



Prevention

Ovarian Cancer Awareness Month September 2020

REDUCING OVARIAN CANCER MORTALITY During the COVID PANDEMIC

Note to Readers: Non-acute medical visits have dropped sharply because of the COVID pandemic and fear of virus exposure. As a result, preventive care has been postponed. We have added information about optimizing cancer prevention while minimizing virus risk.

Ovarian Cancer Prevention amid COVID

Screening: Do not screen. Likely harmful (USPSTF D rating, updated February 2018).

Primary Prevention: Exercise and healthy dietary changes are difficult but compatible with social distancing. Low dose aspirin may reduce risk. Genetic counseling, risk assessment and preventive oophorectomy depend on personal cancer history that reduced primary care may delay.

Summary: Screening modalities for ovarian cancer were ineffective in trials. Cancer prevention now focuses on surgical risk reduction in high-risk women, especially those with **germline BRCA1 or BRCA2 mutations**. Low dose aspirin may reduce ovarian cancer risk.

SCREENING and PREVENTION GUIDELINE UPDATES

Screening: Most recent US Preventive Services Task Force in February 2018. **Recommendation against screening (grade D).**

Risk assessment: Genetic counseling for patients with **ovarian cancer**, any **breast cancer before age 45** or **triple-negative breast cancer before age 60**. Women with **family history of breast, ovarian, tubal or peritoneal cancer** should **undergo risk assessment**.

Prevention: BRCA-mutation-positive patients may consider **preventive oophorectomy** to prevent ovarian cancer.

OVARIAN CANCER SCREENING

Conventional screening methods, including pelvis ultrasonography, bimanual palpation of ovaries¹ and the CA-125 blood test, were found ineffective in the US Prostate, Lung, Colorectal and Ovarian Cancer (PLCO) screening trial.² All three interventions caused substantial harm from overtreatment. Alternative strategies include a 2-stage screening process and novel markers.

OVARIAN CANCER PRIMARY PREVENTION

Preventive oophorectomy is more effective than ultrasonography screening. In a prospective study of BRCA1-mutated women the 10-year mortality was 4-fold less after oophorectomy than after screening.³ In the PLCO study, women receiving low-dose aspirin appeared to have a reduced ovarian cancer risk.⁴

Authors: James A. Talcott MD, SM, Senior Scientist **Strang** Cancer Prevention Institute
Michael P. Osborne MD, MSurg, FRCS, FACS President **Strang** Cancer Prevention Institute

REFERENCES:

1. Doroudi M, Kramer BS, Pinsky PF. The bimanual ovarian palpation examination in the Prostate, Lung, Colorectal and Ovarian cancer screening trial: Performance and complications. *Journal of medical screening* 2017;24:220-2.
2. Buys SS, Partridge E, Black A, Johnson CC, Lamerato L, Isaacs C, et al. Effect of screening on ovarian cancer mortality: the Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Randomized Controlled Trial. *JAMA* 2011;305:2295-303.
3. Gronwald J, Lubinski J, Huzarski T, Cybulski C, Menkiszak J, Siolek M, et al. A comparison of ovarian cancer mortality in women with BRCA1 mutations undergoing annual ultrasound screening or preventive oophorectomy. *Gynecol Oncol* 2019.
4. Hurwitz LM, Pinsky PF, Huang WY, Freedman ND, Trabert B. Aspirin use and ovarian cancer risk using extended follow-up of the PLCO Cancer Screening Trial. *Gynecol Oncol* 2020.

The Strang Cancer Prevention Cookbook

Peach and Blueberry Crisp

Reduce your Risk for Cancer by Eating a Healthy Diet!

Peach and Blueberry Crisp * 6 Servings



6 medium peaches, peeled, pitted, and cut into large chunk's, 2 cups blueberries, 1/4 cup plus 1 tablespoon all- purpose flour, 1/3 cup granulated sugar, juice 1/2 lemon, 1/2 cup quick cooking cereal, 1/4 cup packed brown sugar, 1/2 teaspoon ground cinnamon, 2 table- spoons melted unsalted butter. Vanilla frozen yogurt, optional.

Preheat oven to 375 F. Spray a baking/casserole dish, at least 6 cup capacity, with canola oil/cooking spray or lightly rub w canola oil.

In a medium bowl, combine peaches, blueberries, 1 tablespoon of flour, sugar and lemon juice. Toss with your hands to combine thor- oughly. Spread the fruit out in the baking pan. In a separate bowl, prepare the topping. Mix together the oatmeal, remaining 1/4 cup of flour, brown sugar and cinnamon. Drizzle with the melted butter, and then rub the topping together with you hands until it resembles a coarse meal. Entirely spread the topping over the fruit and bake for 35 minutes or until the fruit is bubbling and the topping is browned lightly. Remove and let cool slightly. Serve warm or room temperature. Top with vanilla frozen yogurt.

Calories 261, Protein 3 g, Carbohydrates 49 g, Fat 6 g, Cholesterol 5 mg, Dietary fiber 4 g Saturated fat 3 g

Major sources of Potential Cancer fighters: Phytochemicals: plant polyphenols (flavonoids, phenolic acids), terpenes (carotenoids)

Source: cookbook page 307.

Recipe by Laura Pensiero, R.D., **Strang** Nutrition Consultant
Chef, Dietitian, Restaurateur, Author
Owner, Gigi Hudson Valley (Trattoria & Catering) Rhinebeck, New York

THIS NEWSLETTER IS DEDICATED TO DIANNE TASHMAN ZOLA

The Dianne Zola Ovarian Cancer Research Fund was established in 2014



September is Ovarian Cancer Awareness Month

 **Strang** Cancer Prevention Institute

575 Madison Avenue 10th Floor
New York, NY 10022
Tel: (212) 501-2111 www.strang.org

Editor | Research Associate
Merle K. Barash MA AEd, MA Psya

© **Strang Cancer Prevention Institute**