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## 卵巣がん治療ガイドライン 2004年版

定価(本体1,800円+税)

2004年10月20日 第1版第1刷発行  
2005年3月1日 第2刷発行

---

編 集 日本婦人科腫瘍学会

---

発行者 川井 弘 光

---

発行所 金原出版株式会社

〒113-8687 東京都文京区湯島2-31-14

電話 編集 ————— (03) 3811-7162

営業 ————— (03) 3811-7184

©2004

FAX ————— (03) 3813-0288

検印省略

振替口座 ————— 00120-4-151494

Printed in Japan

<http://www.kanehara-shuppan.co.jp/>

ISBN4-307-30085-8

印刷・製本／(株)真興社

**JCLS** <(株)日本著作出版権管理システム委託出版物>

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## 分担研究報告書（卵巣がん）資料3：構造化抄録用文献リスト

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分担研究報告書（卵巣がん）資料4：Ovarian Cancer Treatment Guidelines  
（2004年，日本婦人科腫瘍学会）から転載

# Ovarian Cancer Treatment Guidelines 2004

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Japan Society of Gynecologic Oncology

Sponsorship:

Japan Society of Obstetrics and Gynecology

Japan Association of Obstetricians and Gynecologists

Japanese Gynecologic Oncology and Chemotherapy Study Group

**Edited by: Japan Society of Gynecologic Oncology**

**Publisher: Minoru Ueki**

**Editorial Correspondence:**

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URL: <http://www.jsgo.gr.jp>

Printed by: Kanehara & Co., Ltd.

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# Ovarian Cancer Treatment Guidelines 2004

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## Preface to the English Language Edition

These Guidelines were developed to reduce the differences between institutions in the level of treatment provided to patients with ovarian cancer, by showing the therapies considered appropriate at the present time.

Japan Society of Gynecologic Oncology first set up a committee for the purpose of formulating these Guidelines. The approach taken by the committee was to evaluate relevant papers in this field, published in both Japan and overseas, collate those with high quality evidence based on sound scientific principles, organise the resultant body of information, and put together guidelines reflecting the therapies considered most appropriate.

Although much of the evidence underpinning these Guidelines has come from clinical trials in Europe and North America, in some areas priority was given to independently obtained Japanese evidence and consensus. These Guidelines will therefore need to be subjected to a process of international evaluation. This is one of the reasons for the publication of this English language edition. I look forward to candid and unreserved comments from our overseas colleagues.

Kiichiro Noda  
Honorary Chairperson  
Japan Society of Gynecologic Oncology

## Introduction to Japanese Edition

The first attempt in Japan to produce guidelines for the treatment of gynecological cancers occurred in 1997 when Japan Society of Obstetrics and Gynecology set up the “Exploratory Sub-committee for the Standardization of Treatment of Ovarian Cancer”, chaired by Dr Hiroyuki Kuramoto. This group examined the evidence available at that time from Japan and overseas for the standard treatments for ovarian cancer, and their report was published 3 years later in the Society Journal. These findings were not accorded the status of official guidelines, however, as many were of the opinion that the time was not yet right, and they were not up to the standard expected of guidelines nowadays.

As we entered the new century, the release of the “Stomach Cancer Treatment Guidelines” gave new impetus for the production of cancer treatment guidelines. Japan Society of Gynecologic Oncology (under the ex-President Shiro Nozawa) decided to develop therapeutic guidelines for gynecological cancers, and set up a Guidelines Committee in 2002. The Committee decided to first produce guidelines for the treatment of ovarian cancer, for the reasons that both the incidence and death rate from ovarian cancer are increasing in recent years, and the prognosis is the poorest among gynecological cancers, with about half of all cases in advanced stages at the time of diagnosis.

The purpose of these “Ovarian Cancer Treatment Guidelines” is to provide doctors dealing with ovarian cancer in their everyday clinical practice with information concerning those treatments that have gained broad consensus as the most appropriate at the present time. Accordingly, their role is to provide advice to be considered in providing treatment to patients, not to affect the discretion of clinicians, or place restrictions on the therapeutic options available. The use of these guidelines in medical disputes or lawsuits would also be considered to contravene their purpose. Although Japan Society of Gynecologic Oncology is responsible for the content of these Guidelines, responsibility for the results of treatment belongs to the treating clinician.

In producing these guidelines, a Production Committee and an Evaluation Committee were set up within the Guidelines Committee. The Production Committee decided to make use of the abovementioned Japan Society of Obstetrics and Gynecology Sub-committee report. In their guidelines, they included primary epithelial ovarian cancers, ovarian tumors of low malignant potential, malignant or borderline malignant ovarian germ cell tumors, and their respective recurrences. A treatment algorithm is first given for each tumor type, then the main text for each heading, with explanatory comments and footnotes as necessary. The standards set by the Appropriate Use of Anticancer Drugs Guidelines Committee of Japan Society of Clinical Oncology were followed in assessing the quality of evidence, and the strength of recommendations. The draft guidelines went to the Evaluation Committee, then Society examiners, and were then presented to all the Society members. During this process, a number of suggestions and comments were incorporated into the document. The revised draft guidelines were then submitted to Japan Society of Obstetrics and Gynecology and Japan Association of Obstetricians and

Gynecologists, and after incorporating a number of suggestions from both societies, their approval was also obtained. Final approval was given at the General Meeting of Japan Society of Gynecologic Oncology held in the summer of 2004, leading to the publishing of this document.

It is of course our fervent wish that these Guidelines will be put to good use in the clinical situation. In addition, as we plan to produce revisions on a regular basis, we would be happy to receive criticisms and suggestions from as many clinicians as possible.

Finally, I would like to thank the following people for their hard work in producing these Guidelines: Professor Nobuo Yaegashi and the other Production Committee members, for their tireless and devoted work; the staff at the Editorial Department of Kanehara & Co., Ltd, for their tremendous efforts in editing these Guidelines, and everyone in the Society Office, who undertook the enormous task of collecting and organizing the mountain of paper produced in the process of putting together this document.

August 2004

Professor Yasuhiro Udagawa  
Chairman  
Ovarian Cancer Therapeutic Guidelines Committee  
Japan Society of Gynecologic Oncology

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