for 2-3 weeks.
- **Consider using birth control pills, after speaking with your doctor, if you are in the reproductive age group and have not had breast cancer.**

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- Talk to your doctor immediately if you experience bloating, pelvic or abdominal pain, difficulty eating or feeling full quickly, or urinary symptoms (such as urgency or frequency) which are new and occurring on an almost daily basis for 2-3 weeks.
- Consider using birth control pills, after speaking with your doctor, if you are in the reproductive age group and have not had breast cancer.
- **Talk to your doctor about genetic counseling and possibly genetic testing to help determine the best screening and prevention strategies.**

- Have a gynecological exam one to two times* per year.
- Talk to your doctor immediately if you experience bloating, pelvic or abdominal pain, difficulty eating or feeling full quickly, or urinary symptoms (such as urgency or frequency) which are new and occurring on an almost daily basis for 2-3 weeks.
- Consider using birth control pills, after speaking with your doctor, if you are in the reproductive age group and have not had breast cancer.
- **Have both annual mammograms and annual breast MRIs beginning at age 25-30.**
- **Have both a transvaginal ultrasound and the CA125 blood test two times per year starting at age 30-35 until the ovaries and fallopian tubes are removed preventively.**

* It is important to know that a Pap smear only screens for cervical cancer and does not screen for ovarian cancer.

Disclaimer

The information on this website is designed to aid women in making decisions about appropriate gynecologic care and does not substitute for evaluations with qualified medical professionals familiar with your individual circumstances. This website should also not be construed as dictating an exclusive course of treatment or procedure. Variations in practice may be warranted based on the needs of the individual woman, resources, and limitations unique to the institution or type of practice.

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