412 Early detection of ovarin cancer with transvaginal sonography. Y.Ohtani, K.Nozue, A.Makio, M.Nishimura, M.Utsu, H.Okata, M.Ohsawa, Y.Torii, K.Narita, S.Aoki, Dept.Obstetrics and Gynecology, Seirei Hamamatsu Hospital, Shizuoka.

Group 1 was composed of 1,332 women who complained gynecologic symptoms, and Group 2 was 207 asymptomatic women, who visited our outpatient clinic. Transvaginal sonography disclosed enlarged ovary with the maximum diameter of 4cm or more in 5.9% of the patients in Group 1, and 4.8% in Group 2. The sonographycally enlarged ovaries were detected by bimanual examination only in 35% patients of Group 1 and in none of Group 2. The maximum diameter of ovarian mass was sonographycally 5.9±1.7cm(mean±SD) when the mass was palpated, whereas it was 4.6±1.2cm when not palpated. Maximum diameter of palpated tumor was 5.2±1.2cm in sonographycally solid or mixed pattern, whereas cystic pattern tumor needed 6.3±1.9cm for the palpation. In summary, exact and quantified size of palpated ovarian mass was obtained, and it was suggested that transvaginal sonography will play important role in early detection of ovarian cancer, if ovarian enlargement is the risk factor of the disease.

413 The prognosis of ovarian cancer depends on the value of CA125 at the end of induction therapy. K.Miwa, R.Kan, Kagoshimashi Ishikai Hosp., Kagoshima.

The relationship between the prognosis and value of CA125 at the end of induction therapy was analysed in 30 ovarian cancers. The subjects consisted of 27 patients with stageIII(2IIIa, 5IIIb and 20IIIc) and 3 with stageIV ovarian cancer. In the group with a CA125 value less than 35units/ml after the induction therapy (initial surgery+3 courses of chemotherapy) all patients (except one) survived for 10-65 months from the initial treatment up to the present, while in the group with a CA125 value above 35units/ml all patients died within 16 months from the initial treatment. Comparison of the survival rates in these two groups showed a significant difference. These results suggest that the most important factor that affects prognosis in patients with ovarian cancer is the normalization of a CA125 value after the induction therapy. Therefore, we have concluded that the CA125 value after the induction therapy (initial surgery + 3 courses of chemotherapy) is valuable as an index for early judgement of the curative effect of treatment on ovarian cancer.

414 Mass-screening methode for ovarian cancer by means of transvaginal ultrasonography –Study on size of ovary detected by ultrasonography, to select women needed to receive second screening–. S.Sato, Y.Hasuo, A.Kagiya, Y.Saito, Dept.Obst.and Gynec., Hirosaki Univ.Sch.Med., Aomori.

Mass-screening for ovarian cancer by means of transvaginal ultrasonography have been performed in Aomori Prefecture since 1989. To select reasonably women needed to receive second screening, size of ovary were studied on 10,962 pictures of ultrasonography recorded by 8mm-VTR. In first screening, frequency of detection of ovary and over 30mm in ovarian size were 3,806(35.6%) and 614(5.6%) of 10,962 women. These rates were higher in young age and luteal or menstrual phase than others. On the other hand, normal ovarian sizes in cases of operated cervical cancer were under 33mm. The second screening was performed against 472 of the 614 women. As compared with first screening, 83(17.6%) were became under 30mm in diameter, 68 (14.4%) were smaller, 220(46.6%) were same, 48(10.2%) were lager, and 53 (11.2%) were not ovaries.

In present stage, it is considered proper to performe the second screening for women having ovary over 30mm in diameter.