

action

Action
Magazine

Spring
2023

Knowledge

Awareness

Breakthroughs



The most important moment is when a patient wakes from an operation and I tell her that everything went well.



ovarian.
canceraction

A Day In The Life
Professor Christina
Fotopoulou and her
work on the wards

Anna's story
How an early
diagnosis saved
her life

In Her Name
Celebrating and
honouring the
women we love

Welcome to your spring edition of Action Mag!

As we look ahead to 2023, I must first share my gratitude for having you by our side. The last few years have been tough on everyone. As we continue to be pushed to the limits in supporting loved ones, our community and the mounting concerns around the cost of living crisis, it means the world for you to still be here by our side.



“If we work together, we can create a better, fairer and more inclusive society.”

As the pandemic showed us, inequality can have damaging consequences. But we have also seen that if we work together, we can create a better, fairer and more inclusive society. Something our cover girl, Dr. Christina Fotopoulou is a firm believer in. After seeing the injustice of advanced ovarian cancer patients during her medicine studies 25 years ago, Christina set her sights on affecting change for the next generation.

There are more future-focused researchers on page 4 sharing their pioneering efforts when it comes to treating cancer, from analysing the diversity of tumours to investigating our internal DNA. I hope you'll find the insight into the innovations that you're funding an ongoing source of inspiration.

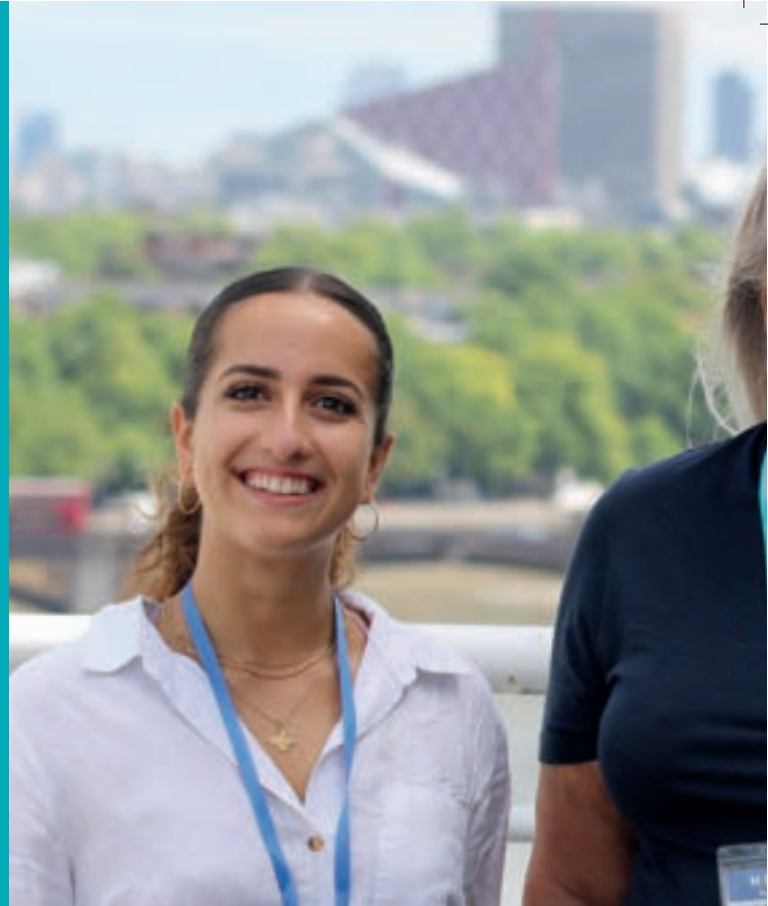
And our double-page tribute spread continues in this vein, celebrating and remembering some of the incredible women living with and who we have sadly lost to the disease all too soon. Because, as Christina says, these are the women who continue to motivate and inspire us every day.

In her name, always.

Cary.

Thirsty for more?

Pop the kettle on and tuck into our OCA themed wordsearch at the back of the mag!



Raising awareness saving lives

This March marked Ovarian Cancer Awareness Month. A time of year that shines a well-deserved spotlight on the UK's deadliest gynecological disease. In fact, a woman in the UK dies from ovarian cancer every two hours. By coming together, we can make sure that more people understand the signs and symptoms of ovarian cancer. Because the more we share this knowledge, the more lives we can save.

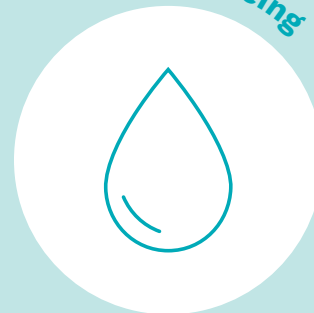


90% of women don't know the four main symptoms of ovarian cancer

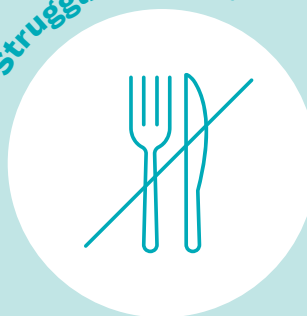
Bloating



Weeing



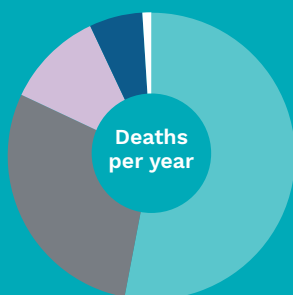
Struggling to eat



Stomach pain

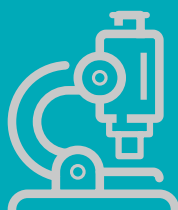


Nearly 50% of cases are diagnosed at a late stage



Ovarian cancer is the biggest gynaecological killer of women in the UK

- 53% Ovarian
- 29% Womb
- 11% Cervical
- 6% Vulval
- 1% Vaginal



7,500 new cases are diagnosed each year

Ovarian cancer survival rates compared to breast and prostate cancer after 5 years



● Prostate ● Breast ● Ovarian ♀ = 10%

A Day In The Life...

Professor Christina Fotopoulou is a gynaecological oncology consultant surgeon at Hammersmith Hospital, Imperial College NHS Trust and Deputy Director of the Ovarian Cancer Action Research Centre. She holds the Chair for Gynaecological Cancer Surgery at Imperial College in London and is also the director of Women's Health at King Edward VII's Hospital.

Christina is one of the leading specialists in women's health internationally. She performs surgery to help treat some of the most complex women's cancers - from ovarian to cervical. She lives in London with her husband and two children. Here she opens up about her life as a cancer surgeon and why being part of her patients' lives is a privilege.

My alarm goes off...

My alarm doesn't go off. I will rarely need to put on an alarm. I have a three-year-old daughter who always wakes me up around five to six o'clock to give her milk. Then my son wakes up and I have a couple of hours with them before they go to school and before I go to work.

I am responsible for...

The treatment and surgery of patients with advanced gynaecological cancers in our centre together with an amazing multidisciplinary team of experts. I am the Programme Lead for our gynaecological oncology trainees. I receive second-opinion referrals for surgery for advanced, usually ovarian, cancer from other cancer centres in the UK including Wales and Scotland. I also lead a research group in the College studying the biology of ovarian cancer.

“Before I even started in medicine, my father would often take me to theatre so it was almost inevitable I would follow that route.”

I started my job because...

I always wanted to be a surgeon. My mother is a pediatrician, and my father is a general surgeon. Before I even started in medicine my father showed me to his surgery theatre and it was from there it stuck; it was almost inevitable. In the first year of my medical studies, I did an elective on a gynaecological cancer ward, and I saw the suffering of advanced ovarian cancer patients who back then, more than 25 years ago, had even fewer options than today. I thought to myself, 'these are the women that I would like to be able to help.'

My typical week...

I will usually perform two or three cancer operations per day. On Mondays, I have my oncology outpatient clinic where I will see all my pre and postoperative patients but also long term survivors for their follow-up. The rest of the time I distribute between research, teaching, writing and giving lectures. I also travel a fair bit due to my commitment to various international committees, mostly to develop best practices into guidelines for other practitioners.

My most memorable work moment...

Oh, there are many! The most important moment is when a patient wakes from an operation and I tell her that everything went well. Also, when I see my trainees having reached their potential so that they can implement what they have learnt and in turn help more and more women.

The worst part of my job...

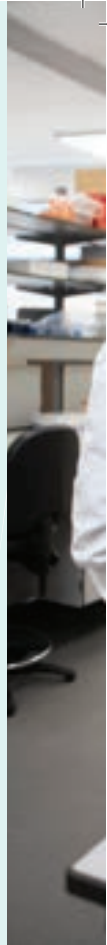
When my patients don't do very well after surgery. That keeps every surgeon up at night.

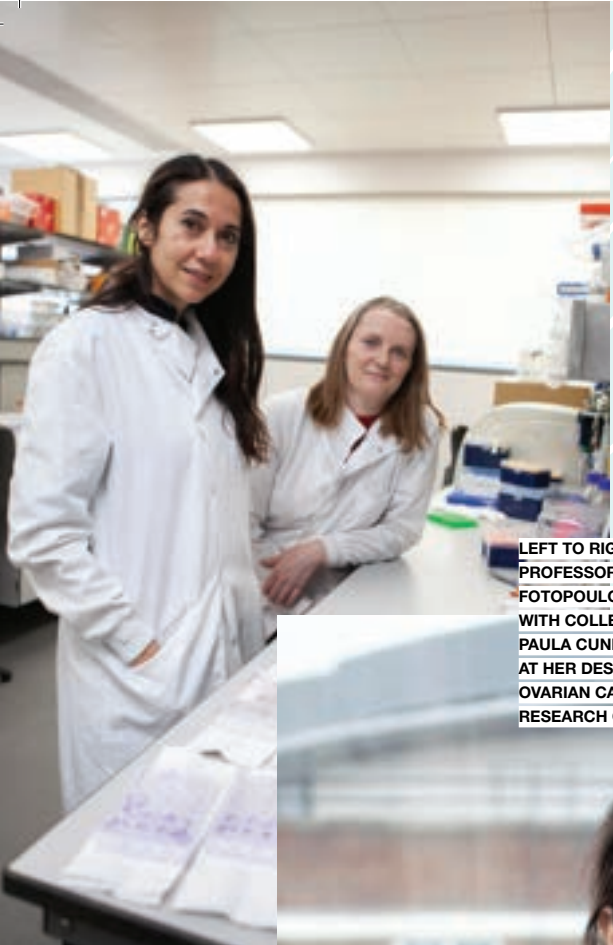
What's the one thing that you would tell people about oncology?

Oncology is a very special field in medicine. Oncologists are very privileged to be able to treat cancer patients. We are practically their companions on their journeys. Our goal is not just to cure, but also to prolong remission, prolong survival and improve the quality of life and that is what makes our field so very special.

If you had one wish for the future, what would it be?

To continue to improve and prolong the lives of patients with ovarian cancer.





LEFT TO RIGHT:
PROFESSOR CHRISTINA
FOTOPOULOU TOGETHER
WITH COLLEAGUE DR.
PAULA CUNNEA, CHRISTINA
AT HER DESK AT THE
OVARIAN CANCER ACTION
RESEARCH CENTRE



The Researchers Revolutionising Cancer Treatments

DR. ANKE NIJHULS
AT WORK IN THE
RESEARCH CENTRE
AT HAMMERSMITH
HOSPITAL

Your continued support is essential in developing groundbreaking new treatments. From reducing recurrence to digging into our DNA to raise survival rates, here's how four of our medical experts are building better care pathways for patients.

A little less conversation between cancer cells

Around 70 percent of patients diagnosed with ovarian cancer will have a recurrence. But why? That's what the Director of the Ovarian Cancer Action Research Centre, Professor Iain McNeish is investigating. He believes that we can halt tumor growth by understanding the communication between cancerous and non-cancerous cells. By disrupting this connection, he's hopeful the chance of the disease returning after surgery will be significantly reduced.



DR IAIN MCNEISH

Embracing our differences to produce personalised treatments

If you read our Day In The Life... with Professor Christina Fotopoulou overleaf, you'll know that, as a surgeon, Christina is dedicated to improving care and prolonging life for her patients. Together with Dr. Paula Cunnea, Christina has discovered that often when recommending treatments, doctors are only using one cancer sample. But their investigations have revealed that there is a vast difference between samples within individuals. By digging into these variables, Christina, Paula and her team can design more personalised treatments for future patients.

The anticancer agent ripping through drug resistance

Many ovarian cancer patients are treated with a type of drug called a PARP inhibitor. This special substance breaks down the cancer making it harder to repair itself. But Dr. Anke Nijhuis (pictured above) realised that ovarian cancer was becoming wise to this treatment and resistant to the drug. Instead, she and her team are exploring a tag-team drug combo using an experimental anticancer agent called indisulam. With this power combo, they're hopeful they will uncover a way to make current treatment plans more effective for even more people.



DR MARCO DI ANTONIO

Gene genie: Digging into our DNA to raise survival rates

Dr. Marco Di Antonio is a man who definitely subscribes to the 'one size-doesn't fit all' ethos, especially when it comes to cancer treatments. He was curious about whether our DNA could be impacting the effectiveness of chemotherapy. His novel laboratory technique using ultraviolet light digs into our chemical structures revealing how they differ in our DNA. This new tool could uncover which genes are crucial for controlling drug resistance, restoring effectiveness to existing therapies and improving survival rates for good.

Have these science stories sparked your interest in our research programmes? Discover more of our ongoing projects on our website at ovarian.org.uk/research

“My scar is a mark of the strength that I never knew I had”

At just 24 years old, Anna was diagnosed with stage 1c ovarian cancer. Three years on, she's mother to two beautiful children. She explains why understanding the symptoms of ovarian cancer is crucial and how early detection saved her life.

It was early 2019 when I noticed I was weeing more often and suffering from constant stomach aches. I shared my symptoms with the GP but they sent me home with antibiotics suggesting it was a urine infection. The pain persisted though so I went to see a gynaecologist and asked for an MRI. Even still I was told that I didn't need one.

I started to get a bit more worried when one night I was in the bath and noticed that the lower right side of my tummy was higher than the left. When I got out of the bath and stood up though, I couldn't see the difference. A few nights later, I noticed it again. I asked my sister and my mum to check for me. It was only visible when I was lying straight down on my back. The next day we went straight to the doctor who confirmed the lump and sent me to get an ultrasound with a suspected hernia.

I booked a consultation with a new gynaecologist and then an ultrasound. It was scary but when the results came back, the consultants said the mass looked like an endometrioma. Something inside me was telling me that it wasn't though. I just couldn't believe them after so much misinformation.

I remember the next part like it was yesterday. A few days after my MRI, I received a text telling me to go and see my gynaecologist. My mum, my sister and my fiancé all came along with me for moral support. We were told that what I had wasn't an endometrioma and that it was a



I see it as a mark of the strength that I never knew I had.

tumour. My heart sank but I also felt like she confirmed to me what, deep down, I thought all along. We were told that the tumour was most likely cancerous. It is very treatable (especially when found early) and mine looked like it was confined just to my ovary.

Everything happened very quickly after that. I had a CT scan the next day and my surgery was booked for later that week. It was a nerve-wracking procedure, particularly for someone that gets scared of blood tests! I returned home five days after my surgery completely unaware of how difficult the recovery would be.

That year, I saw a fertility specialist to understand my options around starting a family. I was already living with endometriosis, so having one of my ovaries removed as well was quite daunting. Because of my condition, I already had a lower egg count but was told I could either freeze my eggs or start trying for a baby sooner rather than later. Amazingly, I fell pregnant quite quickly and, in August 2021, two years after my diagnosis, my beautiful little girl Anela was born.

Almost three years since I was given the all-clear, I'm so thankful that I know more about the symptoms of ovarian cancer. But I know I'm in the minority. My experience has only made me more determined to make sure others are armed with that information too. That's why it was such an honour to be part of Ovarian Cancer Action's World Ovarian Cancer Day campaign last year. The four key symptoms were set up as Twitter profiles following thousands online but much like in real life, most people ignored them.

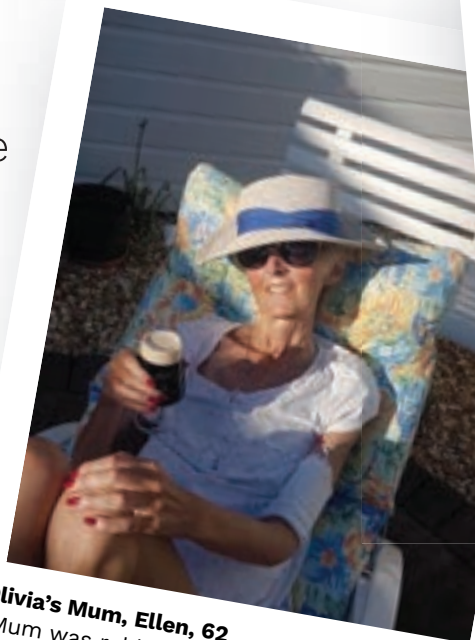
Early detection is vital and I'll continue to share my story to bring awareness to other women like me. Because now when I look at my scar, I'm no longer upset by it.

Watch the #FollowedByCancer video with Anna at [ovarian.org.uk/worldovariancancerday/](https://www.ovarian.org.uk/worldovariancancerday/)

Here's To The Women We Love

Heartbreakingly, only 44% of women diagnosed with ovarian cancer survive beyond five years. Mums, sisters, daughters, loved ones. March marked a huge opportunity to honour those special figures from International Women's Day celebrations to Mothering Sunday, whatever that might look like for you.

Throughout the month, thousands of you headed online to share stories and the names of women you love and long for. And it's in their names that we continue to take action, not just in Spring but for all the seasons ahead.



Olivia's Mum, Ellen, 62
"Mum was robbed of a retirement and the chance to see me graduate"



Marilyn
"Believing for a miracle"



Emma, 23
"Hysterectomy broke my heart but saved my life"



Alison
"Still here, incurable, plenty of fight left"



Harriet, 32
"Celebrating her
She died the ne"



Munirih
"Embracing baldness!"



Lynne Brasier
"Wig on"



Samantha, 21
"On a journey of discovering who I am, post-cancer"



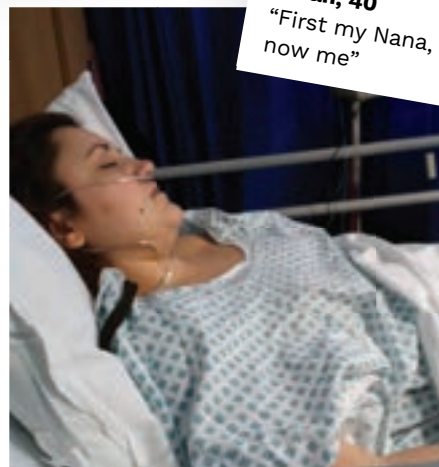
Phoebe, 22
"I was given the 'all clear' in January and I am tumour free in all of my scans"



Sarah, 40
"First my Nana, then my Mum, now me"



g her birthday with her 5-month-old son.
e next day."



Becca, 25
"Should be here. But she isn't"

Spring into Action in 2023

Action. One third of our name and 100% of what we're about. As we spring into a new year, why not join us? Whether you can fundraise, speak out or even volunteer, taking action in 2023 will move us closer to a world where no woman dies of ovarian cancer.

Run In Her Name

Whether it's a sprint around the big city or tackling a mighty marathon, there are plenty of events to push yourself and raise vital funds to fast-track our groundbreaking research. Go the extra mile in 2023 and change the future for the women we love.



Speak In Her Name



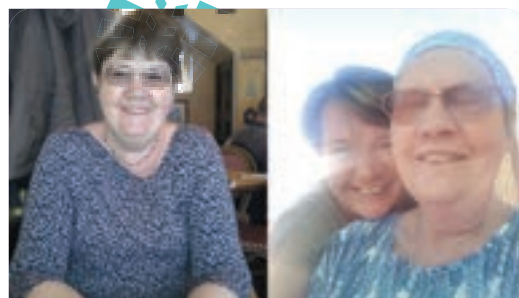
Sharing knowledge is one of our key missions in 2023. Shockingly, only 1 in 10 women know the main symptoms of ovarian cancer. Whether it's a tweet, emailing your local MP, sharing information or asking for support in your local community, your voice can make a huge impact. Tag us on Twitter @OvarianCancerUK and start making some noise today.

Give In Her Name

Any donation, big or small, goes a long way to taking action for women affected by ovarian cancer. Perhaps you want to remember a loved one by creating a Tribute Fund, raising money through a bake sale at work or simply helping us invest in driving forward vital research. Every donation raised focuses on the prevention, early detection and treatment of ovarian cancer for future generations.



[ovarian.org.uk/get-involved/](https://www.ovarian.org.uk/get-involved/)



Marathon for Mum

Carolyn lost her Mum, Vivien, to ovarian cancer in 2019. Four years on, she's determined to raise money for the vital research that will make ovarian cancer a survivable disease for other families in the future.

When Carolyn's Mum Vivien died, she remembers instantly how life changed for her and her siblings. "The best way I can describe it is that suddenly, our lives had a very strong dividing line. The life we had before cancer and the life we had after cancer." Propelled to make a difference in Vivien's name, Carolyn took up running during the first lockdown in March 2020.

It was her friend Silvia who suggested that Carolyn step up the training and take on the half-marathon for her 50th birthday, with the hope that future generations of families won't have to face the same heartache. Flanked by her family on the day, Carolyn raised a triumphant £1,600 for Ovarian Cancer Action.

Even now Carolyn recalls that trying to think further ahead than the next few days felt utterly overwhelming.

Vivien's name now joins the thousands of other women on our Tribute Wall at the Ovarian Cancer Action Research Centre. And Carolyn continues to run in Vivien's name knowing that every mile she runs will get us one step closer to making ovarian cancer a survivable disease in the future.

A Moment for Yourself

Take a time out, grab a brew and sit down and do something for yourself today. We've been told it's a tough nut to crack, can you find all the words hidden below?

Awareness
Family
Hope
Prevention
Treatment
Breakthrough
Fertility
Legacy
Research
Tribute
Celebration
Fundraising
Memories
Sister
Women
Daughter
Genetics
Mother
Spring
Detection
Grandmother
Ovarian
Support



*Words may be found across, down, diagonally and backward and can overlap each other.
Wordsearch got you stumped? Pop online and find all the answers at [ovarian.org.uk/ocamag](https://www.ovarian.org.uk/ocamag)

Women don't just deserve better, they deserve the best.

It's been three years since Ovarian Cancer Action secured over £1million from the UK Government Tampon Tax fund to launch IMPROVE UK, a project that aims to tackle systemic and regional health inequalities for women with ovarian cancer. The groundbreaking

programme worked to build an infrastructure encouraging best practice sharing up and down the country.

With six initial NHS cancer centres at the helm, this first wave of funding focused on introducing

pre-habilitation services, improving genetic testing and reducing delays from diagnosis to starting treatment. While a full report on its impact so far is still in the works, plans for phase two of the project are already underway. Now that's a bloody good start to a new year.

WHAT WILL YOUR LEGACY BE?

By leaving Ovarian Cancer Action a legacy, you will help us fund groundbreaking research and raise awareness of the disease.

With your support, we can ensure the next generation of girls survives.

To download our legacy information pack, visit ovarian.org.uk/my_legacy or call us on 020 7380 1730

Ovarian Cancer Action
Funding Next Gen Research For Next Gen Lives

Charity registered in
England & Wales
(No. 1109743)
& Scotland
(No. SC043478)



ovarian
canceraction

FUNDING NEXT GEN RESEARCH FOR NEXT GEN LIVES