

were ESS and not LMS. Low-grade ESS are rare compared to other sarcomas and have higher GS.

## IGCS20\_1289

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### REVIEW OF ENDOMETRIAL CANCER MANAGEMENT AT AN UPCOMING GYNAECOLOGICAL ONCOLOGY UNIT IN INDIA

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**Aim** Analyse the presentation and management of endometrial cancer in a newly established gynaecological oncology unit in an upcoming cancer hospital.

**Methods** Retrospective analysis of all endometrial cancer patients managed in the unit between April 2015 and June 2020.

**Results** A total of 54 women with uterine corpus cancers were seen. The commonest complaint was post menopausal bleeding. Of these, 41 are endometrioid adenocarcinomas. The age distribution is as follows: <50 years: 6, >50 years: 35 (85%). Majority had 2 children. The commonest co-morbidities were hypertension (21) and diabetes (18). The BMI (Asian standards) was >25 (overweight & obese) in 31 women. The predominant preoperative histologic grade on endometrial biopsy was grade 1 (17/41). Preoperative MR Imaging showed myometrial invasion of <50% in 13/41 (31%), >50% in 6/41 (14%). All women had primary surgical staging except a lone patient with lung metastases. The surgical staging showed that 27 (65%) had stage 1A, 8 were in 1B (19.5%) and the rest 5 in stage 3 (12.19%). All women with stage 3 disease had LVSI. According to ESGO-ESMO-ESTRO risk stratification, 22 (53.6%) were in low risk, while 9 (21.9%) in high risk and remaining 9 (21.9%) were in intermediate risk. Adjuvant chemotherapy, radiation therapy or combination was given according to this risk classification. Two women, who refused adjuvant treatment, died of recurrence. All patients are on regular follow-up.

**Conclusions** Timely evaluation of post menopausal bleeding helps in the diagnosis and management of endometrial cancer.

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### GYNAEFELLOW': A NEW ONLINE MULTI-MEDIA RESOURCE FOR GYNAE-ONCOLOGY & GYNAECOLOGY SURGERY TRAINING

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**Study Objective** To study the adoption of new innovative online multimedia educational resource aimed to provide focused surgical and clinical training

**Design** Free and open access innovative multimedia platform available as web and App formats. Descriptive analysis to study users' behaviours using the online advanced analytics

**Setting** A new innovative online multimedia educational platform called 'GynaeFellow';

- website: [www.gynaefellow.com](http://www.gynaefellow.com)
- App: (IOS) <https://apps.apple.com/gb/app/gynaefellow/id1494635066>,
- (Android) [https://play.google.com/store/apps/details?id=com.gynaefellow.app&hl=en\\_GB](https://play.google.com/store/apps/details?id=com.gynaefellow.app&hl=en_GB)
- Focused peer-reviewed free access online surgical videos provided on the App and reading material offered through the website

**Participants** All health professionals who work or interested in gynaecology No geographical restrictions

**Interventions** High quality laparoscopic and open surgical videos deconstructed into simple bite-size and easy-to-follow building blocks to develop surgical knowledge and confidence. Supporting 2–5 minutes focused read resources on the website to consolidate the clinical experience and decision-making knowledge.

**Measurement** We used the following measurement to assess the adoption of the new platform;

- Users retention and engagement
- Multimedia analytics
- Users feedback

**Results** The rate of adoption increased by over 100% on a weekly basis and platform was downloaded in over 70 countries within 2 months of release.

> 5 K minutes of videos were viewed within 6 weeks of release

**Conclusion** GynaeFellow provides high quality, easy-to-follow surgical videos illustrating anatomy planes that are readily available and can be repeatedly accessed by the keen gynaecologists providing a self-directed learning experience that can be translated into practice in the operating room – increasing patient's safety and enhancing each operating opportunity. There is a universal adoption to innovative educational platforms.

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### PERSONALIZATION OF THE TREATMENT IN PATIENTS WITH ENDOMETRIAL CANCER AND LIFE-THREATENING COMORBIDITIES

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**Introduction** Endometrial cancer (EC) is the most common oncogynecological malignancy. Currently, there is a trend of the co-existence of EC and somatic comorbidities.

**Aim** To evaluate the single-center experience in treating patients with EC and life-threatening comorbidities, to optimize the management.

**Methods** We analyzed the treatment outcomes in 17 patients with EC and somatic comorbidities, who were admitted to the Almazov National Medical Research Centre from 01.01.2019 to 30.04.2020. In 52.9% of patients, the Charlson Comorbidity Index (CCI) exceeded 6 points, which corresponds to 3 or more diseases with a severe course. The majority of patients had concurrent cardiovascular disorders. Previously, 23.5% of patients had coronary artery stents, 11.8% -mechanic heart valves, while 17.6% experienced a recurrent pulmonary embolism. BMI was above 40 kg/m<sup>2</sup> in 23.5% of cases.