lymphadenectomy (Group A). Forty-eight percent of patients (56/116) underwent SLN mapping with ultrastaging (Group B). Histological findings were used as the reference standard.

Results Patients with positive node were 11 (18.3%) and 14 (25%) in group A and B, respectively. In group A, 10 were correctly identified by PET/CT, with only 1 FN case. Sensitivity, specificity, accuracy, positive-predictive value-PPV and negative predictive value-NPV of PET/CT for pelvic LN metastases resulted 90.1%, 98%, 96.7%, 90.1%, 98%, respectively. In group B, 4 were correctly identified by PET/CT, while 10 cases resulted falsely negative. Sensitivity, specificity, accuracy, PPV, and NPV of PET/CT for pelvic LN metastases were 28.5%, 97.7%, 80.4%, 80%, 80.3%, respectively. In 5 of 10 FN PET, micrometastases, and/or ITC were detected by SLN ultrastaging. Overall, sensitivity, specificity, accuracy, PPV, and NPV of PET/CT resulted 56%, 97.8%, 88.7%, 87.5%, 89%, respectively.

Conclusions PET/CT demonstrated high specificity in detecting pelvic LN metastases and its high PPV can be useful to refer patients to appropriate debulking surgery. Ultrastaging of SLN increased the identification of metastases (18.3%-25%) not detectable by PET/CT because of its spatial resolution, increasing false-negative PET/CT findings. The combination of both modalities seems promising for nodal staging purpose.

IGCS19-0389

262 OBESITY-RELATED NEUTROPHILIA IN ENDOMETRIAL CANCER

¹M Cheung*, ¹O O'Brien, ²D Byrne, ²T Geoghegan, ³C LeRoux, ⁴D Brennan. ¹Mater Misericordiae University Hospital, Gynaecology, Dublin, Ireland; ²Mater Misericordiae University Hospital, Radiology, Dublin, Ireland; ³University College Dublin, Conway Institute, Dublin, Ireland; ⁴Mater Misericordiae University Hospital, University College Dublin School of Medicine- Catherine McAuley Research Centre, Dublin, Ireland

10.1136/ijgc-2019-IGCS.262

Objectives Obesity and metabolic syndrome are significant risk factors for endometrial cancer (EC). This case-control study aimed to assess the relationship between visceral fat and systemic inflammatory markers in EC and cervical cancer (CC).

Methods ImageJ software was used to measure the visceral fat percentage (VFP) on a L3/4 CT slice, for 22 EC, 20 CC. Pre-treatment full blood counts were used to assess inflammatory ratios.

Results Mean BMI (32.56 vs 25.87 kg/m², p=0.03) and VFP (33.4 vs 24.0%, p=0.0018) was higher in EC compared to CC patients. BMI did not correlate with VFP. Mean pre-operative leukocytes (8.5 vs 7, p=0.044) and neutrophils (5.85 vs 4.32, p=0.019) were higher in EC patients. There was no difference in the lymphocyte-neutrophil-ratio or lymphocyte-monocyte-ratio, however the neutrophil-monocyte-ratio (NMR) was higher in the EC group (11.27 vs 8.28, p=0.018). This was due to the significant neutrophilia in the EC group (68.9% vs 60.5%, p=0.037) as there was no difference in monocytes in either group. No inflammatory ratio correlated with VFP.

Conclusions VFP and BMI do not correlate, and no white cell ratio correlated with either value in this study. Obesity related neutrophilia may be an important target in EC that warrants further investigation

IGCS19-0521

263 RADIOMICS OF THE PRIMARY TUMOUR AS A TOOL TO IMPROVE 18F-FDG-PET SENSITIVITY IN DETECTING NODAL METASTASES IN WOMEN WITH APPARENT EARLY ENDOMETRIAL CANCER

¹A Buda*, ²C Crivellaro, ³E Bernardi, ¹D Giuliani, ⁴F Elisei, ¹M La Manna, ⁴L Guerra, ¹M Delle Marchette, ¹T Grassi, ¹ML Di Meo, ¹M Adorni, ¹N Bellante, ²C Landoni, ⁵R Fruscio. ¹Unit Gynecology Oncology Surgery- San Gerardo Hospital- Monza, Obstetrics and Gynecology, Monza, Italy; ²University of Milano-Bicocca, Nuclear Medicine, Monza, Italy; ³University of Milano-Bicocca, Medicine and Surgery, Monza, Italy; ⁴San Gerardo Hospital, Nuclear Medicine, Monza, Italy; ⁵University of Milano-Bicocca, Obstetrics and Gynecology, Monza, Italy

10.1136/ijgc-2019-IGCS.263

Objectives In this study we investigated the role of radiomic applied in women with endometrial cancer underwent 18F-FDG PET scan, to evaluate if imaging features computed on the primary tumor could improve sensitivity in detection of lymph node (LN) metastases.

Abstract 263 Figure 1