Results Our study included 110 patients with so many pap smears: atypical squamous cells of undetermined significance (48%), high grade squamous intraepithelial lesions (HSIL) (11%), atypical squamous cells cannot exclude HSIL (22%), low grade squamous intraepithelial lesions (14%), atypical glandular cells (5%). Colposcopy showed atypical transformation: grade 1 (ATG 1) in 34% and grade 2 (ATG 2) in 66% of cases. Cervical biopsy revealed normal cervical squamous mucosa in 8%, cervicitis in 72% and condyloma in 8%. A case of CIN 1 was found in 6%, CIN 2 in 3% and CIN 3 in 2%. Cervical biopsy revealed one squamous cell carcinoma. Colposcopy sensitivity was 77% and specificity of 37%. The positive predictive value was 24% and the negative predictive value was 86%. For high grade dysplasia, colposcopy had a sensitivity of 100%, a specificity of 37%. A conization was performed in nine patients for squamous cell carcinoma or high grade dysplasia. Conization was performed in a patient with cyto-histological discordance. Histological study revealed an in situ carcinoma in two cases.

Conclusions Our results showed that ATG 1 lesions at colposcopy regardless of the FCU abnormalities are predictive of benign biopsy lesions. We also tend to overestimate the ATG 2 lesions.

IGCS19-0625

ALARMING RISE IN CERVICAL CYTOLOGICAL ABNORMALITIES IN WOMEN LIVING IN JORDAN

Objectives Cervical cancer is preceded by a group of epithelial cell abnormalities. However, there is insufficient data on cervical abnormalities in Jordan and the Middle East at large. The current study aimed at determining the prevalence of different cytological abnormalities in women in Jordan. In addition, it aimed at assessing the age specific cytological abnormalities in these women and analyzing the changing trends of epithelial cell abnormalities in cervical smear over a period of 15 years compared in three periods of five years each.

Methods 6,455 conventional cervical Papanicolaou (Pap) smear results obtained between January 2000 and December 2014 were retrospectively analyzed. Results: Out of the 6,455 Pap smear results analyzed, 5,645 (87.5%) were found adequate for reporting.

Results A total number of 801 (14.2%) cases had cervical epithelial abnormalities. A significant increase in cytological abnormalities was observed between 2000 and 2014. In addition, a significant increasing trend in cervical cytological abnormalities was noted between 2000 and 2014. The highest percentage of cytological abnormalities (20.1%) was found in women younger than 25 years old. In all of the age groups, the low-grade squamous intraepithelial lesions (LSIL) cytological abnormality was the most prevalent.

Conclusions Invasive cervical cancer is still a killer for young women in the developing countries. The present study may reflect a change in the sociosexual behavior over the last 15 years. The current work highlights the importance of awareness campaigns on the importance of cervical smear and the urgent need for initiating a cervical screening program in Jordan.
HDR brachytherapy 4x7Gy (GEC-ESTRO recommendation), weekly Cisplatin 40 mg/m² and two-time hyperthermia. Hyperthermia, using one heating antenna and one thermometer inserted into applicators placed in the patient’s cervical/uterus canal, was used. The BSD500 apparatus emitting radio waves (915MHz), was used for this operations. Elevated local temperature up to 41°C was maintained for one hour and the associated brachyradiotherapy fraction was realized within 1 hour after hyperthermia. The median number of chemotherapy cycles was 3,3 (0–6). The time of observation was min 63 months.

**Results**
Toxicity according EORTC/RTOG scale was assessed:
Early toxicity were not observed. The late toxicity from bladder I° and II° in 4 (8%) patients, IV° in 1 (2%)-fistula were noted. Toxicity from rectum I° and II° in 8 (16%) patients, IV° in 2 (4%) were sighted. Progression of disease in 5 of treated women were noted: 1 local relapse, 2 distant metastases and 2 patients with both way of recurrences.

**Conclusions**
Concomitant radiochemotherapy and hyperthermia is an effective and safety treatment in women with IIIB stage cervical cancer. The number and causes of toxicity should and will be analyzed in the greater group of patients.

**IGCS19-0672**

**TUMOR HISTOLOGY AS PROGNOSTIC IN LOCALLY ADVANCED CERVICAL CANCER**

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**Objectives**
Evaluate tumor histology as prognostic factor in terms of disease-free survival (DFS) and overall survival (OS) in a retrospective cohort of patients with LACC in a reference center.

**Methods**
Records of patients treated with concurrent chemoradiation at Instituto Nacional de Cancerologíap de Mexico with confirmed cervical cancer stages IB2-IVA were reviewed. A descriptive and comparative analysis was conducted. DFS and OS were calculated for each histology with the Kaplan-Meier method and compared with Log-rank test, results were considered statistically significant if p<0.05.

**Results**
From 2005 to 2014 a total of 1065 records were retrieved, clinical stages were IB2 76 (7.1%), IIA1 23 (2.2%), IIA1 21 (2%), IIB 597 (56.1%), IIIA 27 (2.5%), IIIB 273 (25.6%), IVA 48 (4.5%) of which 917 (86.1%) had Squamous Cell Carcinoma(SCC), 105 (9.9%) Adeno Carcinoma(AC), 7 (0.7%) Adeno Squamous Carcinoma (ASC), and 36 (3.4%) other histologies. Twenty-four (2.3%) were well differentiated, 778 (73.1%) moderately, and 263 (24.6%) poorly differentiated tumors. Mean Disease-free survival for SCC was 10 years, 9 for AC, and 6.9 for ASC, without a statistically difference (p=0. 365), same findings occurred for OS, mean survival was 11 years, not finding impact of histology (p=0.89). Well differentiated tumors had OS of 100% at 5.8 years which was statistically better when compared with other grades (p=0.032).

**Conclusions**
DFS and OS were comparable among different tumor histologies and was considerably better in well differentiated tumors, other factors should be considered.

**IGCS19-0647**

**FACTORS INFLUENCING RECURRENCE IN PATIENTS UNDERGOING LAPAROSCOPIC TREATMENT FOR APPARENT EARLY STAGE CERVICAL CANCER**

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**Objectives**
To evaluate oncological outcomes and predictors of recurrence in patients undergoing laparoscopic treatment for apparent early stage cervical cancer (CC).

**Methods**
A single-centre retrospective study was conducted among patients who had radical surgery for FIGO stage (2009) IA (positive LVSI) – IB1 at Women’s and Children Hospital of Varese (Italy) between January 2006 and December 2018. Radical hysterectomy (Querleu and Morrow B-C1 Classification) with or without lymph node dissection according with tumour characteristics. Surgical and oncological outcomes were analysed.

**Results**
Among 90 patients who met the inclusion criteria, 12 (13.3%) had recurrent disease (6 vault, 6 pelvis, 3 abdominal, 2 distant, 1 other), and 6 (6.7%) died of disease over the follow-up period (median follow-up 38.2 months). Surgical-related outcomes did not influence survival. Stage of disease...