

# Borderline ovarian tumors

*Patient Information Series – What you should know, what you should ask.*

## **What are borderline ovarian tumors?**

Borderline ovarian epithelial tumors are non-invasive neoplasms that occasionally have intraperitoneal spread and they have characteristics and an intermediate behavior between benign and malignant ovarian tumors. These tumors occur in women of all ages; one-third of patients diagnosed with a borderline ovarian tumor are younger than 40 years old. They generally occur as unilateral cystic lesions (less frequently bilateral or multifocal even in the same ovary).

## **What are the symptoms?**

Borderline ovarian tumors are often asymptomatic, and they are usually diagnosed during a routine gynecological ultrasound examination. Symptoms, if present, can be pelvic pain, irregular periods discomfort and constipation.

## **Should I have more tests done?**

Ultrasound exam is the first imaging approach. Tumor markers CA125 is performed at diagnosis and during follow up.

Other blood tumor markers can be required in case of specific tumor histotypes (e.g. CA19.9 in case of mucinous borderline tumor).

## **Which is the best treatment?**

Surgery is the treatment of choice. Fertility sparing surgery in case of young patients is safe and feasible. The preferred surgical approach is laparoscopy. No further treatments (chemotherapy or radiation therapy) are required after surgery. Patients after conservative surgery must perform clinical, ultrasound and biochemical (Ca125) follow-up.

## **What other questions should I ask?**

- Could the tumor relapse?
- Could I have a spontaneous pregnancy after conservative surgery?

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