Introduction/Background Dostarlimab is a programmed death 1 (PD-1) inhibitor approved in the US as monotherapy in patients with mismatch repair deficient (dMMR) advanced/recurrent endometrial cancer (EC) that has progressed on or after platinum-based chemotherapy or dMMR solid tumours that have progressed on or after prior treatment, with no satisfactory alternative treatment options; and in the EU as monotherapy in patients with dMMR/microsatellite instability-high (MSI-H) advanced/recurrent EC that has progressed on or after platinum-based chemotherapy. We report efficacy endpoints by immune-related RECIST (irRECIST) for patients with EC.

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The role of inflammatory markers in the preoperative diagnosis of endometrial cancer and endometrial hyperplasia

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Introduction/Background Inflammation and immunogenesis are important for cancer progression and metastasis. Blood neutrophil lymphocyte ratio (NLR) and platelets lymphocytes ratio (PLR) are basic indicators of systemic inflammatory response. In addition high NLR is detected in patients with endometrial cancer. The aim of this study is to investigate the predictive role of NLR and PLR in cases of endometrial hyperplasia and cancer.

Methodology This retrospective study was performed between 2015–2020 with 469 cases, 78 nonatypical endometrial hyperplasia, 28 atypical endometrial hiperplasia, 79 endometrial adenocarcinoma and 284 controls who underwent an endometrial biopsy due to abnormal uterine bleeding and had a normal histopathology in two tertiary clinics. Blood samples were drawn from all patients before endometrial biopsy. Blood cell counts, NLRs and PLRs were compared among these groups.

Results The mean age of 469 patients was 49.01 ± 9.01. The mean age was 47.49 ± 6.85 in group 1, 50.93 ± 10.56 in group 2, 60.95 ± 8.81 in group 3 and 45.92 ± 6.80 in control group. The difference of age was significant between group 3 and the other groups (p < 0.001). Based on lymphocyte, platelet counts and PLRs, there was no significant difference among the groups (P > 0.05). The median neutrophil counts in groups 1, 2.3 and control were 3.89, 5.40, 5.30 and 3.90 respectively and there was a statistically significant difference between neutrophil counts of the groups (p < 0.001). The median NLRs in groups 1, 2, 3 and control were 1.81, 2.27, 2.60 and 1.91, respectively. There was a statistically significant difference

Conclusion In line with the study primary endpoints, secondary efficacy endpoints by irRECIST demonstrate the benefit of dostarlimab in patients with EC.