

A systematic review – Interferon after surgery for women with advanced (Stage II-IV) epithelial ovarian cancer

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Background

Ovarian cancer is a life-threatening disease. Most often women become symptomatic only in advanced stages of the disease, increasing the difficulty of treatment. While the disease responds well to surgery and chemotherapy the relapse rate is high. New treatments to prevent disease recurrence or progression are needed.

Objectives: To assess the effectiveness and safety of interferon after surgery in the treatment of advanced epithelial ovarian cancer.

Search methods: The Cochrane Gynaecological Cancer Review Group Specialized Register; The Cochrane Central Register of Controlled Trials (CENTRAL), (latest issue); MEDLINE and EMBASE. Handsearching of conference proceedings was also conducted. Reference lists of reviews and included studies were screened and experts in the field were contacted for additional studies. Clinical trial registers were searched for ongoing trials.

Selection criteria: Randomised controlled trials involving participants with advanced epithelial ovarian cancer that compared either post-operative interferon therapy with observation or post-operative interferon therapy in combination with chemotherapy with post-operative chemotherapy alone were included in the review.

Data collection and analysis: Two review authors (AL and AM) independently screened

the search results for relevant studies and extracted pre-specified information from each included study. Data was managed using Review Manager 5.1.

Authors' conclusions

Implications for Practice

Based on moderate quality evidence, the addition of interferon to first-line chemotherapy, compared with chemotherapy alone, did not improve the risk of death in post-surgical women with advanced ovarian cancer. There is inconclusive evidence for the effectiveness of interferon in combination with chemotherapy, compared with chemotherapy alone, in reducing the risk of disease progression and increasing median progression free survival in post-surgical women with advanced ovarian cancer. There is moderate to low quality evidence that interferon therapy alone does not significantly alter the risk of death, median overall survival, risk of disease recurrence and median progression free survival compared to observation alone, in post-surgical women who have undergone first-line chemotherapy.

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