

Miscellaneous

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THE UTILITY OF A PERSONALISED RISK CALCULATOR IN GYNAE-ONCOLOGY SURGERY

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10.1136/ijgc-2020-ESGO.90

Introduction/Background The objective of this study was to examine the clinical utility of the American College of Surgeons (ACS) surgical risk calculator, developed as part of the National Surgical Quality Improvement Programme (NSQIP), in predicting perioperative morbidity in gynaecology patients, primarily, as a prediction model and secondly, as a tool to identify patients who are at increased risk of developing complications.

Methodology A retrospective review of 142 patients who underwent major surgery under the gynaecology team between 06/08/2018–16/04/2019 at the University Hospital of Wales. Pre-operative factors combined with a procedure-specific code generated the predicted risk of 13 post-operative complications for each patient. Brier scores assessed calibration and receiver operated curves (AUC) evaluated the discriminative power of NSQIP.

Results Complications were experienced by 35.2% (50/142) patients. The calculator displayed adequate calibration when used to predict serious complications (Brier = 0.070), readmission (Brier = 0.058), return to OR (Brier = 0.000) and UTI (Brier = 0.001). It had the greatest discriminative power when predicting the risk of serious complications (AUC = 0.672; 95% CI, 0.481–0.863). The calculator successfully identified a majority of patients who had a complication as being of 'above average risk' for all complications, apart from return to OR, based on their pre-operative factors.

Conclusion NSQIP has previously been demonstrated to be a useful pre-operative tool for evaluating the risk of post-operative complications in colorectal surgery. This study

suggests that in the setting of gynaecology surgery the calculator does not have adequate discriminative power to be an absolute predictor of all complications, however, it may be useful in identifying patients who are likely to develop serious complications and those at above average risk of complications.

Disclosures Inés Murray – I can confirm that I have no conflict of interest with reference to this work.

Kenneth Lim – I can confirm that I have no conflict of interest with reference to this work.

Robert Howells – I can confirm that I have no conflict of interest with reference to this work.

Rhidian Jones – I can confirm that I have no conflict of interest with reference to this work.

Aarti Sharma – I can confirm that I have no conflict of interest with reference to this work.

Sadie Jones - I can confirm that I have no conflict of interest with reference to this work.

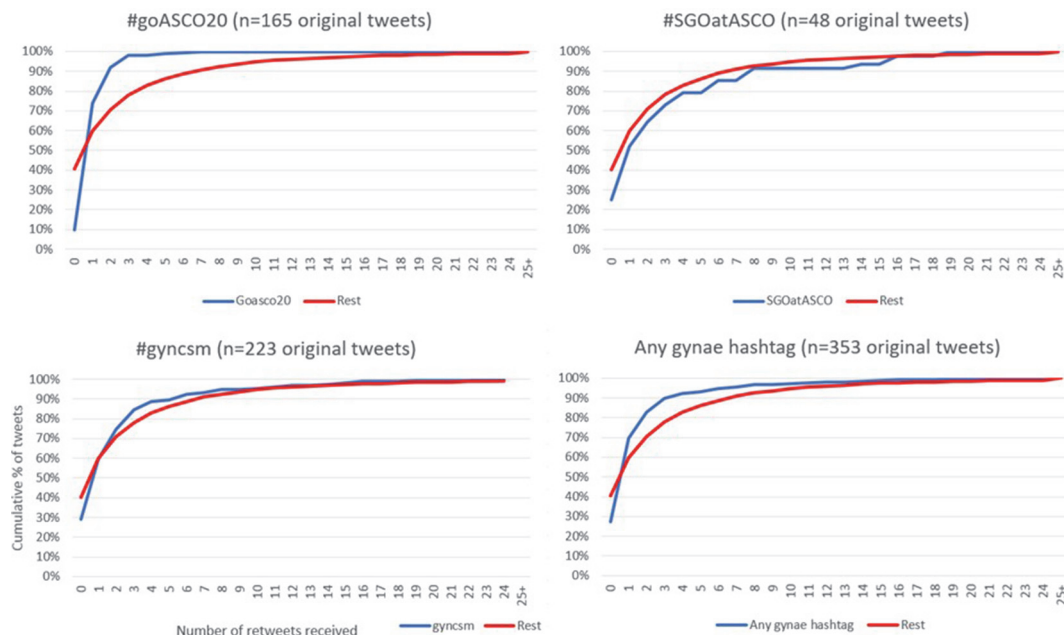
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#GOASCO20: SUCCESS OF A NEW TWITTER HASHTAG TO PROMOTE GYNAECOLOGICAL ONCOLOGY SPECIFIC INFORMATION DURING ASCO 2020 VIRTUAL ANNUAL MEETING

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10.1136/ijgc-2020-ESGO.91

Introduction/Background Scientific conferences promote specific hashtags for delegates to use. With the COVID-19 pandemic resulting in the cancellation of physical meetings there is considerable interest in understanding Twitter use at virtual events. Here we assess the reach of '#goASOCO20', a new



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hashtag created to disseminate Gynaecological Oncology specific information from the American Society of Clinical Oncology (ASCO) 2020 Virtual Annual Meeting 29th May to 1st June 2020.

Methodology Prospective observational study of tweets/retweets associated with #goASCO20. All tweets using #goASCO20/#ASCO20 during ASCO 2020 were extracted using NodeXL. Data was analysed in Excel identifying individual tweets, tweeters, retweets and retweeters. Analysing original tweets (replies excluded) #goASCO20 was compared to #ASCO20 (official hashtag), #gyncsm and #SGOatASCO.

Results 1,811 tweeters used #goASCO20/#ASCO20 in 11,530 tweets. These tweets received 27,962 retweets. 12.4% (224) of tweeters received 80% of all retweets, while 34.2% (619) received no retweets. 7,644 accounts tweeted/retweeted using #ASCO20 hashtag, producing 11,455 tweets and 27,888 retweets. 11.1% of accounts (850) only tweeted, 76.3% (5,833) just retweeted, and 12.6% (961) both tweeted and retweeted.

#goASCO20 was used in 200 tweets and generated 262 retweets. This activity stemmed from 38 accounts that tweeted/retweeted using #goASCO20. Of these accounts 13% (5) just tweeted, 74% (28) just retweeted and 13% (5) both tweeted and retweeted.

Top hashtags used during ASCO 2020 are shown in table 1. Figure 1 compares Gynaecology related hashtags used during the conference. #goASCO20 hashtag was number 13 by tweets and 27th by retweets during the conference period.

Conclusion '#goASCO20', a unique Gynaecological Oncology hashtag was created to disseminate Gynaecological Oncology information from ASCO 2020 virtual event. #goASCO20 was one of several gynaecological oncology hashtags used. Each of these were used by relatively small groups of individuals. Discussions were fragmented resulting in an overall lower profile for Gynaecological Oncology related tweets compared to general tweeting during ASCO 2020. The use of Twitter in academia is increasing. Its use during such conferences facilitates the spread of clinical knowledge; arguably more than any other academic platform. Gynaecological oncology tweeting needs coordination and agreement on a common hashtag to organise content at virtual events and between meetings.

Disclosures Esra Bilir: Member of Communication and Social Media Committee at The European Network of Young Gynaecologists (ENYGO) since May 2020.

Christina Uwins: Nothing to declare

Graham Mackenzie: Nothing to declare.

İlker Selçuk: European Network of Young Gynaec-Oncologists (ENYGO) Executive Group Member (2017–2021) (ENYGO Social Media Committee Chair)

Geetu Bhandoria: Nothing to declare

278 GYNAECOLOGIC AND NON-GYNAECOLOGIC TUMORS METASTATIC TO THE OVARIES

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10.1136/ijgc-2020-ESGO.92

Introduction/Background The ovaries are a frequent site of metastasis and tumors metastatic to the ovaries account for 5–6% of all ovarian tumors. In most cases, the primary tumor originates from gastrointestinal tract, breast, and gynaecologic organs including endometrium and cervix. The diagnosis is often made on final pathology since many metastatic tumors mimics primary ovarian carcinoma and most patients present with pelvic mass. Therefore, surgery is the mainstay of management. The prognosis of patients with ovarian metastasis is generally poor. However, survival rates are even worse in patients with non-gynaecologic primaries.

Methodology Patients with pelvic mass who were operated at Hacettepe University Faculty of Medicine, Department of Obstetrics and Gynaecology for a five-year period were identified. Among them, the clinical and pathological characteristics of patients with tumors metastatic to the ovaries were retrospectively reviewed. Survival analysis was done as well with a particular focus on the origin of the primary tumor.

Results Tumors metastatic to the ovaries accounted for 16.2% of all ovarian malignancies and 79 cases with ovarian metastases constituted the study group. Mean age of the patients was 56.3 years. Primary tumor non-gynaecologic in 65.8% of cases and colon cancer was the most common non-gynaecologic primary followed by stomach and breast cancer. All remaining patients (34.2%) had primary endometrial cancer metastatic to the ovaries. Patients with gynaecologic primaries were significantly older, but the levels of tumor markers were similar. Patients with non-gynaecologic primaries most commonly presented with abnormal imaging results and pain while abnormal bleeding was the most common symptom in those with gynaecologic primaries. Staging surgery and total abdominal hysterectomy with bilateral salpingo-oophorectomy were the most common surgeries performed. Bilateral ovarian involvement was detected in 62.0% of cases. Mean diameter of the tumor was 6.5 cm. Adjuvant treatment was given in 96.2% of patients. Of patients, 43.0% died of disease. Median survival was 19.7 months, but this was significantly longer in patients with non-gynaecologic primaries (10.0 months vs 32.6 months, $p=0.05$). Longest survival was detected in patients with colon cancer. Extent of surgery or the type of adjuvant therapy given did not affect median survival.

Conclusion Tumors metastatic to the ovaries account for a significant proportion of all ovarian cancers. Most of these tumors are diagnosed in elderly patients and prognosis is

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Hashtag by retweets received		Hashtag by tweets posted	
Row Labels	Sum of RTs	Row Labels	Count of RTs
asco20	27888	asco20	11455
lscm	2810	lscm	909
oncocalert	2480	bcsm	623
bcsm	1741	oncocalert	480
cancer	1177	covid19	428
covid19	1047	cancer	373
breastcancer	689	asco2020	319
geronc	665	gyncsm	265
askreuters	663	askreuters	250
mmsm	542	crsm	244
gyncsm	538	breastcancer	233
asco2020	528	oncology	215
ccc19	518	goasco20	200
nsdc	492	mmsm	187
crsm	475	immunotherapy	161
prostatecancer	471	precisionmedicine	150
immunotherapy	466	lungcancer	149
oncology	462	ccc19	148
bladdercancer	404	nsdc	135
lungcancer	346	geronc	121
cancer	325	listenupmbc	117
modlatam	321	prostatecancer	110
chaangmycure	288	ascototalhealth	108
clinicaltrials	281	medtwitter	107
covid19cancer	276	clinicaltrials	106
her2	273	covid19cancer	96
goasco20	262	asco	78
kidneycancer	254	pscm	72
listenupmbc	237	btsm	72
ascototalhealth	237	adaura	70