Conclusions Despite having negative nodes on imaging 5% had positive para-aortic lymph nodes on histopathology. LEPAND surgery prevented undertreatment in these women.

IGCS19-0348

SAFETY AND EFFICACY OF NEOADJUVANT CHEMOTHERAPY FOR CERVIX ADENOCARCINOMA DURING PREGNANCY: CASE REPORT

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Objectives To describe the case of a patient with a diagnosis of cervical adenocarcinoma in the 2nd trimester of gestation, where it was decided to maintain the pregnancy and perform chemotherapy until the end of gestation, where the final surgical treatment was performed.

Methods We present a case of a woman diagnosed with adenocarcinoma of the cervix during pregnancy, with maintenance of chemotherapy during pregnancy and puerperal surgery.

Results 40-year woman, presented at 18 weeks; referred to evaluation of a colposcopist due vaginal bleeding. A cervix lesion, measuring 30 mm, well differentiated invasive endocervical adenocarcinoma. The tumor was classified as stage IB1 (FIGO). The patient received neoadjuvant chemotherapy with 4 cycles of cisplatin every 3 weeks. No obstetric complications during pregnancy; a new MRI at 32 weeks, without significant changes in tumor size. Fetal growth assessment was evaluated every 2 weeks; cesarean section at 34 weeks. After the cesarean section underwent radical hysterectomy with pelvic lymphadenectomy. We need to perform bilateral clamping of the uterine arteries prior to pelvic lymphadenectomy due to excessive bleeding.

Conclusions The use of cisplatin as drug of choice for neoadjuvant chemotherapy for IB1 adenocarcinoma cervical cancer was safe for the fetus, which did not present malformations or intraterine growth restriction. Regarding postpartum surgery, clamping of the uterine arteries prior to pelvic lymphadenectomy and radical hysterectomy decreased intraoperative blood loss and did not compromise the final outcome with regard to: surgery operation time, surgical margin, and patient recovery. According to literature, breastfeeding should be discouraged in patients undergoing treatment with cisplatin.

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HPV EDUCATION AND VACCINATION IN A PUBLIC HOSPITAL IN BRAZIL

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Objectives Official statistics reports a low HPV vaccination rate in Brazilian teenagers. Education about HPV vaccination is considered an area for improvement and our aim was increase the number of patients educated about the importance of HPV vaccination thus improving the HPV vaccination rate.

Methods Between September 2018 and December 2018, in the Oncology Department at IMIP, we undertook a structured approach to educate the female cancer patient about HPV and its relationship with cervical cancer with support from ASCO’s Quality Training Program. Our team used standard plan-do-study-act (PDSA) methodology to achieve our goal of increase by 50% the number of patients educated about the importance of HPV vaccination. We also analyzed rate of HPV vaccination at our institution before and after this intervention.

Results Before October 2018 a mean of 1263 female cancer patients were consulted at IMIP per month and none were educated about HPV vaccination. After our PDSA1 we had a mean of 1087 female cancer patients consulted per month, and we educated about 16% of them. We had no improvement in the HPV vaccination rate. Before October 2018 there was a mean of 39 teenagers vaccinated per month, an after, a mean of 20.