Personal statement - Wendy Fisher

I was diagnosed with stage 3C ovarian cancer in November 2010 and had debaulking surgery in December 2010 and started first line chemotherapy in January 2011 with both Carboplatin and Paciltaxel. My first treatment of Paciltaxel resulted in a grade 3 reaction and I was given Carboplatin on its own to complete the six three week cycles of treatment. My CA125 went down from 330 to 12 and my ovarian cancer remained inactive until June 2012.

In June 2012 ovarian cancer was detected in my lymph nodes, across my stomach and a tumour adjacent to my appendicitis. I was then started on second line chemotherapy of Carboplatin and Gemcitabine. Each cycle consisted of a combinational of both Carboplatin and Gemcitabine in week one and Gemcitabine in the second week, with the third week free of treatment. Towards halfway through the treatment I started to have low white blood cells and after the fourth treatment I continued with Carboplatin. At the start of the fifth cycle I was also given Avastin. My cancer is no longer detectable on a CT scan and my CA 125 has returned to 12.

I would like to take part in the consultation as it is acknowledged by the National Institute for Health Research that patient involvement has an impact. As a cancer patient I have direct experience of being treated with two of the drugs listed in the consultation, Paciltaxel for the treatment of my ovarian cancer and Gemcitabine for my recurrent ovarian cancer.

Since being diagnosed with ovarian cancer I have been involved with providing feedback on a cancer symptoms questionnaire for the NHS. My most recent feedback has been to the Department of Health on the Cancer Experience Survey, where I was told that I had made a genuine contribution to the re-development of the initial questionnaire that is due to be sent out to patients in 2013.