Ovarian Cancer

A Fact Sheet from the North Carolina Central Cancer Registry, State Center for Health Statistics

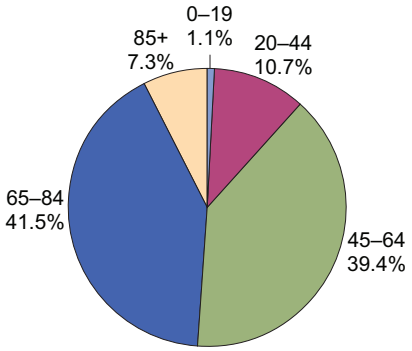
June 2011

Cancer of the ovary was the 14th most frequently occurring and the 9th leading cause of cancer death in North Carolina from 2004 to 2008. It is anticipated that 682 females in North Carolina will be diagnosed with and 455 females will die of cancer of the ovary in 2011.

Incidence

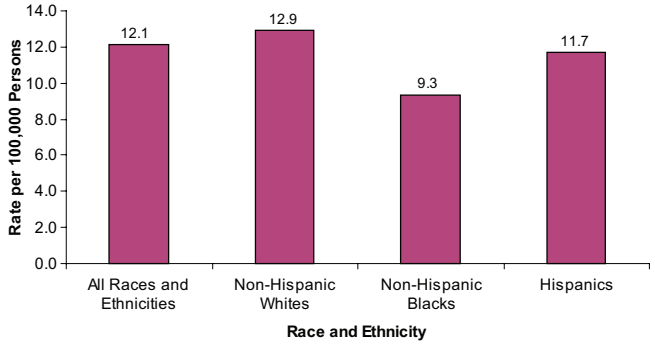
The percentage of cases of ovarian cancer from 2004 to 2008 is displayed by age group in Figure 1. More than half of ovarian cancer cases were diagnosed in women under the age of 65.

Figure 1.
2004–2008 Percent of Ovarian Cancer Cases by Age Group



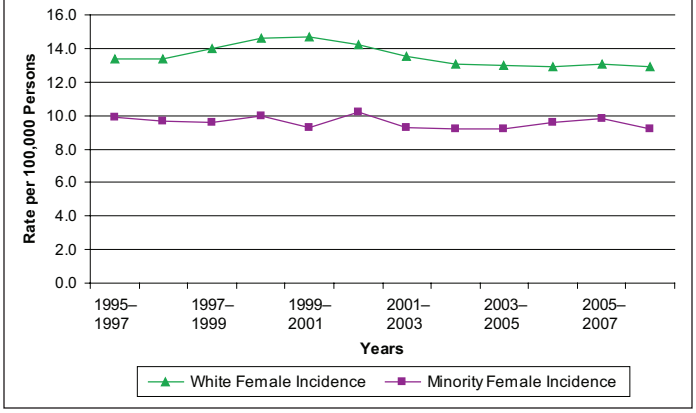
Between 2004 and 2008, the age-adjusted incidence rate for ovarian cancer in North Carolina was 12.1 per 100,000 females per year (Figure 2). Non-Hispanic black women were less likely to be diagnosed with ovarian cancer than women of other races and ethnicities.

Figure 2.
2004–2008 Ovarian Cancer Incidence Rates by Race and Ethnicity



From 1995 to 2008, ovarian cancer incidence rates have remained fairly stable for white and minority women (Figure 3).

Figure 3.
1995–2008 Ovarian Cancer Incidence Trends by Race

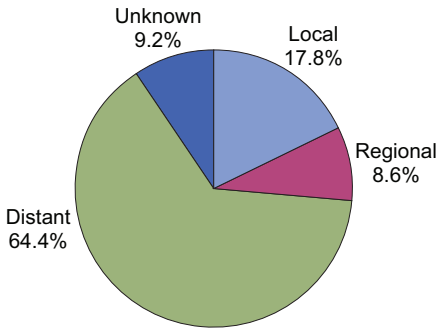


State of North Carolina | Beverly Eaves Perdue, Governor | www.ncgov.com
Department of Health and Human Services | Lanier M. Cansler, Secretary | www.ncdhhs.gov
North Carolina Division of Public Health | Jeffrey P. Engel, State Health Director | www.publichealth.nc.gov
State Center for Health Statistics | Karen L. Knight, Director | www.schs.state.nc.us/SCHS

Stage at Diagnosis*

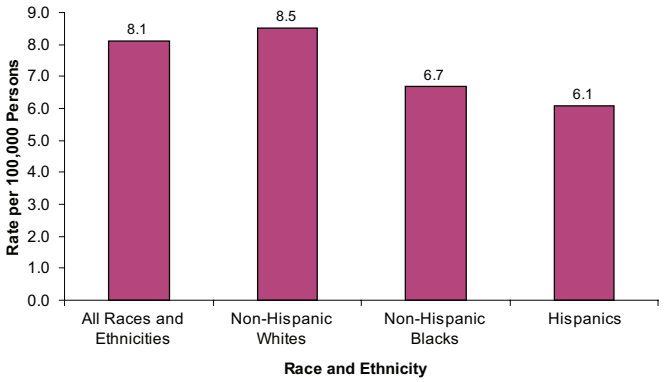
Figure 4 shows the stage distribution of ovarian cancer cases diagnosed between 2004 and 2008. Nearly 65 percent of ovarian cancer cases were diagnosed at the distant stage.

Figure 4.
2004–2008 Percent of Ovarian Cancer Cases by Stage



The age-adjusted mortality rate of ovarian cancer from 2004 to 2008 was 8.1 per 100,000 females per year (Figure 6). Non-Hispanic white women were more likely to die from ovarian cancer than women of other races and ethnicities.

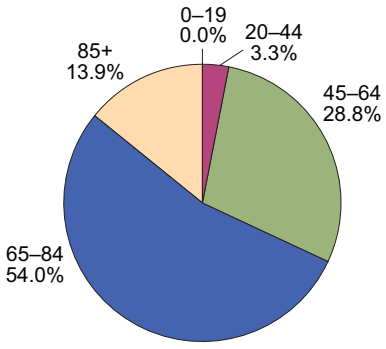
Figure 6.
2004–2008 Ovarian Cancer Mortality Rates by Race and Ethnicity



Mortality

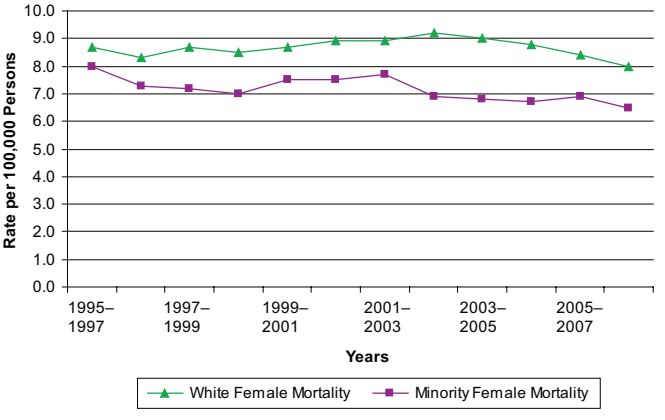
Almost 30 percent of deaths occurred in women ages 45 to 64. Figure 5 shows the percentage of deaths that occurred between 2004 and 2008 displayed by age group.

Figure 5.
2004–2008 Percent of Ovarian Cancer Deaths by Age Group



From 1995 to 2008, ovarian cancer mortality rates have remained fairly stable for white women and have decreased for minority women (Figure 7).

Figure 7.
1995–2008 Ovarian Cancer Mortality Trends by Race



Data Sources and Methods

Data on North Carolina cases were obtained from the North Carolina Central Cancer Registry (CCR). Hospitals are the primary source of data. The CCR supplements hospital data with reports from physicians who diagnose cases in a non-hospital setting. The CCR also collects data from pathology laboratories and freestanding treatment centers. Data on cancer deaths were obtained from Statistical Services in the State Center for Health Statistics. Population data from the National Center for Health Statistics were used in the denominators of the rates, which are expressed per 100,000 persons. Rates were age-adjusted using the 2000 United States Census data. To examine trends, three-year overlapping rates were used to improve stability over time. Stage at diagnosis was defined according to Surveillance Epidemiology and End Results Summary Stage guidelines as *in situ,* localized, regional, distant, and unknown/NA. For further information about the NC CCR, please visit www.schs.state.nc.us/SCHS/CCR.

* According to the National Cancer Institute (NCI), "many cancer registries, such as NCI's Surveillance, Epidemiology, and End Results Program (SEER), use summary staging. This system is used for all types of cancer. It groups cancer cases into five main categories: **In situ**—Abnormal cells are present only in the layer of cells in which they developed. **Localized**—Cancer is limited to the organ in which it began, without evidence of spread. **Regional**—Cancer has spread beyond the primary site to nearby lymph nodes or organs and tissues. **Distant**—Cancer has spread from the primary site to distant organs or distant lymph nodes. **Unknown**—There is not enough information to determine the stage." Additional information on staging can be found at www.cancer.gov/cancertopics/factsheet/detection/staging.