

New hope for ovarian cancer

Video	Audio
Vivien Williams	At age 33, doctors told Cindy Weiss she had ovarian cancer.
Cindy Weiss	“I remember the day the phone call came, and when I heard that, I was not as scared about the diagnosis. I was more upset and terrified over the fact that I wouldn’t realize the life dreams or opportunities I hoped for: of getting married, of being a mother.”
Vivien Williams	Fourteen years ago, Cindy endured a hysterectomy, radiation and chemotherapy. For three years, she was cancer-free, but the disease came back, which meant more chemo.
Cindy Weiss	“It’s been 10 years since my second diagnosis, and, at the moment, everything looks great.”
Vivien Williams	Successful treatment from a team at Mayo Clinic has allowed Cindy to realize her dreams. She’s married and has a 7-year-old daughter.
Cindy Weiss	“I’ve had cancer twice. The question’s always there: Will it come back a third time?”
Andrea Wahner Hendrickson, M.D. Oncology Mayo Clinic	“As an ovarian cancer researcher and a medical oncologist, I am actually filled with hope. I think this is a really exciting time.”
Vivien Williams	Dr. Andrea Wahner Hendrickson says, since Cindy’s diagnosis, researchers have developed new and more effective treatment options for women who have ovarian cancer. She explains four of those options, which are; PARP inhibitors, HIPEC therapy, individualized therapies and vaccines.

Andrea Wahner Hendrickson, M.D.	“I think the most exciting change that has developed is really the development of PARP inhibitors.”
Vivien Williams	PARP is a protein that helps to repair damaged DNA in cancer cells as they divide. PARP inhibitors block the protein from functioning, so cancer cells die.
Andrea Wahner Hendrickson, M.D.	"Ovarian cancer is a tumor that, thankfully, does respond really nicely to surgery and chemotherapy. So, in most cases, we can get women into a remission. Unfortunately, in roughly 70 percent of patients, we do see recurrence. And that's really where the PARP inhibitors are playing a role now. That being said, there is a lot of interest in pushing it forward to first-line therapy. So there are clinical trials in first-line therapy, really, with a goal of hoping to reduce that recurrence rate."
Vivien Williams	The second new treatment is called HIPEC therapy, which involves administering heated chemotherapy directly into the abdomen at the time of surgery. The third new option is individualized medicine. This involves testing tumors for specific markers that determine which treatments will work best. The fourth new treatment option is an ovarian cancer vaccine, which, right now, is used to prevent recurrence of the disease.
Keith Knutson, Ph.D. Immunology Mayo Clinic	“We ultimately want to move our vaccine into primary prevention. We want to give these to healthy individuals so we can actually prevent the development of disease.”
Vivien Williams	Not all tumors respond to every treatment. Dr. Wahner Hendrickson recommends all ovarian cancer patients undergo genetic testing to see which therapy might work best for them.
Cindy Weiss	“To me, I think that really gives me a lot of hope. You know, I don't want to think about being diagnosed again. And while I hope I never have to hear those words

	again, I think that the way technology has changed, the way medicine has changed, the way the work has changed, really offers a lot of hope for people like me.”
Andrea Wahner Hendrickson, M.D.	“I think there’s a lot of promise and hope in the treatment of ovarian cancer, and that’s what keeps me going every day.”
	For the Mayo Clinic news Network, I’m Vivien Williams.