Conclusion Extrauterine localisation is reported only as isolated cases in the literature. In the absence of uterine primary tumor, the differential diagnosis considerations depend upon the site of involvement. Surgical resection or debulking are the mainstay of treatment.

IGCS20_1047

METASTATIC MELANOMA IN THE BREAST: A REPORT OF 7 CASES

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Results Seven patients were found to have breast metastases from melanoma. Five were premenopausal females with a mean age of 51 years. Three patients had a primary lesions were in the heel, two in the axillary area, one in the vagina and one in the head. One patient had bilateral breast involvement, and all had other sites of metastases. The median survival after diagnosis of breast metastases was 4 months.

Conclusions Metastases to the breast from melanoma are uncommon but should be suspected in patients with a breast mass and a prior history of melanoma even after a primary has been removed.

IGCS20_1051

GYNECOLOGICAL CANCERS SEEN IN THE ONCOLOGY UNITS OF THE JOSEPH RAVOAHANGY ANDRIANANAVALONA HOSPITAL, ANTANANARIVO, MADAGASCAR

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Introduction Gynecological cancers are a real scourge in the developing country. Their care remains a challenge. The aim of this study is to describe the epidemiological and clinical characteristics of the various gynecological cancers in order to establish an early diagnosis and optimize their management.

Methods This is a 2-year descriptive and cross-sectional retrospective study from March 2017 to March 2019, including all patients followed for gynecological cancer in the Oncology Units of the Joseph Ravoahangy Andrianavalona Hospital.

Results Among 951 female cancer patients, 31.7% had gynecological cancers. Cervical, Ovarian, Choriocarcinoma, Endometrial and Vulvar Cancer were the top 5 gynecological cancers, reporting 67.44%, 17.67%, 5.58%, 4.19% and 2.33%, respectively. They were more common in the 50 to 59 age group, except for Choriocarcinoma, which mainly affected young people under 30 years of age. In all types, the average time to diagnosis ranged from 8.03 to 13.12 months. The ignorance of screening and vaccination for cervical cancer estimated at 86.9% and 87.5%. Less than 10% have known their immune status and no genetic research has been reported for ovarian neoplasia. Discovered at an advanced stage predominated, linked to patient neglect in half of the cases.

Conclusion Gynecological cancers have proven to be frequent in our center, although it remains not-extraporalable for Madagascar. More detectable and curable cancers are represented. The promotion of awareness and exploration of the infectious and genetic risk factors implicated in these pathologies would be necessary to promote an early diagnosis, improving the prognosis.