

EP02.13 Transvaginal color Doppler ultrasound in early diagnosis of ovarian cancer ourexperience since 1999

MA. Pascual¹, B. Graupera¹, JL Alcázar^{2,4}, I. Rodriguez¹, B. Valero¹, M. Vila ¹. and S. Guerriero³.

1 Department of Obstetrics, Gynecology and Reproduction. Hospital Universitari Dexeus. Barcelona, Spain.

2 Obstetrics and Gynecology, Hospital QuironSalud Malaga, Andalucía, (Spain).

3 Department of Obstetrics and Gynecology, University of Cagliari, Policlinico Universitario Duilio Casula, Cagliari, Italy.

4 Obstetrics and Gynecology, University of Navarra, Pamplona (Spain).

Objectives

Ovarian cancer mortality remains high mainly due to late diagnosis. Since 1999, we have performed color Doppler transvaginal (CDTV) ultrasound to screen for ovarian cancer. The purpose of this paper is to assess the efficiency of CDTV ultrasound to detect ovarian cancer in early stages.

Methods

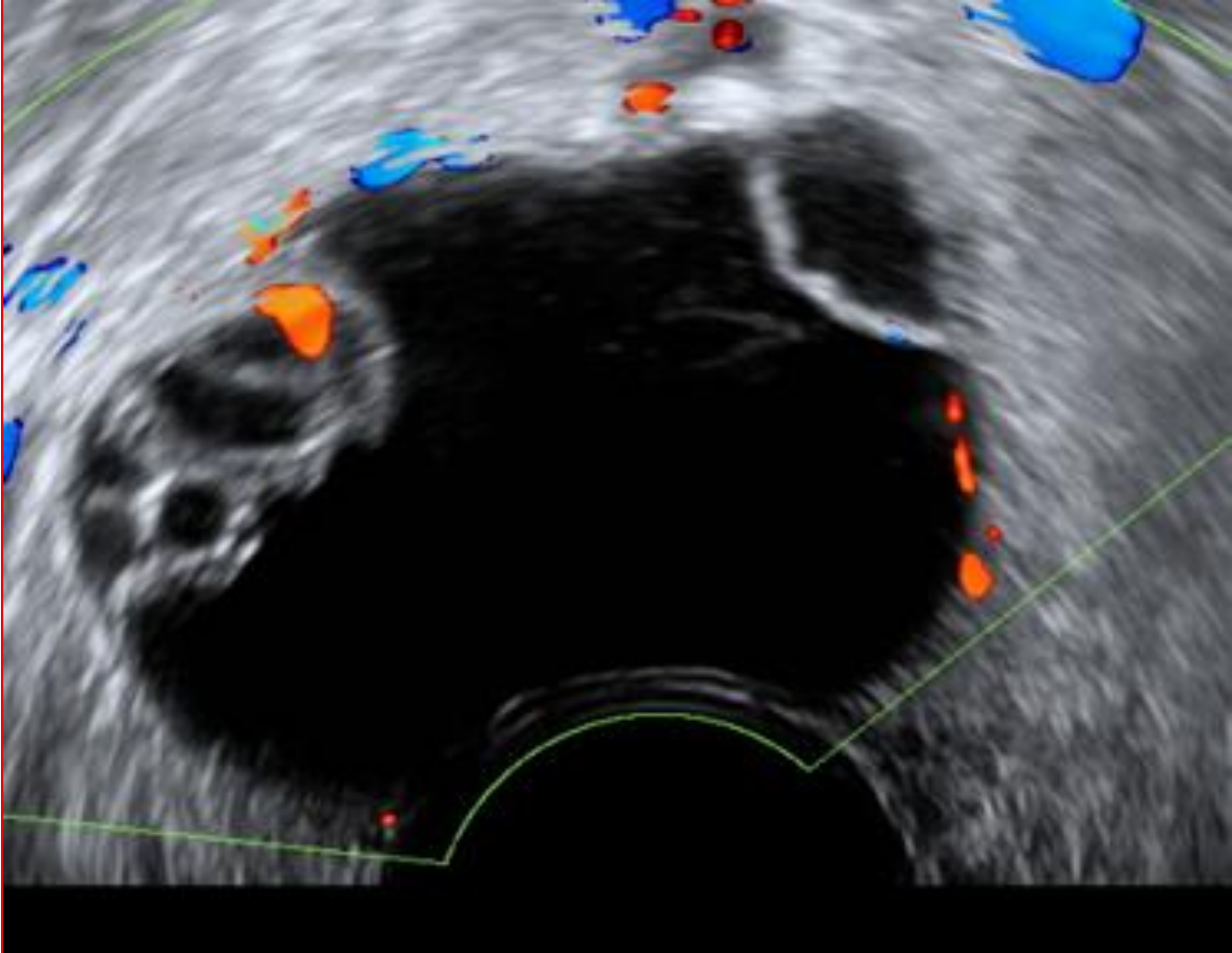
Screening by CDTV ultrasound was annually performed in asymptomatic women with no family history of ovarian cancer. Women with abnormal screenings had repeat tests after four to six weeks. If the finding remitted, CDTV ultrasound follow-up was performed at one year. If the abnormality persisted, the study was completed with tumor markers, CT scan, and laparoscopy.

Results

A total of 897.532 CDTV ultrasound screenings performed in 221.340 women were reviewed. Malignant tumors were diagnosed and histologically confirmed in 142 patients. Borderline lesions were detected in 66 of them (48 %). The mean age of the patients was 47 years (± 12). One hundred and one (73,7 %) of these tumors were in stage I (including two cases of Fallopian tube carcinoma); nine were in stage II; twenty-seven were in stage III; and five lesions detected were metastases. Fifty-eight percent of the patients had normal levels of CA 125, measured after the lesions were detected by CDTV ultrasound study.

Conclusion

Although consensus about the benefits of transvaginal ultrasound as a screening procedure is not unanimous, our data suggest that tumors in patients screened with CDTV ultrasound are detected at earlier stages. Additional randomized studies are needed to support these findings.



Borderline serous tumor. Stage Ic

