

mobilization on day of surgery. The outcome measures include duration of hospital stay, readmission within 21 days, time taken for return of bowel function, rate of postoperative ileus and incidence of surgical site infections.

Results 30 patients were included in Group E and Group C each. The duration of hospital stay, rate of postoperative ileus and incidence of surgical site infections were significantly decreased in the ERAS group.

Conclusion ERAS protocol has a significant beneficial effect on perioperative outcomes in Gynaecologic oncology patients.

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COVID-19 PANDEMIC IMPACT ON THE AVAILABILITY AND IMPLEMENTATION OF CYTOREDUCTIVE SURGERY AND HYPERTHERMIC INTRAPERITONEAL CHEMOTHERAPY (CRS+HIPEC) PROCEDURES IN PATIENTS WITH PERITONEAL CARCINOMATOSIS AT THE WROCLAW COMPREHENSIVE CANCER CENTRE – A SINGLE-CENTRE STUDY

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Introduction/Background 'The impact of the COVID-19 pandemic on the oncological care system' report shows that the number of new diagnoses of malignant neoplasms in Poland has decreased by 20% and there has been a decrease by 10–15% in the area of oncological surgery procedures (<https://www.zwrotnikraka.pl/influencing-pandemic-covid-19-na-system-oncological-care/>). It is also known CRS+HIPEC procedures in the treatment of patients with primary and secondary peritoneal neoplasms have been performed in Poland in insufficient amounts for many years (<http://www.chirurgia-onkologiczna.pl/images/files/hipec.pdf>). The aim of the study was to analyse the changes in the availability and implementation of CRS+HIPEC procedures performed at the Wrocław Comprehensive Cancer Center (WCCC) Poland, during the COVID-19 pandemic.

Methodology Demographic, clinical, oncological and technical aspects database of all CCCW patients undergoing the CRS+HIPEC procedure was created. Statistical analysis of the data was carried out using the Statistica version 12.5 (StatSoft) program, with particular emphasis on the period of the COVID-19 pandemic (from 03.2020).

Results In the period from 01.2014 to 04.2022, a total of 232 CRS+HIPEC procedures were performed at CCCW, on average 28 per year (range 20–37). During the COVID-19 pandemic (from 03.2020), after the initial complete suspension of CRS+HIPEC procedures (03–05.2020), their dynamic growth occurred – 72 procedures were performed in the period 06.2020 – 04.2022 in total. The main indications were ovarian (40%) and colorectal (39%) cancers. During the COVID-19 pandemic, the Clavien-Dindo grade III and IV complication rate (14%) did not change, and there were no perioperative deaths recorded.

Conclusion In the era of the COVID-19 pandemic, CRS+HIPEC procedures remain a safe and promising therapeutic option for selected patients with primary and secondary peritoneal cancers.

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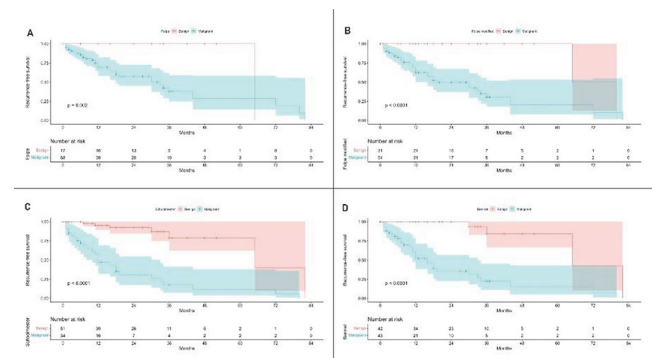
UTERINE PECOMA AND PROGNOSTIC VALUE OF THE PROPOSED CLASSIFICATION SYSTEMS: A RETROSPECTIVE STUDY, SYSTEMATIC REVIEW, AND METANALYSIS

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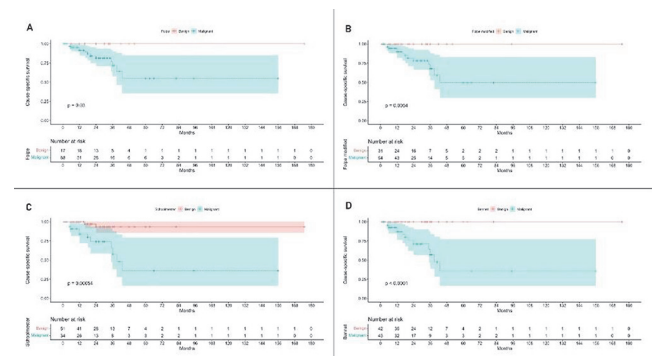
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Introduction/Background Perivascular epithelioid cell tumors (PEComas) is a rare subtype of mesenchymal tumors composed of perivascular epithelioid cells. The main concern after the diagnosis is predicting the disease behavior: four classification systems have been proposed for this purpose based on size, pathological characteristics, and immunohistochemical characteristics.

Methodology We retrospectively reviewed the prospectively collected pathologic registry to identify all cases of uterine PEComa diagnosed and treated at our center. Moreover, we conducted a systematic review of the literature to identify all published cases of uterine PEComa pathologically confirmed. For each identified case with available data, we applied all the proposed classification systems (FOLPE, FOLPE modified, Bennet, and Schoolmester) and assessed their performance with cox regression analysis.



Abstract 2022-RA-1535-ESGO Figure 1 Recurrence-free survival Kaplan meier curves. A: Folpe system; B: Folpe modified system; C: Schoolmester system; D: Bennet system



Abstract 2022-RA-1535-ESGO Figure 2 Cause-specific death Kaplan meier curves. A: Folpe system; B: Folpe modified system; C: Schoolmester system; D: Bennet system

Results We identified seven cases of uterine PEComa diagnosed and treated at our center. The search strategy identified 51 papers for a total of 121 cases of uterine PEComa. The uterine corpus was the most frequent localization (n=55; 45.7%), and uterine bleeding was the clinical presentation in 36 (32.5%) cases. In most cases, the diagnosis was at the final pathological examination (n=39; 83%). Among those who recurred or died due to disease, the median time to recurrence was 18 (2–82; IQR 4–21.7) months and the median time to death was 17.5 (5–43; IQR 12–35) months. The malignant group reported a higher rate of recurrence and cause-specific death than the benign group in all classifications. The Bennet system (figure 1–2) reported the highest HR for relapse and death due to PEComa in the malignant group versus the benign group (HR 14.17; 95% CI 4.29 – 46.72 for relapse; HR 33.17, 95% CI 4.39 – 4246.79 for death).

Conclusion Preoperative diagnosis of uterine PEComa is uncommon without specific clinical presentation. Among proposed classification systems, the Bennet system reported the highest ability to distinguish between benign and malignant behaviors.

2022-RA-1561-ESGO GATA3 EXPRESSION IS SIGNIFICANTLY CORRELATED WITH OESTROGEN RECEPTOR EXPRESSION, BUT NOT CLINICOPATHOLOGICAL FEATURES IN BREAST CANCER

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Introduction/Background Breast cancer represents a heterogeneous disease with different biological profiles. Regardless of recent developments in disease management, breast cancer remains a disease with a lifetime recurrence risk. GATA binding protein 3 (GATA3) represents a potential biomarker of breast cancer with prognostic properties. The aim of this study was to evaluate the correlation of GATA3 expression with clinico-pathological features of more aggressive breast cancer.

Methodology Women were recruited prospectively to this study between February 2019 – March 2021 at the University Medical Centre Maribor, Slovenia. Clinical data was analyzed in correspondence to GATA3 staining. Staining scores were determined according to unit standards with multiplying the percentage of cancer cells and intensity score. A final score of low, medium or high expression of GATA3 was determined by a board certified pathologist. Continuous variables were expressed as median variables (standard deviation) and proportions were reported as percentages. Immunohistochemical scoring was analyzed using a non-parametric test to compare groups. All analyses were done using SPSS for Mac.

Results Sixty-one women with breast cancer participated in this study. The median age was 64 years (min 31 – max 88). Most women had invasive ductal carcinoma (n=46, 77%), followed by invasive lobular carcinoma (n=9, 14.8%) and other histotypes (n=5, 8.3%). GATA3 immunohistochemical expression was not connected to lymph-node metastasis ($p>.253$), lympho-vascular invasion ($p>.103$), grade ($p>.481$), tumour size ($p>.335$), progesterone expression ($p>.763$), Ki67 expression ($p>.669$) or age at time of diagnosis ($p>.267$). GATA3

expression was only significantly connected to oestrogen receptor expression ($p<.030$).

Conclusion GATA3 significantly correlates with ER receptor expression, however more detailed large group analyses are needed for clinicopathological comparisons among different histological subtypes or other markers.

2022-RA-1567-ESGO PAPILLARY BREAST CARCINOMA: CLINICOPATHOLOGICAL CHARACTERISTICS & PROGNOSIS

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Introduction/Background Breast cancer is the most prevalent type of cancer in women. Invasive papillary carcinoma (IPC) is a rare pathological type that accounts for around 3% to 6% of all invasive breast cancers. It is linked to an increased risk of axillary lymph node metastases and lymphovascular invasion. Local recurrence seems to be more frequent.

Methodology Data of 70 patients were reviewed retrospectively. Thirty of them were included in our study between 2004 and 2022,

Results All of the patients were female, with a mean age of 62. The right breast was the most affected. The tumor was largely situated in the outerupper quadrant. In 76 percent of cases, a breast lump and an axillary lymph node were found, with 20 percent of cases being metastatic. The tumor was classified as T2N1M0 in 50% of cases. ultrasound examination showed a cystic or solidocystic appearance. In the majority of cases. The mean histological tumor size was 26 mm. Immunohistochemical studies revealed the positivity of hormonal receptor in 73% and the negativity of HER in all cases. Age, lymphovascular invasion, and tumor necrosis were all significantly correlated to the recurrence-free and overall survival. Local recurrence was observed in 6% of patients. Five-year recurrence-free survival and overall survival rates were 87 and 88 percent, respectively.

Conclusion IPC is characterized by aggressive clinicopathologic features. Their prognosis is thought to be poorer than other breast malignancies such as invasive ductal carcinoma. However our study showed high rates of survival and low incidence of recurrence

2022-RA-1583-ESGO EPIDEMIOLOGICAL & HISTOPATHOLOGICAL CHARACTERISTICS OF BREAST CANCER IN TUNISIA: A RETROSPECTIVE STUDY

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Introduction/Background Breast cancer is a serious public health issue all over the world. Despite screening programs, the incidence of locally advanced tumors remains high in developing countries. This study aimed to investigate breast cancer's epidemiological and histopathological characteristics in Tunisia.