

THE ROLE OF SERUM LEVEL OF TUMOR MARKER CA 125 IN DISTINGUISHING BENIGN FROM MALIGNANT OVARIAN TUMORS IN POSTMENOPUSUAL WOMEN AND CORRELATION WITH SONOGRAPHIC FINDING

Jelena Seratlić¹, Dragana Radović-Janošević^{1,2}, Dane Krtinić^{2,3}

¹Clinic for Gynecology and Obstetrics, Clinical Center Niš, Niš, Serbia

²University of Niš, Faculty of Medicine, Niš, Serbia

³Oncology Clinic, Clinical Center Niš, Niš, Serbia

Contact: Jelena Seratlić
Vase Čarapića 24/7, 18000 Niš, Serbia
E-mail: novkaj@gmail.com

Malignant ovarian tumors occur at all ages, including early childhood, but also advanced old age, with the total incidence dramatically increasing with age. Tumor markers for early detection of ovarian carcinoma are used in ovarian cancer examination.

The aim of the study was to examine the degree of correlation between sonographic findings and the levels of serum tumor marker Ca 125, and to study a correlation of preoperative sonographic findings and serum marker level CA 125 with intraoperative finding and pathohistopathological results.

The study was based on the prospective-retrospective study model involving 60 postmenopausal women diagnosed with the presence of ovarian tumor.

The following medical tests and examinations were performed for all patients: anamnestic analysis of the medical record, that is the history of the disease with the data on age, parity, duration of menopause, the use of oral contraceptives and symptomatology, small pelvis sonography, lab parameters - Ca 125 with referent ranges up to 35 ml/U. Laparotomy was used as an operative procedure in all patients. All material obtained operatively underwent histopathological treatment.

The group of patients with malignant tumors of high statistical significance showed considerably higher average CA125 values.

Among subjects with benign tumors, the dominant tumor structure was cystic, as opposed to the mixed-type tumors in malignant tumors. To this effect, the parameter of tumor structure is a serious factor in distinguishing between benign and malignant ovarian tumors.

Tumor location is, with high statistical significance, more often bilateral in subjects with histopathologically proven malignant tumors, while it is predominantly unilateral in benign tumors.

Acta Medica Medianae 2018;57(2):53-59.

Key words: CA 125, ovarian tumors, postmenopausal, sonographic finding