

No overall survival benefit tied to bilateral oophorectomy

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(HealthDay)—At no age is there an overall survival benefit associated with bilateral oophorectomy compared with ovarian conservation at the time of hysterectomy for benign disease, according to a study published online March 6 in *Obstetrics & Gynecology*.

William H. Parker, M.D., from the John Wayne Cancer Institute in Santa Monica, Calif., and colleagues analyzed data from a prospective cohort study of 30,117 participants in the Nurses' Health Study undergoing hysterectomy for benign disease. <u>Bilateral oophorectomy</u> in 16,914 patients was compared with ovarian conservation in 13,203 patients.



The researchers found that, over 28 years of follow-up, 16.8 percent of women with hysterectomy and bilateral oophorectomy died from all causes, compared with 13.3 percent of women who had ovarian conservation (hazard ratio, 1.13). There was a lower risk of death from ovarian cancer with oophorectomy (four women with oophorectomy versus 44 women with ovarian conservation). Before age 47.5 years, oophorectomy was tied to a lower risk of death from only breast cancer. Bilateral oophorectomy was associated with significantly increased mortality in women who had never used estrogen therapy, but not in past and current users for women younger than age 50 years at the time of hysterectomy. The number needed to harm was eight for all-cause death, 33 for coronary heart disease death, and 50 for lung cancer death, assuming a 35-year lifespan after oophorectomy.

"Bilateral oophorectomy is associated with increased mortality in women aged younger than 50 years who never used estrogen therapy and at no age is oophorectomy associated with increased survival," the authors write.

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More information: Abstract

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