diagnosis of atypical polypoid adenomyoma. Two years later, patient was evaluated for recurrent local disease. At that time, pathologic examination revealed typical polypoid adenomyoma with presence of few glands with characteristics of well differentiated endometrioid adenocarcinoma stage IA, grade I. 

**Results** After a complete evaluation of cancer staging and a detailed explanation, patient rejected conventional surgical treatment and fertility preserving treatment was started. Progesterin therapy via an intruterine device (IUD) was administered. One year later, IUD was removed and patient underwent IVF cycle with a transfer of 3 embryos without success. At the age of 43, pregnancy was achieved in IVF cycle with administration of hCG.

**Conclusions** Although there are existing evidence of effectiveness for using IUD progesterin therapy in endometrial hyperplasia, studies for its use in treatment of endometrial cancer are lacking. We report a case of successful use of levonorgestrel - IUD alone in fertility preserving treatment followed by achieved pregnancy.

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**421** CADMIUM INTAKE AS A PROGNOSTIC FACTOR IN ENDOMETRIAL CANCER: A SWEDISH COHORT-BASED STUDY

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**Objective** Metalloendocrinology is a newly-termed interdisciplinary field. It was established due to the high importance of connections between inorganic chemicals and hormonal mechanisms in the human body. The estrogenic effect of cadmium in hormone-related tumours, such as endometrial cancer (EC), is an excellent example of it. Therefore, the present study aimed to investigate the role of dietary cadmium intake in the prognosis of EC.

**Methods** The study is based on a large cohort of Swedish women (N=416) who had a hysterectomy and bilateral salpingo-oophorectomy due to EC at the Karolinska University Hospital Solna between 2007 and 2012. Patients from the cohort answered particular questions concerning their lifestyle and dietary habits using the food frequency questionnaire (FFQ). The dietary cadmium intake from each food item was estimated using the FFQ, comprehensive database on the cadmium content, and average daily consumption of different food items. The calculated metal intake was grouped into tertials. The tertials were analysed in connection with different tumour characteristics and clinical outcomes of EC.

**Results** The average estimated cadmium intake per day in the cohort was 13.9 μg/day. Interestingly, the cadmium input from cereal products and vegetables, mainly considered healthy, in the cohort was dominant. Among 3366.6 person-years of follow-up a total, of 54 incident cases of recurrent EC were identified. A statistically significant association between dietary cadmium exposure and progression-free survival was observed in the cohort (IRR=1.421, 95 CI=.775–2.605, p=0.041).

**Conclusions** Our results support the hypothesis that dietary cadmium intake may have a prognostic role in patients with EC.

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**423** FERTILITY-PRESERVING SURGERY IN LOW-GRADE ENDOMETRIAL STROMAL SARCOMA WITH DIFFUSE PERITONEAL DISEASE

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**Objective** Objective of the study is to share the experience of a rare disease, Low-grade Endometrial Stromal Sarcoma, with few reports in the literature and the lack of standardization in therapy, especially in the preservation of fertility in young patients.

**Methods** Description of a case report for diagnosis and cytoreductive surgery to the definition of the exception conduct discussed in interprofessional meeting, literature survey and opinion of centers with greater expertise in oncology.