

Would you have your ovaries removed to prevent cancer?

Emma and Janet did, even though they were in perfect health, and now doctors say more women at risk should follow their example

Emma Parlons:
'I did it for my children'

European) Jewish heritage are more likely to have mutations in these genes than members of the general population.'

At first, Emma decided she would rather live in blissful ignorance, but when her father tested positive for the gene — meaning Emma had a 50/50 chance of carrying it herself — she changed her mind. 'I realised how selfish my original decision was. As the mother of a daughter aged six and a son aged five, if I could do something to drastically reduce the chances of getting sick, surely I should do that?'

Emma tested positive for BRCA gene mutation in 2009.

'I visited several top consultants and felt that my first move was to have a pre-emptive mastectomy in January 2010,' she says. 'I remember hearing about women having these operations years ago and thinking they were crazy. But once I'd had it done, I felt so empowered. The next

step — to have an oophorectomy — was even easier. My husband, Jeremy, and I knew we didn't want more children and so I couldn't honestly see a reason to keep my ovaries.

'It was a really easy keyhole operation and I would encourage any woman who is concerned about it to have it done. I'm now on a plant-based HRT which sorts out the hot flushes and other menopausal symptoms and I feel absolutely fine.'

Of course, there are risks. Healthy ovaries produce oestrogen and progesterone. As oestrogen helps protect women against heart disease it's thought that removing them may put women at a higher risk of cardiovascular problems.

Indeed, a study reported in The Journal Of Obstetrics And Gynaecology in 2009 found that although ovarian cancer was reduced, the risk of a woman developing heart disease and stroke nearly doubled.

What's more, an American study in 2008 found that removing healthy ovaries may increase the risk of dementia in later life, although other studies have contradicted this.

'There is a lot of conflicting data out there and in my opinion every woman needs to evaluate the risk and the benefits very carefully,' says consultant gynaecologist and oncologist Mr Khalil Razvi. 'But

what you need to remember is that there is no way to detect ovarian cancer in the early stages. However, there are ways to screen for the other risks such as heart disease and osteoporosis and ways to manage them if you do develop them.

'As for dementia, there is not enough evidence to say that having your ovaries removed increases your risk. But family history of such conditions is something that every patient needs to consider if they are thinking of having the operation.'

These risks didn't put off Janet Bailey from having the surgery. The 43-year-old teacher from Warrington, Cheshire, lost her grandmother Evelyn in 1981 and her mother Jacqueline last December to the disease.

JANET says she feels nothing but relief that her own daughters, Jessica, 20, Emily, 18, and Sophie, 17, will not lose their own mum to ovarian cancer because she had her organs removed.

'I was young when my grandmother got it,' says Janet. 'I remember her looking like she was pregnant — a swollen abdomen is one of the symptoms of the disease — but she never spoke about it.

She had a full hysterectomy and chemotherapy but died aged 60 a year later. It was only in 2005 when my own mum was diagnosed with the same thing at the age of 59 that we realised there could be a link and we were referred to the genetics department at Alder Hay hospital in Liverpool.'

Both women tested positive for a protein called CA 125, which is often found in women with ovarian cancer. 'Mum's levels were very high and mine were reasonably high, so we knew I was at risk too,' says Janet. 'I was given several options by the doctors, but one look at Mum going through her chemotherapy made me opt for the full hysterectomy.'

'I woke up from the operation and the first thing that hit me was the hot flushes,' remembers Janet. 'At first I thought it was just the fact that the hospital was warm and I was laying on plastic sheets but it was the menopause kicking in straight away.'

'I remember thinking: "What on earth have I done to myself?" Plus, I later found out that the biopsies of the ovaries were completely healthy. There was no sign of cancer at all. It took around ten weeks for me to feel like myself again, when the doctors had sorted out the HRT.'

After four years, though, Janet has no regrets at all. 'We were devastated when Mum died but



Janet Bailey:
Fears of inherited illness

the legacy she has left is that the whole family are very much aware of what we might be up against in the future.

'Mum did such a great job raising awareness with the North West Cancer Research Fund charity and it means my girls — her granddaughters — are now in a position to make the decision for themselves as to whether they get tested in the future.'

'The current rules at our hospital are that you can't be tested for CA 125 until you are over 35, but at least they now have the option. It will affect their lives in so many ways.'

'It might mean that they decide to have their children earlier because they know they might have to face this in their late 30s. Although that's horrible to think about now, at least we are forewarned and forearmed.'

■ www.targetovariancancer.org