Results The study included 155 patients, with 92 patients classified as patients with 'Visually-Pathologic diaphragmatic peritoneum' (group-1) and 63 as patients with 'Visually-Suspected diaphragmatic peritoneum' (group-2).

In group-1, all diaphragmatic specimens resulted positive, while group-2 showed 19% of patients with negative histological results and 81% with positive specimens.

Visual examination showed a sensitivity of 64.3% and a specificity of 100%. PPV has been of 100% while NPV has been of 19%. Accuracy was of 67% ($k=0.218$).

Frozen section evaluation was applied in 28 cases, and showed an accuracy of 92.6% ($k=0.700$).

Conclusions Visually suspected areas often hide micro-macroscopic residual disease after chemotherapy. Frozen section of suspicious areas could be the key to perform a patient tailored surgery.

IGCS20_1035

73 STUDY OF LIPID PROFILE AND THYROID HORMONES IN PATIENTS WITH UTERINE FIBROIDS

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Background Uterine fibroids (UFs) are the common gynecological neoplasms of unknown etiology affecting many women of reproductive age. We aimed to investigate the association between UFs and thyroid hormones and lipid profile.

Materials and Methods Thirty six (14 cases and 22 controls) were enrolled. Cases were those having at least one uterine fibroid > 10 mm detected on ultrasonography, while controls where those having no uterine fibroids. Clinical history and anthropometric parameters were collected for every woman. lipid profile, TSH, ft4, ft3 were evaluated on plasma from participants. The control group age was 38.36 ± 1.773 , and study group - 44.5 ± 1.715 . $P < 0.05$ was considered statistically significant, respectively.

Results As the studies revealed, it's according to lipid Profile, triglycerides level were 2-fold elevated in study population. Also, TSH was elevated 1.2 times ($P=0.0248$, respectively).

Conclusion Our Experimental studies suggest a possible association between thyroid function and UFs. Blood lipid levels are a crucial part of the metabolic syndrome, accordingly have some implication in UFs.

IGCS20_1037

74 REGIONAL REVIEW OF ENDOMETRIAL CANCER OUTCOMES IN KENT AND MEDWAY, UK

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Introduction Randomised Control Trials have not demonstrated a survival benefit for pelvic lymphadenectomy (PL)

in endometrial cancer (EC) surgery, but it has been advocated to triage high and intermediate risk disease to avoid external beam radiotherapy (EBRT) in node negative patients. A recent review of the Cancer Outcomes and Services Data in England, showed geographical variations in PL and EBRT rates, identifying Kent and Medway (K&M) Alliance as an outlier with high PL rates. We reviewed granular patient data of the K&M cohort to assess the clinical indications for PL, its impact on triage of adjuvant EBRT, and clinical outcomes.

Methods Retrospective case review EC cases in 2013–2016 in two gynaecological oncology centres and two district hospitals in K&M.

Results 668 of 815 cases were accessed. 295/550 (53%) FIGO stage IA to IIIC undergoing primary surgery had PL. This group had a higher recurrence rate (47/295, 16%), compared to no PL (17/255, 7%). 88/295 (30%) had EBRT following PL, 70% of which had proven extrauterine disease (FIGO stage II to IIIC). Recurrence after PL + EBRT (24/88, 27%) was higher than PL only (23/207, 11%) but most were systemic disease outwith the EBRT field. There was no significant difference in pelvic recurrence between these high/intermediate risk cohorts triaged for EBRT with PL.

Conclusions PL at primary surgery enabled management of selected node negative intermediate/high risk histology EC without adjuvant EBRT, with comparable pelvic recurrence to irradiated node positive cases. A comparison of outcomes from the national cohorts comparing varying management pathways would provide further insight into the impact of these interventions.

IGCS20_1038

75 INCIDENCE OF LYMPH NODE METASTASIS IN APPARENT EARLY STAGE ENDOMETRIOID OVARIAN CARCINOMA

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Introduction Aim of the present study was to evaluate the incidence of lymph node metastasis among patients with apparent early stage endometrioid ovarian carcinoma (EOOC).

Methods Patients with apparent early stage EOOC, with known tumor grade and substage diagnosed between 2004–2015 were drawn from the National Cancer Database. Performance of lymph node sampling/dissection (LND) and incidence of LN metastases were evaluated from the pathology report.

Results A total of 9725 patients with apparent early stage EOOC were identified; 44.4%, 40.5% and 15.1% had grade 1, 2 and 3 tumors respectively. 7480 (76.9%) underwent LND with a median of 12.5 LNs removed. The overall incidence of LN metastasis was 2.2%; specifically, 1.2% for grade 1, 2.2% for grade 2, and 5.1% for grade 3 tumors ($p<0.001$). For patients with apparent stage IA disease, LN metastases were identified in 0.7%, 1.7%, and 4.9% of grade 1, 2, and 3 cases, respectively, $p<0.001$. For patients with apparent stage IC disease, LN metastases

were identified in 2%, 2.6%, and 5.6% for those with grade 1, 2, and 3 cases, respectively. After controlling for substage, patients with grade 2 tumors were nearly twice (OR: 1.78, 95% CI: 1.20, 2.63), and patients with grade 3 tumors were nearly four times (OR: 4.1, 95% CI: 2.74, 6.22) as likely as those with grade 1 tumor to have LN metastases.

Conclusions The incidence of LN metastasis for patients with grade 1 and 2 EEOC is overall low. LND should be considered for patients with grade 3 tumors.

IGCS20_1040

76 GRANULAR CELL TUMOR, A RARE BREAST TUMOR

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Introduction Granular cell tumors involving the breast parenchyma are very uncommon, accounting for 5% to 8% of all granular cell tumors. They are benign neoplasms usually presenting clinically and radiologically as a mass indistinguishably from cancer, representing a big diagnostic challenge where histological evaluation becomes essential to differentiate between both.

Case Report We report a case of a 46-year-old female with no relevant past medical clinical history, who underwent a routine mammogram revealing a 0.4 × 0.4 × 0.3 cm irregular mass in her left breast, concerning from malignancy. Histological examination and immunohistochemical studies proved this to be a granular cell tumor. The lesion was successfully excised, and patient recovered with no further major health implications.

Conclusion Although this entity is infrequent, it should be taken in consideration as a differential diagnosis when confronting with a breast mass in a young patient. Pathological assessment is of utmost importance in order to establish an accurate diagnosis, especially preoperative, potentially sparing the patient from a more invasive surgical procedure that could have repercussions not only physically but also emotionally.

IGCS20_1041

77 SEX CORD STROMAL AND GERM CELL OVARIAN CANCER – IS THERE A RACIAL DISPARITY?

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Objectives To determine the incidence and presentation of sex cord stromal and germ cell ovarian cancers in various racial groups.

Methods Data was obtained from the United States Cancer Statistics (USCS) and National Cancer Database (NCDB)

national databases from 2004–2016. Chi squared was used for statistical analysis.

Results Of 8,917 women, 48.2% were diagnosed with sex cord stromal and 52.5% with germ cell ovarian cancer. Between 2004 and 2016, the age-adjusted incidence of sex cord stromal was 0.50 (per 100,000) in Blacks compared to 0.23 in Whites and 0.14 in Asians. The incidence for germ cell tumors was 0.40 (per 100,000) in Whites, 0.46 in Blacks, and 0.44 in Asians. Based on the NCDB data, the proportion of sex cord stromal tumor was 5.6% in Blacks compared to 1.5% Whites and 1.6% in Asians. Of the sex cord stromal tumors, the most common histology was granulosa cell at 85%, 84%, and 77.5% for Black, White, and Asian participants, respectively. The proportion of germ cell tumors in Blacks was 4.4% vs. 2.0% in Whites and 3.9% in Asians. Of germ cell tumors, the most common histology was dysgerminoma for Whites at 22.3%, immature teratoma in Blacks at 28.0%, and immature teratoma at 26.9% for Asians.

Conclusions Our data suggest that Black women are more likely to be diagnosed with sex cord stromal tumors compared to White and Asian women. Black and Asian women also had more germ cell cancer than White women.

IGCS20_1042

78 EVALUATION CHANGES IN INDICATORS OF ONCOLOGICAL SERVICE IN CERVIX UTERI CANCER IN KAZAKHSTAN

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About 800 thousand new cases of cervical cancer (CC) are predicted and it is expected that about 460 thousand women will die from this pathology, according to the forecasts of the International Agency for Research on Cancer in 2040.

Aim Evaluate epidemiological situation of cervical cancer in Kazakhstan for 2009–2018.

Materials and Methods The research material was data from the Ministry of Health of the Republic of Kazakhstan – annual form No.7 and 35 regarding CC for 2009–2018 – incidence, mortality, early diagnosis, neglect, morphological verification.

Results and Discussion For 2009–2018, 16,441 new cases of CC were registered in the republic for the first time and 6,461 women died from this disease. The research of the study period reveals a trend: early diagnosis indicators (specific weight of patients with I-II stage) improved from 79.8% (2009) to 88.1% in 2018, and accordingly the specific weight of neglected patients significantly decreased with stage III (from 15.4% to 8.9%) and with stage IV (from 3.4% to 2.7%).

Conclusion An analysis of epidemiology in CC revealed an improvement in morphological verification and early diagnosis, a decrease in neglect and mortality rates, which is undoubtedly associated with regular anti-cancer activities in Kazakhstan, in particular CC screening.