



[What have we achieved in ovarian cancer? A comparison of survivals and resources in two different periods.](#)

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Abstract: In a geographically well-defined region in Denmark, survival and resource spending for strictly defined epithelial ovarian cancer patients treated during the periods 1973-1978 and 1981-1986 were compared. Almost all epithelial ovarian cancer patients diagnosed during the periods involved were identified; in both periods 206 patients were found. The number of patients was cross-checked with the Danish Cancer Registry. Treatment strategy was totally different in the two periods. In the first period debulking surgery was not routine and postoperative treatment consisted of pelvic irradiation and alkylating agents. In the second period the patients were treated according to national protocols prescribing debulking surgery, second-look laparotomy, and allocation to randomized trials. Advanced ovarian cancer patients were treated with combination chemotherapy with cisplatin. Median survival was superior for the period 1981-1986, but long-term survival was similar in the two periods, 5-year survival being 27.5% for the period 1973-1978 and 26.9% for the period 1981-1986. The resources spent on ovarian cancer patients were calculated for the two periods, expressed as 'bed-days' spent on ovarian cancer. An estimate of the price of the extra resources used was made; in the second period \$1.18 million \$US more were spent on ovarian cancer. The costs were correlated with survival and the cost per gained year of life was estimated as \$36 493. In conclusion, the study shows that for all stages of ovarian cancer an improvement of median survival was found, but not of long-term survival. The survival gain was associated with extra resource spending.

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