Each year, about 20,000 women in the United States get ovarian cancer.¹ In 2009, there were 136 new ovarian cancer cases and 95 ovarian cancer deaths in Nevada. Among women in the Nevada, ovarian cancer is the tenth most common cancer and the fifth leading cause of cancer death, after lung and bronchus, breast, colorectal, and pancreatic cancers. Ovarian cancer causes more deaths than any other cancer of the female reproductive system, but it accounts for only about 2.5% of all cancers in women.

Ovarian Cancer is cancer that begins in the ovaries. It is important to detect ovarian cancer when it is in its early stages, because that is when treatment is most effective.

Symptoms of ovarian cancer include: irregular vaginal bleeding or discharge, pain in the pelvic or abdominal area (the area below the stomach and between the hip bones), back pain, bloating (when the area below the stomach swells or feels full), feeling full quickly while eating, a change in bathroom habits, such as having to urinate very badly or very often, constipation, or diarrhea.¹ If symptoms which could suggest ovarian cancer are present, a doctor should be contacted. The earlier ovarian cancer is detected and treated, the more likely treatment will be effective.¹

Most women who get ovarian cancer are not at high risk. However, several factors may increase a woman’s risk for ovarian cancer. These include: age; a close family member (mother, sister, aunt, or grandmother) who had ovarian cancer; a genetic mutation (abnormality) called BRCA1 or BRCA2; breast, uterine, or colorectal (colon) cancer; Eastern European (Ashkenazi) Jewish background; never given birth; trouble getting pregnant; endometriosis (a condition where tissue from the lining of the uterus grows elsewhere in the body). In addition, some studies suggest that women who take estrogen by itself (without progesterone) for 10 or more years may have an increased risk of ovarian cancer.¹

There is no known way to prevent ovarian cancer. However, having given birth, used birth control pills for more than five years, had a tubal ligation (a procedure where both ovaries are removed), or had a hysterectomy may lower your chance of getting ovarian cancer.¹
Nevada's ovarian cancer incidence rate is decreasing. From 2000 to 2009, the age-adjusted ovarian cancer incidence rate dropped by 38%. This overall decrease was seen among White non-Hispanic, Black non-Hispanic, and Hispanic* residents in all regions of Nevada.

For additional information and support regarding ovarian cancer, contact:

Ovarian Cancer Awareness Network (OCAN)
(702) 796-0430
ovarian@ocan.org

The Ovarian Cancer Awareness Network (OCAN) is a nonprofit organization committed to raising awareness regarding the symptoms, risk factors and facts about ovarian cancer in the state of Nevada. OCAN also offers support for ovarian cancer patients and survivors. OCAN’s goal is to save women’s lives by increasing the rate of early detection.

Ovarian Cancer Support Group
6:00-7:30pm, 1st Tuesday monthly
The Caring Place
4425 S Jones Blvd Ste 1
Las Vegas NV 89103
(702) 871-7333

Requests for additional information can be made to:
Kyra Morgan, Biostatistician II, Office of Public Health Informatics and Epidemiology
kmorgan@health.nv.gov  | (775) 684-5965