were identified in 2%, 2.6%, and 5.6% for those with grade 1, 2, and 3 cases, respectively. After controlling for stage, 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 EOOC is overall low. LND should be considered for patients with grade 3 tumors.

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.

Abstracts

**IGCS20_1040**

**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 into 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_1042**

**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. 


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.