

Ovarian Neoplasm

An ovarian neoplasm is an abnormal growth of tissue on an ovary. This occurs when cells grow and divide faster than they should. Ovarian neoplasms are different from ovarian cysts. Ovarian cysts are due to hormones, are very common, and usually go away on their own.

Symptoms

Ovarian neoplasms may or may not have symptoms. It's often found by a doctor or health care provider during an abdominal exam, or when imaging is done for something else. Some symptoms may be:

- Pain
- Bladder or bowel symptoms
- Belly (abdominal) swelling or bloating

Testing

Before your doctor or health care provider decides on treatment, they need to find out how high the risk is for the mass being malignant (cancer). This involves radiology testing and blood tests. The tests measure ovarian tumor markers. When elevated these tumor markers are sometimes a sign of cancer. The radiology tests may include:

- Pelvic ultrasound
- CT scan
- MRI (magnetic resonance imaging)

The mass may be malignant if the tests show:

- A large neoplasm
- Solid growths in the neoplasm
- Enlarged lymph nodes
- Spread into nearby organs

Different types of cancerous ovarian masses cause different elevated patterns in the tumor marker levels. This helps your child's doctor or health care provider understand more about their ovarian neoplasm.

Treatment

Surgery is usually needed to remove an ovarian neoplasm. The type of surgery to have is decided based on the risk of cancer.

Suspected non-Cancer Neoplasms

- Ovarian sparing surgery – This surgery removes the ovarian mass and leaves the healthy ovary in place. This is effective in treating ovarian neoplasms that are not cancerous (benign). Depending on the size of the mass, ovarian sparing surgery is done either by laparoscopy with several small cuts (incisions) or laparotomy with a bigger incision on the belly (abdomen).

Cancerous Neoplasms

If your child has cancer, their doctor or health care provider will recommend surgical staging. This involves:

1. Making an incision on the abdomen.
2. Collecting fluid from the abdomen that will be tested for cancer cells.
3. Removing the entire ovary and fallopian tube on that side of the body. The surgeons will not remove the uterus or healthy ovary on the opposite side.
4. Examining the abdomen and pelvis for any enlarged lymph nodes or signs of disease spread. If any are suspected as cancerous, the surgeon will do a biopsy or cut out that tissue or part of that organ (resection).

Follow-up

The type of follow up needed depends on whether the neoplasm was cancer. Most people don't need any more surgery after their ovarian neoplasm is removed.

- If your child had a mass that was not cancer, the benign neoplasm doesn't usually come back. However, if they have any symptoms, let their doctor or health care provider know. They may order testing, like an ultrasound, to check.
- If your child was treated for a malignant ovarian mass, they:
 - May need more medical treatment, including chemotherapy.
 - Will need to have routine ovarian tumor marker testing and CT or MRI testing.
 - Will be watched closely by their medical team.

If you have questions, please ask your child's doctor, health care provider, or surgeon.