

2022-RA-1573-ESGO **LOW GRADE ENDOMETRIAL STROMAL SARCOMA: CASE SERIES OF ONE SINGLE INSTITUTE**

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Introduction/Background Endometrial Stromal Sarcomas (ESSs) are very uncommon malignant tumors, accounting for only 0.2 percent of all uterine malignancies, occurring in premenopausal women. We aim to highlight the clinical behavior and management outcome of this rare entity.

Methodology This study reviewed retrospectively 16 patients with histologically proven low-grade stromal sarcoma (LGESS) at Salah Azaiez Institute of oncology, between 2000 and 2021.

Results The median age was 44.8 years. The most common presenting symptoms were pelvic pain and abnormal vaginal bleeding. Diagnosis was made through curettage in only three patients, however, two patients were diagnosed after a simple hysterectomy that took place in another department and they were sent to our institution for recurrent disease. Five patients were diagnosed at FIGO stage I. The entire patients underwent surgical treatment. Adjuvant therapy was administered in eight cases. The median follow-up period was 60 months. Two patients were lost to follow-up. Seven patients had disease recurrence. There was no death due to disease progression.

Conclusion Further research studies viewing LGESS and meta-analyses are needed in order to improve treatment options. An appropriate with early diagnosis and intervention are the keys to improve patient survival.

2022-RA-1575-ESGO **SECONDARY BONE LOCALIZATION FROM UTERINE SARCOMA: A CASE SERIES OF A VERY RARE CONDITION**

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Introduction/Background Uterine sarcomas are uncommon tumors that account for 3 to 5% of all malignant uterine tumors. They typically spread to the liver and lungs, and very rarely to the bones. These metastases worsen the prognosis. We report five cases of metastatic uterine sarcoma to the bone.

Methodology We retrospectively analyzed clinical data of five patients with uterine sarcomas metastatic to bone who were diagnosed and treated in our institute.

Results We report five cases of uterine sarcoma treated in our institute. The median age was 51 years old. Vaginal bleeding and pelvic pain were the most common symptom at presentation. All cases had pelvic MRI. No distant metastases were detected. Hysterectomy and bilateral adnexectomy were performed on all patients. Four cases had leiomyosarcoma and one had an undetermined sarcoma. Adjuvant radiotherapy (54 Gy) was administered to only one patient. On

average, bone metastases occurred 9.8 months following the initial cancer diagnosis. The clinical presentation was marked by bone pain. In four cases, the dorsal spine was the most common bone site. In one case, it was found in the femur. For all patients, analgesic and decompressive radiation were prescribed. Two patients required emergency surgery for spinal cord compression. Histological examination confirmed the metastatic nature of these lesions following laminectomy. In two cases, hepatic and adrenal metastases were also found. Three cases had chemotherapy. Respiratory and renal failure led to the deaths of three patients. There were two patients lost to follow-up.

Conclusion Uterine sarcomas are malignant tumors that have a dismal prognosis. Bone metastases are uncommon, but they worsen the outcome, so it is imperative not to ignore physical discomfort and bone pain.

2022-RA-1586-ESGO **THE RISK OF ENDOMETRIAL CANCER IN WOMEN WITH POLYCYSTIC OVARIAN SYNDROME**

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Introduction/Background Polycystic ovarian syndrome (PCOS) is a common endocrine disorder affecting approximately 4 to 12% of women of reproductive age. Whilst existing literature suggests an association between PCOS and endometrial cancer, the sparsity and inconsistency of current evidence indicate a lack of clarity on the exact strength of this association. It remains uncertain whether the degree of risk is affected by confounding factors such as age and BMI. The objective of this paper is to quantify the risk of endometrial cancer in women with PCOS compared to women of all ages, and specifically to premenopausal women.

Methodology We performed a systematic review and meta-analysis of all the studies that looked into the association between PCOS and endometrial cancer published up to January 2022 through PubMed, MEDLINE, EMBASE and Cochrane. Relevant data from these studies meeting inclusion criteria were extracted and analysed. The quality of included studies was assessed using the Newcastle-Ottawa Criteria.

Results A total of 10 studies were identified and included in the meta-analysis (12,248 women with PCOS and 54,120 controls). Women with PCOS had a significantly increased risk of developing endometrial cancer, compared with those without PCOS (OR 4.07, 95% CI 2.13–7.78, $P < 0.0001$). When postmenopausal women (aged over 54 years) were excluded from the meta-analysis, this risk increased further. (OR 5.14, 95% CI 3.22–8.21, $P < 0.00001$).

Conclusion This meta-analysis demonstrates that women with PCOS are up to five times more likely to develop endometrial cancer compared to those without PCOS. However, limiting factors such as variation in the diagnosis of PCOS and lack of adjustment for confounding factors within existing evidence may have led to the strength of this risk being inflated. Larger, prospective studies that are well controlled for other relevant risk factors are required to better ascertain the risk of endometrial cancer in women with PCOS.