

Ovarian Cancer Patients Face Increased Risk of Mental Illness

Higher rates of anxiety and depression are associated with higher mortality risk among women with ovarian cancer.

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Women diagnosed with ovarian cancer were more than three times more likely than the general public to be diagnosed with mental illnesses such as anxiety, depression, and adjustment disorder, according to results presented during Week 1 of the virtual [AACR Annual Meeting 2021](#), held April 10-15.

[Ovarian cancer](#) is the fifth most commonly diagnosed cancer in women. Because it is often diagnosed at an advanced stage, it is difficult to treat, resulting in a five-year relative [survival rate](#) of just 48.6 percent.

While some research has examined the quality of life for ovarian cancer patients and survivors, few studies have examined the mental toll taken by this deadly cancer type in population-based studies, explained the study's lead author, Siqi Hu, a PhD candidate in the Department of Family and Preventive Medicine at the University of Utah and Huntsman Cancer Institute.

"Mental health issues are important for cancer patients as they face major disruptions to their lives and deal with the toxic side effects of cancer treatment," Hu said. "We wanted to examine mental health in ovarian cancer patients, who often face a poor prognosis."

In this study, the researchers used the Utah Cancer Registry to identify 1,689 ovarian cancer patients diagnosed between 1996 and 2012 and matched them with 7,038 women without cancer. They used electronic health records to identify mental health diagnoses, excluding those that occurred before the women were diagnosed with ovarian cancer.

The study showed that compared with the general public, patients with ovarian cancer were more than three times more likely to be diagnosed with a mental illness in the first two years after an ovarian cancer diagnosis.

The risk of depression was 3.11 times higher in the first two years after an ovarian cancer diagnosis and 1.67 times higher two to five years post-diagnosis. The risk of anxiety disorder among ovarian cancer survivors was 3.54 times higher in the first two years after diagnosis and 1.86 times higher two to five years post-diagnosis. The risk of adjustment disorder was more than

three times higher in patients with ovarian cancer than in those who did not have ovarian cancer.

The researchers also examined the link between mental health issues and mortality risk and found that ovarian cancer patients who had received a mental health diagnosis were 1.8 times more likely to die than those who did not have a mental health diagnosis.

Hu said that based on previous research, she expected that ovarian cancer patients would have an increased risk of mental health disorders. “However, the risks were far higher and persisted over a longer time period than we expected,” she said.

The study suggests that patients with ovarian cancer would benefit from comprehensive mental health services during and after cancer treatment, said Hu.

“Mental health screening among ovarian cancer patients is needed,” Hu said. “It is important to be aware that mental health may change over the course of diagnosis and treatment. Cancer patients may need regular mental health consultations to identify issues such as depression and anxiety. Increased support may contribute to prolonging the lives of ovarian cancer survivors.”

The authors said that future research will examine the role that various aspects of treatment play in patients’ mental health. Hu said ongoing research may help oncologists and patients understand and prepare for the psychological effects of cancer treatment.

Hu noted some limitations to the study. First, since this study utilized electronic medical records data, less severe mental illnesses that did not necessitate medical care may have been underrepresented. Also, she pointed out that the high mortality rate of ovarian cancer patients may have resulted in survival bias.

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