



Eich cyf/Your ref P-04-668  
Ein cyf/Our ref RE/05542/16

Mike Hedges AM  
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25 October 2016

Dear Mike

Thank you for your letter about *Petition P-04-668 Support Yearly Screening for Ovarian cancer (CA125) blood test* following my attendance at Petitions Committee on 27 September.

Firstly, I thought it useful to attach links to the findings of the United Kingdom Collaborative Trial of Ovarian Cancer Screening (UKCTOCS) published in the Lancet in December 2015 and a Cancer Research UK blog to help you interpret these findings:

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)01224-6/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)01224-6/fulltext)

<http://scienceblog.cancerresearchuk.org/2015/12/17/ovarian-cancer-screening-trial-a-tantalising-result/>

I can confirm the review of ovarian cancer cases was introduced into the 2015/16 GP contract and is continuing. The 2015 analyses were summarised by April 2016 and informed the development of practice and cluster plans this autumn. The ongoing work will update GP practice and cluster plans where appropriate. Through our collaboration with Macmillan we now have primary care cancer leads in health boards and each has a specific objective to support the collation of the learning themes to inform health board actions to improve early diagnosis. The work is also shared with the Cancer Delivery Group, which is supporting specific projects relating to pathways of care and access to diagnostics which were issues raised through the GP analysis.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

The National Institute for Health and Care Excellence (NICE) has reviewed the evidence and developed guidelines on ovarian cancer recognition and initial management. This review concluded that around 1 in 100 women referred to secondary care following a positive CA125 blood test would have ovarian cancer. A 'false positive' is a test result which wrongly indicates that a particular condition or attribute is present - for this test that is 99 out of every 100 women.

It also reported that around 1 in every 2,000 women with a negative test result would turn out to have ovarian cancer - this is termed a 'false negative'. False negative results may provide inappropriate reassurance and it is important that a holistic assessment is undertaken which makes use of, but does not rely on, a single test.

The NICE review identified the CA125 blood test strategy as the most cost effective at a total cost of just over £1,500 per patient (within this figure the unit cost of a CA125 blood test was estimated to be £23). I attach a link to the NICE evidence review and guidelines for your information: <https://www.nice.org.uk/guidance/cg122/evidence>

Finally, I can report the ovarian cancer awareness campaign undertaken in March 2016 cost Velindre NHS Trust approximately £4,700 but the production and distribution of the GP information packs was funded separately by Target Ovarian Cancer.

I trust that you will find this information helpful.

Kind Regards,

A handwritten signature in black ink that reads "Rebecca". The script is cursive and fluid.

**Rebecca Evans AC/AM**

Gweinidog Iechyd y Cyhoedd a Gwasanaethau Cymdeithasol  
Minister for Social Services and Public Health