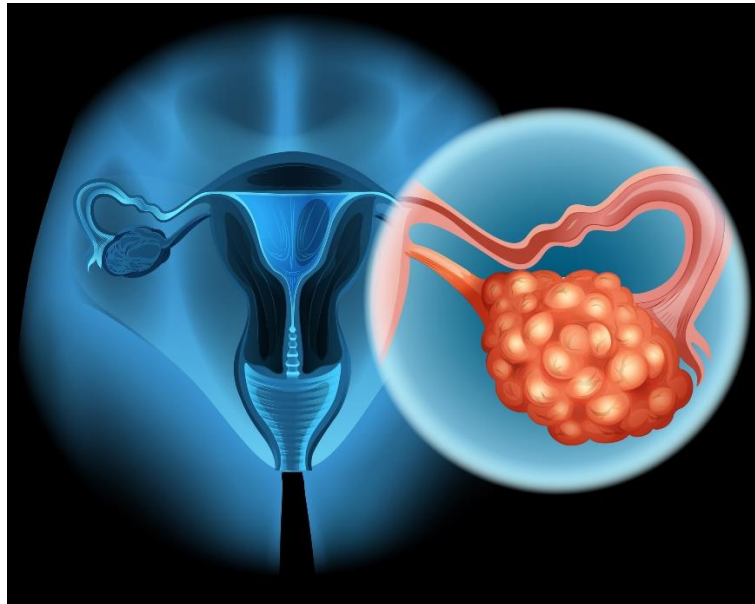


English for Nurses: Ovarian Cancer



Answers

Part 1: Vocabulary: ovarian cancer and its treatment

1. prognosis
2. targeted therapy
3. Survival
4. postmenopausal
5. relapse
6. debulking
7. tumour resection
8. BRCA mutation

Part 2: Reading

Match the terms from the vocabulary list with their correct meanings

- (1) postmenopausal
- (2) prognosis
- (3) relapse
- (4) survival
- (5) BRCA mutations
- (6) debulking
- (7) targeted therapy
- (8) tumour resection

Part 3: Listening

1. True
2. False
3. True
4. True
5. False
6. True

Video transcript

Ovarian cancer has a high mortality rate because it is so often diagnosed at a very late stage. A new study suggests that detection rates can be significantly improved by screening for a specific set of proteins in the bloodstream. This could mean detection of ovarian cancer up to two years before current screenings allow. Over 7,000 women are diagnosed with ovarian cancer each year in the UK with over 4,000 women losing their lives from the disease each year. If ovarian cancer is diagnosed at the earliest stage, 9 in 10 women will survive. But two thirds of women are diagnosed late, when the cancer is harder to treat. Unfortunately, nearly half of UK doctors mistakenly believe the symptoms of ovarian cancer are only present in the later stages of the disease.

A new blood test has been developed by the Hudson Institute of Medical Research to improve ovarian cancer diagnosis. The test is being commercialised by an Australian company, Cleo Diagnostics Ltd. and has the potential to reduce unnecessary surgery and improve health outcomes. The blood tests are supported by a biomarker called CXCL10 which is produced early and at high levels by ovarian cancers, but not in non-malignant disease development.

Cleo Diagnostics is planning initial clinical triage use in 2025 during which time they will focus on improving outcomes for patients who have ovarian cancer. They also aim to eliminate the need for unnecessary diagnostic surgery for women with non-cancerous conditions. In addition to surgical triage, Cleo Diagnostics will evaluate the effectiveness of the technology for disease recurrence following surgery. The ultimate aim is to develop broader screening applications in the general population.

There is still no accurate and reliable detection test for ovarian cancer, as the cervical smear test does not detect this type of cancer. Unfortunately, ovarian cancers are often indistinguishable from commonly occurring, non-cancerous disease. The current diagnostic investigation uses a combined blood test of the protein CA125 with an ultrasound. The CA125 marker is not reliable as a marker for cancer in the blood as it can also be elevated at other times, for example during pregnancy, menstruation or other non-cancerous conditions such as endometriosis. In addition, studies have shown that the marker is only elevated in around 50% of early stage cancers.

At present, the only way for a definitive diagnosis to be made is to remove the ovaries and examine them for malignant disease. This can lead to an unnecessary cancer scare and undue anxiety and trauma, if cancer is not detected. In contrast, the CLEO surgical Triage Test is a simple blood test that accurately distinguishes

benign from malignant disease without surgical intervention. Apart from the benefit of patients having an accurate diagnosis before surgery is considered, the test may result in early referral to gynaecological oncology treatment in the case of malignancy. It should also result in appropriate conservative management strategies for patients who have been cleared of ovarian cancer diagnosis. It is suggested that this should lead to streamlining of the referral process and a better use of health resources.