

P-06-1236 Women should be regularly screened with a blood test called CA125 to detect for ovarian cancer

Y Pwyllgor Deisebau | 24 Ionawr 2022
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Petition title: Women should be regularly screened with a blood test called CA125 to detect for ovarian cancer

Text of petition:

Women should be regularly screened with a blood test called CA125 to detect for ovarian cancer

My Mother has recently been diagnosed with primary ovarian cancer and secondary in her peritoneum. If women were regularly screened with the blood test CA125 they would be able to detect early signs like they screen for cervical cancer and mammograms for breast cancer. Ovarian cancer is quite a silent cancer and when women get any symptoms it is usually more advanced. Being detected early would get women treated quicker and prevent deaths.



1. Background

About ovarian cancer

Statistics published by Cancer Research UK show that:

- ovarian cancer is the 6th most common cancer in females in the UK, accounting for 4% of all new cancer cases in females (2016-2018). There were an average of 375 new cases per year in Wales (between 2016-18);
- ovarian cancer is the 6th most common cause of cancer death in females in the UK, accounting for 5% of all cancer deaths in females (2018). In Wales there were 224 deaths from ovarian cancer in 2018;
- 71.7% of females survive ovarian cancer for at least one year, this falls to 42.6% surviving for five years or more.

The symptoms of ovarian cancer can be vague and similar to other - more common and less serious - conditions. This can make it difficult to diagnose early, before the cancer has spread. As with other cancers, early diagnosis is linked to better outcomes. According to Cancer Research UK:

More than 9 in 10 women diagnosed with ovarian cancer at its earliest stage survive their disease for at least 5 years. This falls to just over 1 in 10 women when ovarian cancer is diagnosed at the most advanced stage.

Macmillan Cancer Support also provides further information and support for people affected by ovarian cancer.

Population screening for ovarian cancer is not currently recommended by the UK National Screening Committee (UKNSC), which provides independent, expert advice to ministers and the NHS in all four UK countries.

Previous petition on ovarian cancer screening

A petition on this issue was first considered by the Fourth Assembly Petitions Committee in 2016 - P-04-668 Support Yearly Screening for Ovarian Cancer (CA125 blood test). The petition called for:

- a national screening programme to be introduced for women aged over 50, using the CA125 blood test;
- increased awareness of ovarian cancer and its symptoms among General Practitioners (GPs) and other health professionals;
- increased public awareness of ovarian cancer/symptoms.

The Fifth Assembly Petitions Committee published a report on its consideration of the petition in February 2017. This said that:

On balance, whilst the petitioner provided powerful evidence of the importance of early diagnosis and treatment of ovarian cancer, we recognise that current evidence does not support the introduction of a population screening programme, using either the CA125 blood test or an alternative method.

The Committee's report highlighted the views of cancer charities, who did not support the introduction of a national screening programme for ovarian cancer, as the evidence to date did not show that it would reduce deaths from ovarian cancer. The report said:

We believe that the current situation was succinctly summarised in the evidence submitted by Ovarian Cancer Action:

"Screening tests can have a range of unintended consequences from anxiety to unnecessary surgery in extreme cases. We believe that currently testing levels of CA125 is not yet specific or accurate enough to risk being used as a national screening tool. Funding would be better spend at this time on a national symptoms public awareness campaign."

The Committee's report also drew attention to the ongoing UKCTOCS trial looking at general population screening for ovarian cancer (see further information below). It recommended that the Welsh Government should keep the situation under close review, and give detailed consideration to any new evidence in relation to a national screening programme.

The Petitions Committee's report was debated in Plenary in March 2017.

UK Collaborative Trial of Ovarian Cancer Screening (UKCTOCS)

The trial began in 2001. Its main aim was to see establish whether either a CA125 blood test or a transvaginal ultrasound scan were accurate enough to use as a screening test. Long term results were published in 2021.

The trial team did not recommend that either the CA125 blood test or a transvaginal ultrasound scan should be used as screening tests for ovarian cancer. They concluded that screening for ovarian cancer using either of these methods did not help people live longer.

2. Welsh Government response

The Welsh Government's response to the Committee states that women with symptoms of suspected cancer, or at high risk of ovarian cancer, should be investigated in line with guidance from the National Institute for Health and Care Excellence (NICE).

The current guidance indicates that a CA125 blood test should be performed on women with symptoms of ovarian cancer to guide whether there is a need for a follow-up ultrasound. However, this is for the investigation of clinically suspected cancer and not as part of a routine population screening programme, as the current test is not accurate enough for this purpose.

It says that all population-based, asymptomatic screening programmes are based on the best available evidence and subject to regular review, referring to the role of the UK National Screening Committee (UKNSC). As noted earlier, the UKNSC does not currently recommend population screening for ovarian cancer. The Welsh Government says:

Should the UKNSC change its recommendation, the Welsh Government will consider how this can be implemented in Wales.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.