STARTING A HIPEC PROGRAMME IN A LOW RESOURCE SETTING

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Objectives Hyperthermic IntraPeritoneal Chemotherapy (HIPEC) after maximal cytoreduction is a promising modality of treating women with ovarian cancer. In order to determine the feasibility of setting up a HIPEC programme in India, we document our initial experience.

Methods Ethics Committee clearance was obtained to start the programme. The electronic medical records of all patients who underwent HIPEC in our department was reviewed.

Results A total of 14 patients underwent HIPEC in the first 2 years: one primary, 6 interval and 7 recurrent cytoreductions.

The women had a mean age of 46.9 years (36 to 62), median performance score of 1 (0 to 2) and a median peritoneal carcinomatosis index (PCI) of 10 (2 to 25).

The histology was serous in 9, mucinous in 4 and endometrioid in one.

Four patients had bowel resection of whom 2 had an end ileostomy and one had an end colostomy. The median duration of surgery was 9 hours (5 to 10) and the median completeness of cytoreduction score was 1 (0 to 2). The drugs used in HIPEC were Cisplatin and Oxaliplatin. The median duration of hospital stay was 9 days (6 to 21).

Two patients were readmitted to hospital and 3 patients had re-laparotomy. The main complications were venous thromboembolism in one, bleeding in one and wound dehiscence in one.

Conclusions Cytoreductive surgery with HIPEC is feasible in a low resource setting with acceptable morbidity where the main limitations are non-availability of operating time and patient’s ability to pay for treatment.

THE USE OF CURETTAGE IN THE MANAGEMENT OF DIAGHAPMATIC INVOLVEMENT IN PATIENTS WITH PRIMARY ADVANCED-STAGE OVARIAN OR PERITONEAL CANCER

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Objectives To know the usefulness of diaphragm curettage to remove all metastasis in patients with primary advanced-stage ovarian or peritoneal cancer, with diaphragmatic involvement.

Methods In 16 consecutive patients with advanced primary epithelial ovarian or peritoneal cancer with diaphragmatic involvement we performed diaphragm curettage with a big sharp curette (Aesculap N 16) as a part of cytoreductive surgery, after liver mobilization. We used narrow curettes in areas with difficult access. The procedure had limited bleeding controlled by coagulation and hot compress.

Results In all 16 patients, the curettage removed completely the tumor implants, in one or both diaphragms, without residual disease. In the postoperative time, 3 patients had basal pleural effusion, reasorbed spontaneously.

Conclusions Diaphragmatic curettage is a safe and effective procedure to treat the diaphragm involvement in cytoreductive
surgery of ovarian or peritoneal carcinoma, decreasing the morbidity of the surgery.

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MRNA AND PROTEIN EXPRESSION OF E-CADHERIN AND VIMENTIN AND PS3 IMMUNOHISTOCHEMISTRY IN EPITHELIAL OVARIAN CANCER

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Methods Women with malignant and benign epithelial ovarian tumours were studied. Sample size was calculated with 80% power and 5% level of significance; 22 cases (EOC) and 22 controls (benign ovarian tumour) were recruited. m-RNA and protein expression of E-cadherin and vimentin was done by real time PCR and IHC staining and p53 by IHC. Peritoneal extent of disease was calculated by peritoneal carcinomatosis index (PCI) and tumour resection by completeness of cytoreductive score (CCS) and correlations derived.

Results In advanced EOC, positive correlation was found between PCI and CCS with correlation coefficient of 0.495, p-value < 0.0193. When PCI less than 10 (n=10), CCS0 was achieved. m-RNA expression of E-cadherin was 2.126 times downregulated and of vimentin 2.733 times upregulated in malignant vs. benign tumours. Protein expression of E-cadherin was high in benign vs. malignant EOC (p=0.387) and vimentin protein expression was overexpressed in EOC (p=0.007). No correlation was obtained between EMT markers and metastatic deposits, lymph node or bowel involvement. p53 was expressed in 90.9% (n=10) high grade serous carcinoma and none in low grade serous carcinoma.

Conclusions Expression of E-cadherin decreased and Vimentin increased in EOC which is in synchrony with EMT pathway, however larger studies are needed to derive an association between these markers and extent of disease.

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A CASE STUDY ON OVARY METASTATIC MELANOMA

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Abstracts