

(log-rank=0.79) and OS (log-rank=0.8) were found. With a median follow-up of 63.76 months, 13 patients (11.9%) recurred. LND was not found to be protective for relapse ( $p=0.77$ ). However, among LND patients, the presence of lymph node metastasis (6/71,8.4%) was significantly associated with recurrence ( $p=0.01$ ).

**Conclusion** The execution of systematic lymphadenectomy for aEOC staging did not influence survival outcomes. The presence of lymph node metastasis remained the main adverse prognostic factor associated with recurrence.

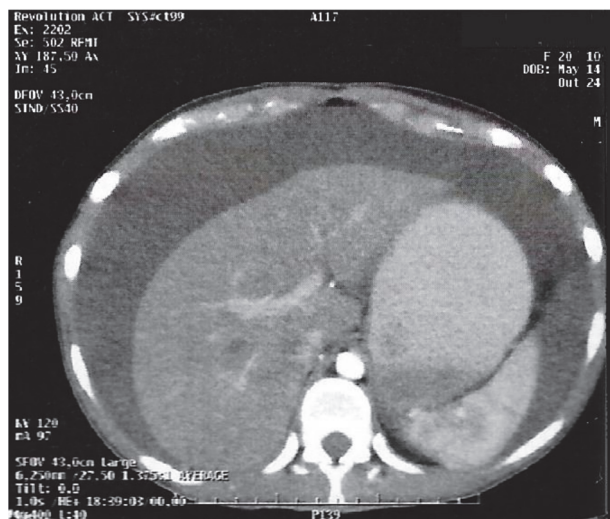
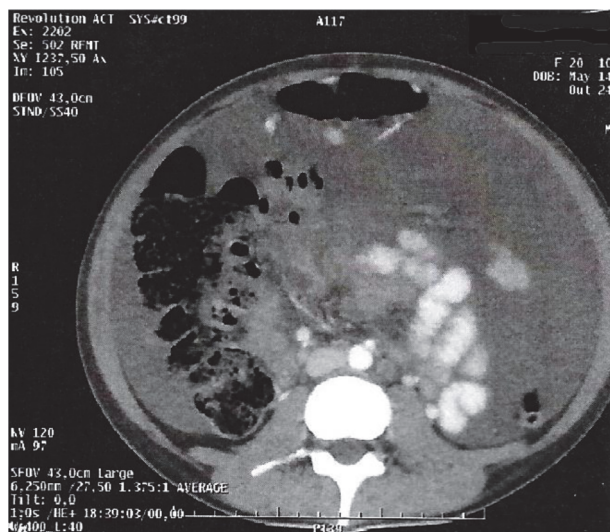
## IGCS20\_1175

### 184 ENDODERMAL SINUS TUMOR OF THE OVARY IN A TWENTY-YEARS-OLD YOUNG WOMAN

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Endodermal sinus tumors are the second most common germ cell malignancy, representing 20% of these tumors. They



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manifest with increased abdominal volume, pain, torsion or rupture of the tumor. They are usually unilateral, large size and manifest with an elevation of alpha-fetus protein (AFP) between 20 and 1000 ng/ml. They show extremely fast growth. Advanced stages have higher recurrence rates. Survival for these types of tumors increased significantly with the use of chemotherapy regimens.

- The case presents a young woman with advanced disease, whose first manifestation was thrombosis of the right jugular, subclavian and axillary veins.
- Twenty-year-old Caucasian healthy woman hospitalized due to cervical pain and right upper limb edema, diagnosed with right jugular, subclavian and axillary vein thrombosis. CT images showed bilateral pleural effusion, massive ascites, a large, expansive solid cystic lesion in the pelvic cavity and multiple solid peritoneal nodules. Tumor markers showed negative Beta HCG, AFP 1119.3 ng/ml, CA 125 284.0 IU/ml, CA19-9 10UI/ml and CEA 1.0 ng/ml. She underwent radical surgery and drained eight liters of ascites. Peritoneal carcinomatosis and a solid lesion in the left ovary measuring 17 × 16 × 9 cm were evidenced. Anatomic pathological result: malignant neoplasm suggestive of a yolk sac tumor of the left ovary compromising the sac fundus, diaphragmatic dome, parietal, pelvic and vesical peritoneum, subhepatic nodule, cecal appendix and two of the 67 isolated lymph nodes. Positive ascitic fluid for malignancy. FIGO T3N1M1 staging. Immunohistochemistry compatible with endodermal sinus tumor. Five cycles of BEP<sub>x3-4</sub> were performed. AFP after chemotherapy 2.8 ng/ml. Imaging exams without evidence of disease.

## IGCS20\_1177

### 186 VALIDATION OF THE HPV IMPACT PROFILE (HIP) IN LEBANESE WOMEN WITH HUMAN PAPILLOMA VIRUS OR ASSOCIATED LESIONS

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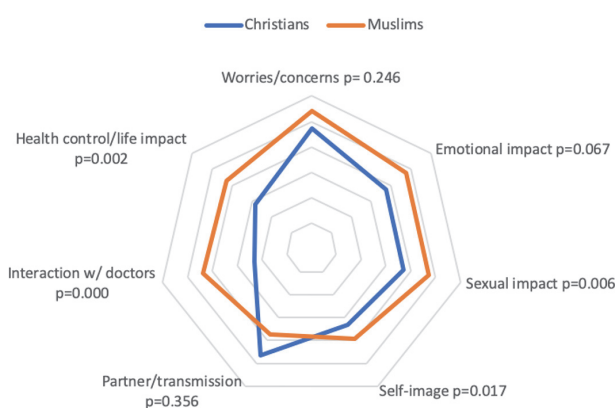
**Introduction** ‘HPV impact profile’ questionnaire, created by the team of Merck and coll. was one of the first and most specific tools evaluating the psychological impact of the most frequent gynecological lesions linked to HPV. This study aimed to translate the ‘HIP’ questionnaire into Arabic and to study its validity in a sample of Lebanese females.

**Methods** The HIP questionnaire was translated to Arabic following the scheme offered by Beaton et al. It was then administered to a sample of 118 Lebanese women infected with HPV or screened for HPV associated lesions, in parallel with the Hospital anxiety and depression scale (HADS) questionnaire.

**Results** The internal consistency of the HIP questionnaire was weak as alpha Cronbach coefficients of most of the domains were low. Therefore, the study of the composite matrix resulted in the improvement of the internal consistency after elimination of some items. The ‘adapted domains’ were created after inverting the scores of items with positive implications and similar studies were

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Distribution modes	Domains	Items	$\alpha$ Cronbach Coefficients	Modifications (remaining items)	$\alpha$ Cronbach Coefficients
Standard domains	Worries/concerns	Items 7,12,13,15,16,17,18,19,8,20	0.828		
	Emotional impact	Items 2,3,5,8,6,14	0.571	Items 2,3,5,8	0.812
	Sexual impact	Items 24,6,25	-0.020	No possible modifications	
	Self-image	Items 1,10,11,8,23	0.267	Items 11,8,23	0.706
	Partner/transmission	Items 9,21,8,22	0.440	Items 21,8,22	0.751
	Interaction w/ doctors	Items 27,28,8,29	0.33	Items 28,8,29	0.706
	Health control/life impact	Items 4,6,8,26	0.363	Items 4,6,6	0.795
Adapted domains	Worries/concerns	Items 7,12,13,15,16,17,18,19,8,20	0.828		
	Emotional impact	Items 2,3,5,8,6,14,8	0.798		
	Sexual impact	Items 24,6,21,6	0.669		
	Self-image	Items 1,9,10,11,8,23	0.680		
	Partner/transmission	Items 9,9,21,8,22	0.313	Items 21,8,22	0.751
	Interaction w/ doctors	Items 27,28,8,29	0.811	Items 28,8,29	0.706
	Health control/life impact	Items 4,6,8,24	0.654		



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conducted on these domains. Then, the Composite Reliability (CR) and the Average Variance Extracted (AVE) of all the domains were analyzed as well as the Heterotrait-monotrait ratio of correlation. Finally, a statistically significant correlation was found between the total scores of the HIP and professional status and religion.

**Conclusion** The final version of the HIP presents good psychometric properties, allowing its use in clinical trials as well as in clinical practice in order to evaluate the quality of life in women with HPV.

## IGCS20\_1178

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### COMPARING LYMPH NODE STAGING MODALITIES IN HIGH RISK ENDOMETRIAL CANCERS: PERIOPERATIVE AND LONG-TERM CLINICAL OUTCOMES IN A COMMUNITY-BASED COMPREHENSIVE CANCER CENTER

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**Objectives** There is limited data on survival outcomes for patients with high risk endometrial cancer (EC) undergoing sentinel lymph node (SLN) mapping to evaluate lymph node metastasis. Our study aims to compare operative and survival outcomes in high risk EC patients who underwent SLN mapping or lymphadenectomy (LND).

**Methods** From 2014–2020, we retrospectively compared all patients with pathology confirmed grade 3 or type II EC histology who underwent SLN or LND as part of their staging surgery. Kaplan-Meier estimates and Cox regression models were used to analyze and predict recurrence and survival outcomes.

**Results** 258 charts were reviewed. 102 and 103 patients were included in the SLN and LND groups, respectively. Demographics, cancer stage and histology were not statistically different between groups ( $p>0.05$ ). SLN detection rate was 97.1%. Bilateral mapping was achieved in 87.3% of patients. Nodal metastasis occurred in 22.5% in the SLN group and 24.3% in the LND group ( $p>0.05$ ). Rates of adjuvant therapy were similar. Median follow up for the SLN group was 13.5 months and 15.5 months in the LND group. PFS rates were 75.7% and 78.0% ( $p=0.67$ ) and OS rates were 91.3% and 91.7% ( $p=0.58$ ) for SLN and LND groups, respectively. A multivariate cox proportional hazards regression showed stage I disease was protective against recurrence (HR 0.24, 95% CI 0.08–0.72) and death (HR 0.13, 95% CI 0.02–0.84)

**Conclusions** This preliminary data demonstrates a high SLN detection rate in patients with high risk EC and no significant differences in PFS or OS as compared to LND.

## IGCS20\_1180

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### SEX CORD TUMOR WITH ANNULAR TUBULES: ABOUT FOUR CASES

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**Introduction** Sex cord tumor with annular tubules (SCTAT) represents less than 1% of ovarian neoplasms. It includes two forms; a form associated with Peutz-Jeghers syndrome (PJS) which is usually benign, and the other one, sporadic, with malignant behavior. We aim to study the clinical, radiological, and pathological particularities of SCTAT.

**Methods** We report four cases of SCTAT treated in Salah Azaiz Institute of Oncology, Tunis, Tunisia between 2000 and 2013.

**Results** The average age was 30 years, ranging from 4 to 76 years. The age of our patients ranged from 10 to 32 years. One of our patients had a concomitant diagnosis of PJS. The tumor was unilateral in all cases and was revealed by precocious puberty in one case. Gross findings showed a solid tumor, with a yellow cut surface. The size ranged from 0,5 to 28 cm. The morphological features were characteristic but intermediate between granulosa and Sertoli cells. Immunohistochemistry showed that tumor cells expressed inhibin and calretinin. The treatment was surgical, often conservative.