Background: Awareness of ovarian cancer among women and healthcare providers is understudied. An early awareness of ovarian cancer may lead to early detection and treatment of ovarian cancer.

Objectives: The purpose of this study was to determine the level of that awareness among a sample of women and providers.

Methods: Written surveys were developed by the authors based on available literature and were administered to women (n = 857) and healthcare providers (n = 188) attending or volunteering at a community health fair. Chi-square tests for independence and z tests were used for analysis.

Findings: Healthcare providers were significantly more likely to identify the symptoms and risk factors for ovarian cancer. Forty percent of women reported being at least slightly familiar with the symptoms of ovarian cancer. Women who were familiar with symptoms were significantly more likely to identify symptoms and risk factors correctly and to report symptoms immediately to a provider. Identification of symptoms among healthcare providers ranged from 59%–93%. Identification of ovarian cancer symptoms and risk factors is poor among women, and knowledge deficits are present in providers. Increasing familiarity and awareness could lead to improvements in early diagnosis.

Carol L. Goldstein, PhD, RN, is an affiliate nursing faculty in the Loretto Heights School of Nursing at Regis University in Denver, CO; Ellen P. Susman, PhD, is a professor emeritus in the Department of Psychology at the Metropolitan State University of Denver in Colorado; Suzy Lockwood, PhD, RN, OCN®, FAAN, is a director of the Division of Undergraduate Nursing Studies and a professor in the Harris College of Nursing and Health Sciences, both at Texas Christian University in Fort Worth; Erin E. Medlin, MD, is a clinical instructor in the University of Wisconsin Hospital and Clinics in Madison; and Kian Behbakht, MD, is a professor in the School of Medicine at the University of Colorado Denver Anschutz Medical Campus in Aurora. The authors take full responsibility for the content of the article. This study was supported, in part, by the Colorado Ovarian Cancer Alliance. The content of this article has been reviewed by independent peer reviewers to ensure that it is balanced, objective, and free from commercial bias. No financial relationships relevant to the content of this article have been disclosed by the independent peer reviewers or editorial staff. Medlin can be reached at emedlin@wisc.edu, with copy to editor at CJONEditor@ons.org. (Submitted May 2014. Revision submitted July 2014. Accepted for publication July 27, 2014.)

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Ovarian cancer is responsible for more deaths per year than all other gynecologic cancers combined. The American Cancer Society (2015) estimated that 21,290 women will be diagnosed with ovarian cancer, and 14,180 women are expected to die from ovarian cancer in 2015. In the United States, the average five-year survival rate is 35% when diagnosed at stage IIIC, which accounts for 75% of initial diagnoses (American Cancer Society, 2015). Women diagnosed at an early stage have a higher five-year survival rate; however, no accepted, reliable screening test exists, and only 15% of women with ovarian cancer are diagnosed at an early stage (Gajjar, Ogden, Mujahid, & Razvi, 2012; Jayde & Boughton, 2012).

Ovarian cancer has an insidious onset, and signs and symptoms are vague and nonspecific. Symptoms include bloating, pelvic or abdominal pain, frequent urination, and early satiation or difficulty eating (Goff, Mandel, Melancon, & Muntz, 2004). Women associate these symptoms with a variety of everyday conditions and often do not seek medical care (Cooper, Polonec, Stewart, & Gelb, 2013). This results in the delay of diagnosis, and most patients present with advanced disease (Luce,