

(figure 2). OC organoids recapitulate histological features of the tumor tissues from which they were derived. In drug-screening assays, 2 organoids that were derived from HGSC patients with known clinical histories recapitulate patients' response to platinum-based adjuvant chemotherapy.

**Conclusions** Organoids have great potential application for research and personalized medicine. Clinical trial information: NCT04768270.

EPV192/#33

### TRENDS OF CHANGE IN CANCER MORBIDITY FOR THE OVARIAN CANCER IN UZBEKISTAN

S Djanklich\*, M Tillyshaykhov, N Zakhirova, A Berkinov. *Republican Specialized Scientific-Practical Medical Center of Oncology and Radiology, Gynecologic Oncology Department, Tashkent, Uzbekistan*

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**Objectives** Study of the trends in morbidity and mortality in ovarian cancer in the Republic of Uzbekistan from 2013 to 2017.

**Methods** The materials and methods of this study were the main statistical indicators for the Republic for the period 2013–2017 according to the cancer register.

**Results** In 2013, in the structure of the incidence rate by Uzbekistan regions the 1st, 2nd and 3rd places were taken by Bukhara region, Tashkent city and Ferghana regions with incidence rates of 2.6, 2.2 and 2.1 per 100 000 populations respectively. At the same time, in 2017, leading positions were taken by Bukhara, Tashkent and Jizakh regions with incidence rates of 3.9, 3.3 and 3.1 per 100 000 population accordingly. In 2013, there were 573 newly diagnosed cases of ovarian cancer in the Republic of Uzbekistan with incidence rate of 1.9, and 268 women died from ovarian cancer at the same year, with mortality rate of 0.9. To compare the same indicators in 2017, it can be concluded that the rate of morbidity and mortality over the past five years had increased by 0.5 and 0.4 respectively. The percentage of patients with stages III–IV in 2013 was 67.9%, and in 2017 this percentage decreased to 53.2%.

**Conclusions** As can be seen from the study, over the past 5 years there have been recorded trends in the growth of morbidity and mortality in Uzbekistan. Based on this study, ovarian cancer requires more attention of oncologists in terms of timely diagnosis at the early stages of malignant growth.

EPV193/#344

### SYSTEMATIC REVIEW AND META-ANALYSIS OF THE SURVIVAL IMPACT OF SECONDARY CYTOREDUCTIVE SURGERY FOR RECURRENT LOW-GRADE SEROUS OVARIAN CARCINOMA

<sup>1</sup>R Goldberg\*, <sup>2</sup>RS Kim, <sup>3</sup>X Li, <sup>4</sup>R Fazelzad, <sup>5</sup>T Brown, <sup>2</sup>T May. <sup>1</sup>University of Toronto, Department of Physiology, Toronto, Canada; <sup>2</sup>Princess Margaret Cancer Centre/University of Health Network/Sinai Health Systems, Gynecologic Oncology, Toronto, Canada; <sup>3</sup>Princess Margaret Cancer Centre, Biostatistics, Toronto, Canada; <sup>4</sup>University Health Network, Library and Information Services, Toronto, Canada; <sup>5</sup>Lunenfeld-Tanenbaum Research Institute, Mount Sinai Hospital, Department of Obstetrics and Gynaecology, Toronto, Canada

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**Objectives** Low-grade serous ovarian cancer (LGSC) is a relatively chemo-resistant disease with limited effective treatment options for patients with recurrence. Secondary cytoreductive surgery (SCS) is commonly offered to women with recurrent

LGSC, although the effect of cytoreductive outcomes following SCS on survival is yet to be determined. This systematic review/meta-analysis aims to evaluate the impact of SCS with gross residual disease (GRD) versus SCS with no GRD on overall survival (OS) and progression-free survival (PFS) in recurrent LGSC.

**Methods** A comprehensive search of MEDLINE, EMBASE, Cochrane Central, Cochrane Database of Systematic Reviews, and Web of Science was conducted to obtain all studies evaluating SCS with GRD versus no GRD in recurrent LGSC. Meta-analysis was performed on OS and PFS, and assessed using the Cochrane Risk of Bias in Non-Randomized Studies (ROBINS)-1 tool. Forest plots with pooled Hazard Ratios (HR) were generated.

**Results** Three retrospective cohort studies evaluating 112 LGSC patients who underwent SCS were included in the meta-analysis. Two studies were meta-analyzed for OS (n=71) and PFS (n=91), respectively. There were 35 (31.2%) participants with no GRD at SCS, and 77 (68.8%) participants left with GRD at SCS. GRD at SCS negatively impacted PFS (HR=3.51, 95% CI= 1.72, 7.14), and SCS with no GRD significantly improved OS (HR=0.4, 95% CI=0.23, 0.7).

**Conclusions** Optimal SCS with no GRD may prolong OS and PFS in women with recurrent LGSC. The quality of evidence of the included studies is low and demonstrates the need for prospective studies investigating the role of SCS in women with LGSC.

EPV194/#350

### A FIVE YEARS RETROSPECTIVE REVIEW STUDY OF NON-EPIHELIAL OVARIAN CANCERS IN A THERITERY HOSPITAL IN ETHIOPIA SUB-SHARAN COUNTRY

B Batu\*. *Saint Paul's hospital Millennium Medical college, Obstetrics and Gynecology, Addis Ababa, Ethiopia*

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**Objectives** The objective of this study is to describe the incidence, clinical presentation and histology subtypes and therapeutic interventions offered for NEOC.

**Methods** Institution based retrospective chart and pathology report review from; Aug 1 2015- Aug 1 2020. This study was conducted in Saint Paul's Hospital millennium medical college. We reviewed a total of 1357 ovarian pathology reports from the ovary in the five years period and 264 cases of which were non-epithelial ovarian tumors and of these 80 of the cases were malignant non-epithelial ovarian cancer whose pathology was retrieved and phone was accessible for interview. A pre-prepared structured questioner was filled by the principal investigator. The data was analyzed using IBM SPSS statistics version 20 and presented using figures and tables.

**Results** The contribution of malignant non-epithelial ovarian cancer is 17.3% of all the ovarian cancers. The mean age for malignant Germ cell tumors is 28.3yrs with the range 1.75yrs to 61 yrs The mean age for sex cord stromal tumors is 44.5yrs with a range of 22yrs to 67 yrs the commonest being hysterectomy, bilateral salpingo-oophrectomy with omental sampling being the commonest procedure done .accounting over 40% of the cases. of those traced 7 of them are died.

**Conclusions** This study showed prevalence of NEOC was higher than other studies, the commonest histology type of malignant germ cell tumors was yolk sac tumors. Half of the