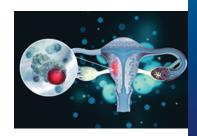
MOUNT SINAL

Comprehensive BRCA Program

Gynecologic Oncology Recommendations

Women with BRCA gene mutations are at increased risk of developing ovarian cancer.

People with a mutation in the *BRCA1* gene have an increased lifetime risk of developing ovarian cancer of approximately 39-58 percent (as compared to the



general population lifetime risk of approximately 1.3 percent). Ovarian cancer tends to occur at a younger age in *BRCA1* carriers than the general population, with a median age of diagnosis of approximately 51 years.

People with a mutation in the *BRCA2* gene have an increased lifetime risk of developing ovarian cancer of approximately 13-29 percent (as compared to the general population lifetime risk of approximately 1.3 percent). Ovarian cancer does not tend to occur at a younger age in *BRCA2* carriers than the general population, with a median age of diagnosis of approximately 61 years.

We recommend a diligent screening schedule in order to maximize early diagnosis.

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Gynecologic Oncology Recommendations (con

BRCA1 Gene

- If you have a mutation in the *BRCA1* gene and you are younger than age 30, we recommend:
 - Annual visit with a gynecologic oncologist.
 - Possible referral to reproductive endocrinologist.

If you have a mutation in the *BRCA1* gene and you are between 30 and 35 years of age, we recommend:

- · Visit every 6 months with a gynecologic oncologist.
- Transvaginal ultrasound and CA-125 blood test (blood test for the CA-125 antigen which can be present at higher-than-normal levels in women with ovarian cancer).
- Referral to reproductive endocrinologist if you have not been referred previously.

NOTE: We may recommend starting earlier depending on the age of youngest cancer onset in your family.

If you have a mutation in the *BRCA1* gene and you are age 35 or older, we recommend:

- Risk-reducing surgery
 - Risk-reducing bilateral salpingo-oophorectomy (removal of both fallopian tubes and ovaries) or enrollment in a clinical trial involving risk-reducing bilateral salpingectomy (removal of both fallopian tubes) after childbearing is complete.
 - Discussion about a hysterectomy to remove the uterus.
- If you have had a bilateral salpingectomy (removal of both fallopian tubes): continued screening with transvaginal ultrasound and CA-125 blood test every 6 months until you have also had bilateral oophorectomy (removal of both ovaries).
- If you have not had risk-reducing surgery: continued screening with CA125 and consideration of transvaginal ultrasound.
- Consultations with menopause medicine and/or sexual health as needed, before
 or after risk-reducing surgery, or both before and after surgery.

BRCA2 Gene

- If you have a mutation in the *BRCA2* gene and you are younger than age 35, we recommend:
 - Annual visit with a gynecologic oncologist.
 - Possible referral to reproductive endocrinologist.
- If you have a mutation in the *BRCA2* gene and you are between 35 and 40 years of age, we recommend:
 - Visit every 6 months with a gynecologic oncologist.
 - Transvaginal ultrasound and CA-125 blood test (blood test for the CA-125 antigen which can be present at higher-than-normal levels in women with ovarian cancer).
 - Referral to reproductive endocrinologist (if you have not been referred previously).

NOTE: We may recommend starting earlier depending on the age of youngest cancer onset in your family.

If you have a mutation in the *BRCA2* gene and you are age 40 or older, we recommend:

- Risk-reducing bilateral salpingo-oophorectomy (removal of both fallopian tubes and ovaries) or bilateral salpingectomy (removal of both fallopian tubes) when done with childbearing or by 40-45 years of age (or 10 years earlier than the age of youngest cancer onset in your family).
- Once or if you have had bilateral salpingectomy (removal of both fallopian tubes), continued screening with transvaginal ultrasound and CA-125 blood test every 6 months until you have also had bilateral oophorectomy (removal of both ovaries).
- Consultations with menopause medicine and/or sexual health as needed, before
 or after risk reducing surgery, or both before and after surgery.

Gynecologic Oncology Recommendations (cont.)

Mount Sinai's Comprehensive BRCA Program for men and women who have mutations in the *BRCA1* or *BRCA2* gene provides expert guidance to ensure that you receive appropriate cancer screenings, monitoring, and treatment, as needed.



For information and appointments, call 877-309-BRCA (2722).

www.mountsinai.org/care/cancer/about/brca-program

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Tisch Cancer Center