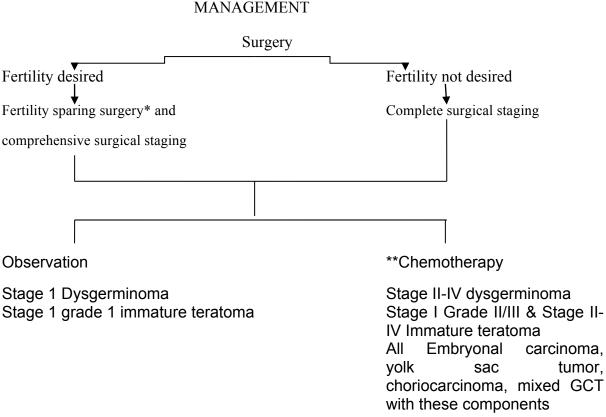


## **Germ Cell Tumours of Ovary**

Germ cell tumours predominantly occur in young females; hence preservation of fertility is an important issue.

Work up and staging manoeuvres is similar to that for epithelial ovarian cancer. Additional tumour markers include AFP, β HCG and LDH.

Conservative surgery with preservation of normal contralateral ovary and uterus is recommended wherever feasible



## **Notes**

- \*Every effort should be made to undertake fertility sparing surgery in young patients with ovarian tumors.
- \*\* Chemotherapy recommended is Bleomycin, etoposide and cisplatin (BEP regimen) X 3-4 cycles. Etoposide plus cisplatin (EP) X 4 cycles can also be considered in some patients with dysgerminoma
- \*\*\*In advanced cases, with unresectable disease or in surgically unfit patients, neoadjuvant chemotherapy with 2 cycles of BEP followed by interval cytoreduction and 2 cycles of adjuvant chemotherapy is a suitable option.

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