

Conclusion Compared to Whites, Blacks and Hispanics have a significantly higher incidence of neuroendocrine carcinoma. Moreover, Hispanics have more advanced stage at presentation.

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51 WOULD A MULTI-ETHNIC ASIAN FEMALE POPULATION TAKE UP SELF-SAMPLING HPV TESTING AS A ROUTINE CERVICAL SCREENING METHOD?

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Introduction The uptake of the conventional cervical screening method, Pap smear remains suboptimal among Malaysian women. Vaginal self-sampling HPV testing is an alternative to improve the uptake of cervical screening. This study aims to investigate the attitudes and preferences of self-sampling HPV testing compared to Pap smear among a multi-ethnic female population.

Methods A total of 823 healthy female volunteers aged 35 to 45 were recruited from primary care clinics in urban and suburban areas in Selangor, Malaysia from June 2019 to June 2020. All participants were instructed to self-collect vaginal sample using a dry flocced swab (Copan 522C). An interview was carried out after sample collection to document sociodemographic information and self-sampling experience.

Results Of the 823 participants, 62.7% were Malays followed by 22.0% of Chinese and 12.3% of Indians. A vast majority of participants (83.4%) reported preference towards self-sampling HPV testing over Pap smear and 99.9% indicated willingness to repeat self-sampling HPV testing in 5-year time as a routine cervical screening method. The top 3 reasons for willingness to repeat this test were easy (80.9%), quick/convenient (66.3%) and not embarrassing (59.6%). Divorcees (adjusted OR: 6.08 95% CI: 1.16–31.87), full-time working women (adjusted OR: 4.00 95% CI: 1.15–10.03), housewives (adjusted OR: 4.91 95% CI: 1.57–15.41) and those who have not undergone Pap smear (adjusted OR: 1.80 95% CI: 1.08–3.01) were more likely to express preference for self-sampling HPV testing.

Conclusions/Implications Generally, Malaysian women from a relatively conservative, multi-ethnic background are willing to adopt self-sampling HPV testing as an alternative to Pap smear.

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52 THE IMPACT OF THE SURGERY FOR BREAST CANCER IN YOUNG WOMEN ON THEIR COUPLE'S RELATIONSHIP

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Objectives Breast cancer of young women is the most frequent solid cancer among women under 40. The main objective of this study is to evaluate the impact of the surgery for non-metastatic and operable breast cancer in young women on their couple's relationship.

Methods This is a prospective cohort-type study of 200 women under the age of 40 operated on for breast carcinoma between 2016 and 2019 in the department of Gynecology and Obstetrics of Farhat Hached Teaching Hospital Sousse, Tunisia. Patients were stratified based on whether they underwent conservative (G1) or radical (G2) breast surgery.

The patient's couple relationships were evaluated by The Locke and Wallace Marital Adjustment Test (MAT): a standardized psychometric assessment scale validated in Arabic.

Results The two groups were comparable in terms of age and socio-economical characteristics of the patients and their spouses.

The median tumor size at the time of cancer diagnosis was 3 cm (\pm 1.2) in G1 and 5.7 cm (\pm 1.4).

The median MAT questionnaire score was 112 (\pm 31) in G1 and 124 (\pm 13) in G2 with $p = 0.064$.

A couple dysfunction was found in 42% of G1 patients and 47% of G2 patients with a $p = 0.136$.

Conclusion The breast surgery technique for breast cancer (conservative treatment versus mastectomy without reconstruction) does not influence the marital agreement in young Tunisian married women diagnosed and operated in for breast cancer before the age of 40.

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53 SURVIVAL AND ONCOLOGICAL OUTCOMES IN THE ELDERLY PATIENTS WITH ENDOMETRIAL CARCINOMA

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Introduction Endometrial cancer is the most common gynecological malignancy in developed countries and about 50% of patients are at age 70 or older at the time of diagnosis. Data is limited in the elderly as they are under-represented in clinical trials. The aim of our study is to evaluate the survival and oncological outcomes of elderly with endometrial carcinoma at an academic center.

Methods IRB-approved retrospective cohort study. Inclusion criteria consisted of age greater than 70 at the time of diagnosis with endometrial cancer who underwent surgery from January 2013 to November 2019 and with at least 6 months of follow up. Data collection included demographics, peri-operative outcome, and mortality.

Results A total of 121 patients met the inclusion criteria. The median age was 75 (range 70–91). The median follow-up was 31 months (range 1–87 month). Median overall survival was 76 months (95% CI 68–84 months). There was a significant difference between median overall survival among different races (79 months for White vs 62 months for Non-Whites). There was a significant difference between median overall survival of those with low grade tumor vs high grade (79