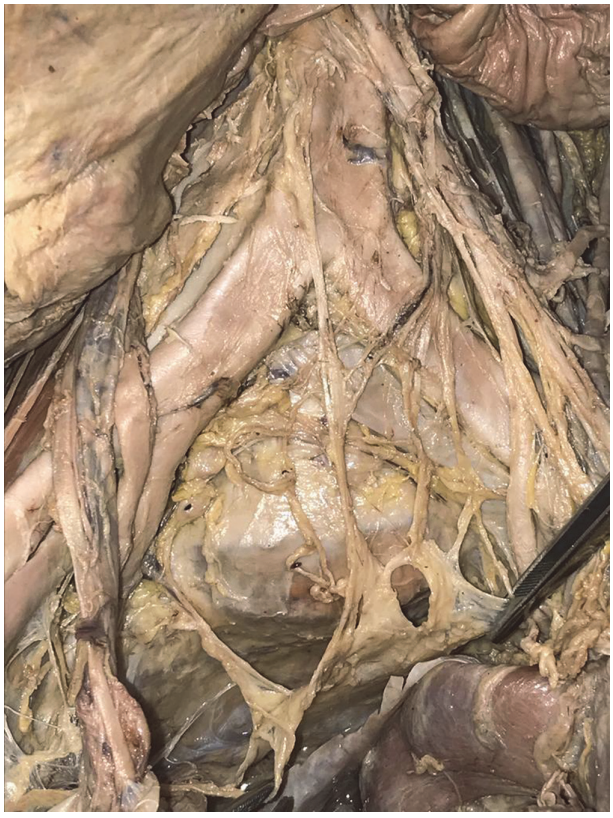

Abstract 2022-VA-445-ESGO Figure 1

Conclusion We highlight in this video the identification and systematization of the most important anatomical structures and landmarks located in the presacral region with the aim of achieving a safe dissection during gynecologic cancer procedures.

2022-RA-583-ESGO SQUAMOUS CELL CARCINOMA OF THE BREAST: 3 SPECIFIC CASES

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Introduction/Background Primary squamous cell carcinoma (SCC) is a very rare malignancy of the breast, that represents only 0.1 to 2% of breast cancers.
Methodology This is a retrospective study of 3 patients treated for squamous cell carcinoma of the breast between 1995 and 2018, at the oncological radiotherapy department in the University Hospital Farhat Hached, Sousse.
Results When diagnosed, the patients were 36, 62, and 69. The reason for seeking consultation was a nodule in the left breast in the case of 2 patients and mastalgia in the right breast in the third. Mammography showed suspicious opacities, ranging from 15 to 34 mm, in the 3 patients with ipsilateral axillary adenopathy in 1 patient. A biopsy was performed and the anatomical pathology indicated breast SCC in the three patients. The extension assessment was negative. One patient underwent neoadjuvant chemotherapy, followed by an intervention of the type Patey. The other 2 were operated on immediately: lumpectomy-axillary dissection in one case and mastectomy axillary dissection in the other. Adjuvant chemotherapy was performed on these 2 patients. The anatomical pathology study showed a damaged lymph node in 2 patients, and the limits were healthy in 2 cases and permeated in the third. Hormone receptors were negative in 1 patient and unknown in the other 2. The 3 patients underwent radiotherapy at a dose of 52.2 Gy (1.8 Gy per fraction) with a boost of 14.4 Gy on the primary tumor bed area in 1 patient. The median follow-up was of approximately 10 years. One patient died from an array of pulmonary and cerebral metastases. The other two are being monitored and in complete remission.
Conclusion Primary squamous cell carcinoma of the breast is rare. The clinical and radiological aspects are not specific. Treatment is based on the surgical option. The prognosis remains controversial.

2022-RA-597-ESGO NEUROENDOCRINE CARCINOMA OF THE BREAST: A CASE REPORT

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Introduction/Background Primary neuroendocrine carcinoma of the breast is a rare histopathological variant. It represents 0.1% of breast cancers.
Methodology We report a case treated in the department of oncology-radiotherapy of Sousse with the aim of detecting the anatomoclinical,therapeutic and evolutionary aspects of this cancer.
Results We report the case of a 52-year-old patient. The history of her disease was marked by the appearance of a nodule of the left breast. An echo mammogram was performed and showed a 2.5 cm solid and irregular nodule in the inner quadrant of the left breast classified as ACR4. This nodule increased in size with the appearance of permeation nodules and bleeding with a new mammogram showing a large tumor in the left breast measuring 14 cm associated with carcinomatous mastitis and homolateral axillary adenopathies. The biopsy concluded to a poorly differentiated neuroendocrine carcinoma of the breast. Hormone receptors were positive, HER2 labelling was negative and Ki67 was evaluated at 80%. the tumor was classified as T4dN1M1a (costal involvement). The patient received 3 courses of FEC100 but due to clinical progression, a second line of VP16-cisplatin-based chemotherapy was indicated.The evolution was marked by an increase in tumor size with spontaneous bleeding.The patient underwent left locoregional radiotherapy at a dose of 50Gy (2Gy per fraction) with a 20Gy boost on the tumor including the costal lesion followed by a left mastectomy.The evolution was marked by adrenal and cerebral progression 8 months after surgery. Given the refractory nature of chemotherapy, only hormone therapy was persued.the patient underwent total brain irradiation radiotherapy at a dose of 20 Gy in 5 fractions with good tolerance.
Conclusion Primary neuroendocrine carcinoma of the breast is a rare entity with a poor prognosis. The literature has been limited to case reports in which the management has been similar to our case.