

# THE GLOBAL OVARIAN CANCER CHARTER



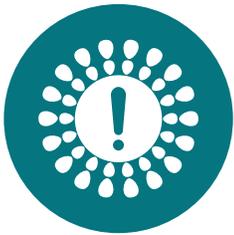
GLOBAL  
OVARIAN  
CANCER  
CHARTER  
a World Ovarian Cancer  
Coalition initiative

Women who develop ovarian cancer should have the best possible chance of survival and best quality of life, wherever they live.

Sustained investment in research and infrastructure will ultimately deliver new and better diagnostic and treatment options, but there are opportunities to make progress right now through the Charter's six **Global Goals**.



The Global Ovarian Cancer Charter is a call to action for all those committed to improving survival and quality of life for women with ovarian cancer.



## GLOBAL PRIORITY

**Ovarian cancer must become a global priority, so that the increasing burden and challenges of successfully treating women with ovarian cancer are recognized and planned for at national, regional, and local levels.**

*Ovarian cancer is on the rise. Global cases will increase by 50% by 2050, with developing countries bearing the greatest burden. In the Every Woman Study™, over two-thirds of women diagnosed had not heard of the disease prior to their diagnosis. Raising awareness and the need for action are critical.*



## RAPID DIAGNOSIS

**Women must have access to diagnosis without delay.**

*The Every Woman Study™ showed that it took six months on average for women to be diagnosed with ovarian cancer from when they first noticed symptoms. Symptom awareness must be improved so women seek and access appropriate help quickly. Doctors also need support so they know who should undergo testing and so that they are able to access tests without delay, thereby enabling more women to start and tolerate treatment quickly.*



## BEST POSSIBLE CARE

**Women must have access to surgery, treatments and clinical trials that optimize their chances of survival and quality of life, no matter where they live.**

*Personalized medicines are transforming treatments and outcomes for some women with ovarian cancer, with the potential to help many more. Evidence shows that ovarian cancer surgery, performed by highly experienced and trained surgeons in high-volume centres offer the best chance of survival. Around the world, a multitude of promising clinical trials are proceeding. Yet, for all these, access and information can be erratic, disproportionate, and even non-existent for patients and their physicians.*

*Lack of finance should not be a barrier to best possible care, and we must not allow the gap between the highest and lowest resource countries to widen any further. Affordable access to quality, multimodal treatments, essential medicines, technologies, and surgical oncology must be improved to achieve a standard level and extent of care, aligning and improving available resource with evidence-based clinical guidelines for ovarian cancer. That being said, in all settings the goal should always be to improve the status quo.*



## FAMILY HISTORY

**Women and doctors must have access to appropriate and timely genetic testing and counselling.**

*For women with a family history of ovarian and other genetically related cancers (e.g., breast, pancreatic, prostate, uterine, and bowel cancers), it is important to determine if they or others in their family are also at risk. This requires raising awareness of the importance of knowing cancer history on both sides of the family enabling women to take steps to quantify and reduce their risk if needed. For women diagnosed with ovarian cancer, with or without a family history, access to prompt genetic testing and counselling can enable access to personalized treatments and identify others who may be at risk. Where societal stigma about hereditary cancer may exist, broader awareness initiatives may be necessary to overcome those challenges.*



## DATA IMPROVEMENT

**Data used to develop cancer control plans and treatments must reflect the diversity of local populations to ensure the best possible outcomes.**

*The quality and quantity of data fluctuates around the world, which means that in many places it is not possible to quantify the burden of the disease or to develop evidence-based cancer plans. In some regions, that will mean addressing the lack of cancer registration. If that is not yet possible at a national level, then localized efforts to collect data should be fostered. Ethnic background and location in the world play a part in the incidence and survival for women with ovarian cancer. Improving data on the different types of ovarian cancer and improving the diversity of those undergoing clinical trials will help ensure women of all ethnic backgrounds are able to receive the most effective treatments for them, no matter where they live.*



## INFORMATION AND SUPPORT

**Women must have access to good-quality information and support in their own language that helps them to live well with the disease.**

*The Every Woman Study™ indicated a significant lack of information about ovarian cancer, with more than half of the women saying that they didn't get the information they needed at the time of diagnosis and only one-fifth were able to obtain information they needed at the time they needed it. Additionally, many women indicated they had unmet mental health support needs. Where possible, clinicians and patient groups should work together to develop accessible resources and physical and mental support for women at all stages - whether newly diagnosed, just out of treatment, facing recurrence, in palliative or end of life care. Their mental wellbeing and their physical wellbeing should be considered in equal measure.*

The Charter can be used by anyone with an interest in ovarian cancer to advocate for improvements at the local, regional, national, or international levels. There are many steps you can take as an individual or as an organization to advance any of the Charter Goals in your area. You can find more information and the links to sign up as a Charter Supporter or Champion at: [worldovariancancercoalition.org/global-charter](http://worldovariancancercoalition.org/global-charter)



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