

Submission to:

The Senate Community Affairs Reference Committee ("the Committee")
Parliament House
CANBERRA ACT 2600

Subject: Inquiry into Gynaecological Cancer in Australia

From:

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I welcome the opportunity, on behalf of the GO Fund, to make this submission asking the Committee to recommend that the Government allocate substantial funds for gynaecological cancer.

The GO Fund is a sub-entity of the Royal Hospital for Women Foundation Limited, itself a charitable corporation established as a fund-raising body for the Royal Hospital for Women ("RHW").

The purpose of the GO Fund is to raise funds to support research into the prevention, early detection and treatment of gynaecological cancer and to create awareness within the community of gynaecological cancer.

The GO Fund's principal present function is to raise money to fund the financial commitment of the Royal Hospital for Women under an agreement with the Garvan Institute for Medical Research, establishing a collaboration between them known as "The Ovarian Cancer Project - a collaboration between the RHW Gynaecological Cancer Centre and the Cancer Research Program, Garvan Institute of Medical Research ("the Project")."

The Project is directed by a Scientific Management Committee comprising the Head of the RHW Gynaecological Cancer Centre, Professor Neville Hacker, the Director of the Garvan Institute Cancer Research Program, Professor Rob Sutherland and the Project Leader, Dr Philippa O'Brien.

This present funding orientation of the GO Fund recognises the following:

1. When ovarian cancer is detected at an advanced stage, it is generally too late. The rate of mortality caused by ovarian cancer is very high (60%) as compared to the rate of mortality caused by breast cancer (15%).

2. Detection of ovarian cancer at an early stage is difficult because there are no clear "signpost" symptoms.
3. Ovarian cancer is curable if detected at an early stage. There is an 85% survival rate if the disease is diagnosed in stage 1, when confined to the ovaries.
4. There is a sound scientific basis to conclude that it is possible to develop a screening test that will enable early detection of ovarian cancer. The RHW - Garvan collaboration has been working on that development for four years and significant progress has been made. It can be anticipated that success will be achieved in time with the consequent great reduction in mortality from ovarian cancer. The time frame is a function of the money that can be applied to the research program, particularly for the employment of additional research scientists.

It is clear from the information available (for example, as referred to in the submission to the Committee from Professor Hacker) that government funding for gynaecological cancers, and particularly ovarian cancer, has been seriously inadequate and disproportionate. Unfortunately, the same is true for private sector funding. Because of the greater incidence of breast cancer, and the exposure it receives, it attracts private sector funding much more than ovarian cancer although the relative mortality rates (much higher for ovarian cancer) and the impact that increased funding can have to greatly reduce the mortality rate for ovarian cancer (see point 4. above) calls for a better balance of funding in favour of ovarian cancer. The GO Fund is striving to meet that call. **This submission asks the Committee to recommend that the Government also meets that call by allocating substantial funds for gynaecological cancer, particularly for ovarian cancer research for a screening test.**

I have met a number of women who have been diagnosed as having advanced ovarian cancer and, therefore, having a very poor prognosis. The submission to the Committee from Mrs. Lisle Fortescue is a typical cri de coeur from such women, expressing anguish because of their condition and anger and frustration because they know it could be prevented. I ask the Committee to heed those cris de Coeur.

Aleco Vrisakis

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