

related to teratoma. The definitive diagnosis was of mixed germ tumor with endodermal sinus tumor and mature teratoma.

Conclusions The standard treatment for advanced stages for this neoplasm is surgery followed by adjuvant chemotherapy, but in relapses treatment is still controversial. This case reflects the difficult decision between clinical and surgical treatment in rare and selected cases.

IGCS19-0660

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MALIGNANT GERM CELL TUMORS PATIENTS BETWEEN 14 – 39 YEARS, A 3 DECADES EXPERIENCE IN A PUBLIC HOSPITAL 1985 – 2015 SAN BORJA ARRIARAN HOSPITAL

¹R Altamirano*, ¹O Nazzal, ¹E Suarez, ²P Acosta. ¹Hospital San Borja Arriaran, Unidad de Ginecología Oncológica, Santiago, Chile; ²Hospital San Borja Arriaran, Unidad de Ginecología, Santiago, Chile

10.1136/ijgc-2019-IGCS.274

Objectives Describe malignant germ cell tumors of the ovary in patients, between 1985 - 2015 at San Borja Arriaran Hospital (HCSBA) in Santiago, Chile. HCSBA is a public institution that covers about 20% of the Chilean capital population.

Methods Retrospective search in the gynecology oncology and pathology HCSBA units data bases of the following parameters; histology type and age of initial diagnostic. We found a total of 19 records of female patients with malignant germ cell tumors between 14–39 years, that were reviewed and analyzed by 3 members of our unit.

Results The most frequent histology was dysgerminoma (58%), followed by Immature teratoma (21%), mixed germ cell tumors (16%) and yolk sac tumor (5%). 53% of our cases were in patients between 14–20 years old and only 16% older than 30 years.

Conclusions Our findings were similar as those founded in the international literature in prevalence and age related incidence, but we found an increased incidence in Dysgerminoma. We are unable to analyze treatments, because of the variation in the last 3 decades. We can agree that overall survival was related with early stage diagnostic and improved in the last 20 years with the incorporation of adequate chemotherapy, surgical staging and precise pathology techniques.

IGCS19-0695

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MALIGNANT OVARIAN TUMORS IN PATIENTS 14 – 20 YEARS, A 3 DECADES EXPERIENCE IN A PUBLIC HOSPITAL 1985 – 2015 SAN BORJA ARRIARAN HOSPITAL

R Altamirano*, O Nazzal, E Suarez, P Acosta. Hospital San Borja Arriaran, Unidad de Ginecología Oncológica, Santiago, Chile

10.1136/ijgc-2019-IGCS.275

Objectives Describe malignant ovarian tumors in patients 14 - 20 years, between 1985 - 2015 at San Borja Arriaran Hospital

(HCSBA) in Santiago, Chile. HCSBA is a public institution that covers about 20% of the Chilean capital population.

Methods Retrospective search in the gynecology oncology and pathology HCSBA units data bases of the following parameters; histology type and age of initial diagnostic. We found a total of 20 records of female patients with malignant germ cell tumors between 14–20 years, that were reviewed and analyzed by 3 members of our unit.

Results The most frequent histology was germinal tumors (50%) followed by epithelial (40%). The most frequent germinal tumor was dysgerminoma (60%) followed by yolk sac tumor (20%), and immature teratoma (20%). The most common epithelial tumor was mucinous borderline (38%) followed by serous adenocarcinoma (38%) and serous borderline (25%). There were only 2 cases of stromal cancer. 85% of the tumors were early FIGO stage; 60% IA and 25% IC. The median age of diagnostic was 17,5 years.

Conclusions Our findings were similar as those founded in the international literature in prevalence and age related incidence in tumors under 20 years. It is important to establish histologic type and stage to plan a proper conservative surgery and medical treatment

IGCS19-0652

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MALONDIALDEHYDE AND VEGF ARE SEROLOGIC PROGNOSTIC FACTORS AND PREDICT RESISTANCE TO PLATINUM SALTS

R Anghel*, O Trifanescu. Alexandru Trestioreanu Bucharest Institute of Oncology, Radiotherapy II, Bucharest, Romania

10.1136/ijgc-2019-IGCS.276

Objectives Introduction: Ovarian cancer is worldwide the second cause of gynaecological cancer but the commonest cause of gynaecological cancer-associated death. The aims of this study were to determine new serologic prognostic factors and predictive factors for platinum response.

Methods Forty-five patients diagnosed with epithelial ovarian carcinoma stage II-IV between 2010 and 2018, who underwent multimodality treatment (surgery and chemotherapy) were included in the study. Malondialdehyde, a final product of lipid peroxidation as a marker of oxidative stress and VEGF as a marker of angiogenesis were determined before each cycle of chemotherapy.

Results There was an increase in the value of lipid peroxidation, malondialdehyde mean value was 8.2 µmol/100 mL (normal value 4 µmol/100 mL). Malondialdehyde was a prognostic value, elevated levels more than 8 µmol/100 mL were associated with a smaller progression free survival, (HR=2.904, 95% CI 2.2–3.8, p=0.0001) Malondialdehyde predicted resistance to platinum salts and the cut-off value with 80% sensibility was 7.7 µmol/100 mL. VEGF levels were elevated too, mean levels were 1020 pg/mL, normal values <750 pg/mL. There was a strong correlation between malondialdehyde and VEGF (Pearson correlation coefficient was 0.38, p=0.03. VEGF had a prognostic role, patients with elevated VEGF levels had a significant lower progression free survival (HR=2.6, 95% CI 1.7–3.9, p=0.001). VEGF elevated levels correctly predicted platinum resistance and the cut-off value with 80% sensibility and specificity was 1085 pg/mL.