Ovarian Cancer

LOW RISK

Cancer is a common disease that affects 1 in 3 individuals. It is not uncommon to see more than one person in a family with cancer. Ovarian cancer is less common, affecting 1 in 80 women. Most, 90-95%, is sporadic and occurs by chance. It is likely that only 5-10% of the disease occurs because of an inherited predisposition, and it is mainly in these families where there may be an increased risk to relatives.

In families where there is an inherited predisposition cancer tends to occur at a younger age; the same type of cancer may affect several family members; there may be a combination of ovarian cancer and breast cancer or less commonly bowel cancer; an individual may have two different cancers. There is no easy way at present to be sure whether cancer in a family is genetic or not, and we are mainly guided by the number of people in the family who have had cancer, and at what ages it developed.

From your family history we would consider you to be at low added risk of developing ovarian cancer. This is because there is only 1 person affected in your family, or they are only distantly related, or they are on different sides of the family. Thus the chance that there is a predisposition gene in your family to explain this is low. It is more likely that what has happened is due to chance.

This means that your own risk of developing ovarian cancer is increased only a little, if at all. Because of this, we would not normally suggest you need any ovarian screening. We would, though, suggest you get back in touch with the genetics department should there be any change in your family history.

Some people having seen a close relative with ovarian cancer request ovarian screening even though they are not at much increased risk. Although this might seem like a good idea, unfortunately we do not yet have a good way of offering early detection of ovarian cancer. This has been attempted by a combination of ultrasound scanning and blood tests, but both of these tests can give apparently abnormal results which are not in any way related to ovarian cancer, but can cause a lot of anxiety before this is clear. Some women might even have unnecessary surgery to remove the ovary which turns out to have no serious abnormality.

Thus even for women at higher risk, we are not yet sure whether screening has anything to offer. It is still being evaluated as part of a UK wide study, which focuses on women at higher risk as they have 2 close relatives affected by ovarian cancer, or a combination of ovarian and young onset breast cancer in their families. There have already been studies looking at women at lower risk which have suggested the currently available screening is unlikely to be helpful for them.

Possible protective factors are not yet fully understood, but having children and breast feeding are protective to some extent. The oral contraceptive pill also reduces the risk significantly, and HRT does not appear to have any effect either way. A diet high in fresh fruit, vegetables and fibre without too much fat, regular exercise, moderate alcohol and avoiding obesity are all associated with lower risks of cancer. Some people who do all these things still get cancer so there is no way of being certain of avoiding the disease.

You may wonder why you have not been offered a genetic test. Although it is not likely there is a predisposition gene in your family, a test which could prove the ovarian cancer was not genetic might be helpful even in low risk families. Unfortunately this is not possible. We do not know all the ovarian cancer genes yet, so even if we tested your family for all those known, it would not be possible to prove that the cancer is not genetic.
If you have any further questions or you would like another appointment to discuss any of the points raised please contact:

Cancer Genetics Counsellors  
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Familial Ovarian Cancer

Low Risk Families

Information Leaflet