

### 301 MANAGEMENT OF PATIENTS WITH ADVANCED STAGE EPITHELIAL OVARIAN CANCER: RESULTS OF A NATIONAL FRENCH SURVEY ON CURRENT PRACTICES IN 2021

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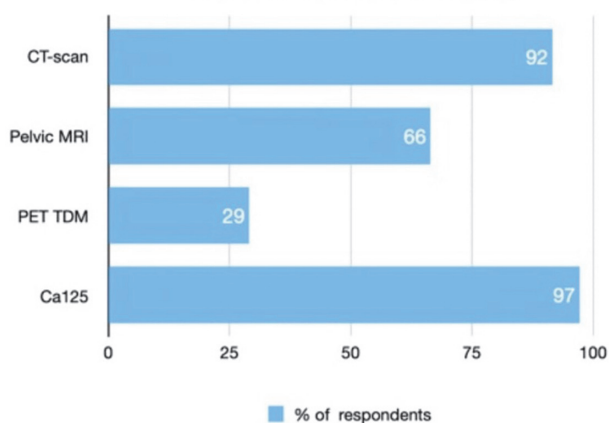
**Introduction/Background\*** The management of ovarian cancer has rapidly become more complex in recent years due to surgical and medical advances. The aim of this study was to assess French current practice in management of patients with advanced epithelial ovarian cancer.

**Methodology** An anonymous survey was sent to the SFOG, GINECO-ARCAGY and FRANCOGYN members. The survey consisted of 58 items divided in five sections dealing with diagnostic staging, pathological and genetic data, surgical practice patterns, adjuvant/neoadjuvant treatment, and follow-up strategies.

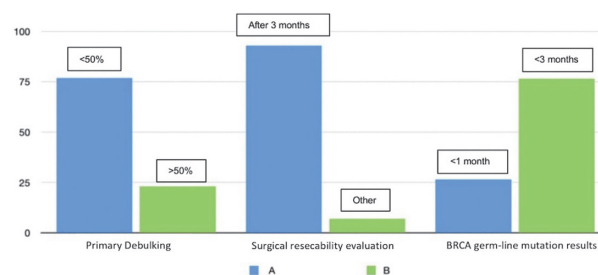
**Result(s)\*** Overall, 107 answers were available. Most of participants were obstetrician-gynecologists (37.4%), surgical oncologists (34.6%), and medical oncologists (17.8%). Most of participants came from University Hospitals (40.2%) and Comprehensive Cancer Center (37.4%).

For 76.8% of respondents, less than 50% of patients are eligible for primary debulking surgery. In case of neoadjuvant chemotherapy, surgical resectability is assessed after 3 cycles for 92.7% of respondents. LION study's criteria were always applied during primary surgery for 69.5% of respondents. Hyperthermic Intraperitoneal Chemotherapy (HIPEC) is used as a first-line treatment for 41.4% of respondents (26.8%

Diagnostic initial workup and staging



Abstract 301 Figure 1



Abstract 301 Figure 2

within clinical trial and 14.6% outside) and during interval surgery for 37.8% of respondents.

According to the completeness of cytoreduction surgery and the BRCA mutation status, association of Paclitaxel-Carboplatin (every 3 weeks) is the most used combination as adjuvant chemotherapy for 69.7 to 84.8% of respondents and bevacizumab 15mg/kg is used in case of no residual disease for 52.9 to 61.7 of respondents.

In case of BRCA1-2 mutations, Olaparib is given by 75.8% to 84.8% of respondents. The delay to obtain BRCA germline mutation results is less than 1 month for 26.5% of respondents and less than 3 months for 76.5% of respondents. An Homologous Recombination Repair Deficiency is searched for 73.5% of respondents and mainly by Myriad test (91.3%).

**Conclusion\*** In our study, the rate of HIPEC was high because 2 clinical trials are currently ongoing in France on HIPEC as 1st line treatment.

Our results provide an interesting picture of current management in France in relation to International Guidelines. They provide a basis for further research and raise the question of updating guidelines for ovarian cancer management.

### 307 RELATIONSHIP AMONG SURGICAL COMPLEXITY, EARLY AND LATE MORBIDITIES, AND SURGICAL TIMING IN ADVANCED OVARIAN CANCER

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**Introduction/Background\*** Epithelial ovarian cancer (EOC) requires an aggressive surgical approach. The type and the number of procedures performed during primary (PDS) or interval (IDS) debulking surgery in order to achieve no residual disease are associated with considerable morbidities.

The objective is to describe a relationship among surgical complexity, early and late morbidities, and surgical timing in advanced EOC.

**Methodology** A retrospective study was performed at Leon Berard Cancer Center between 2006 and 2018. Surgical complexity was classified into three groups (standard, radical and ultra-radical surgery) based on the type and the number of procedures performed during PDS or IDS for advanced EOC. During the 30- and 90-day period after the surgery, the post-operative complications were registered according to the Clavien-Dindo classification.