

Results 1,460 patients with a rare gynecologic cancer entered our department. 1,092 patients received any kind of therapy and 368 'only' had a consultation. The most common histologic types were: borderline tumors of the ovary (424 pts, 29%), low grade serous ovarian cancer (179 pts, 12.3%), ovarian sex cord-stromal tumors (164 pts, 11.2%), uterine sarcoma (142 pts, 10%), clear cell ovarian cancer (115 pts, 8%), and ovarian germ cell tumors (73 pts, 5%). There was a continuous increase of pts over the years: 237 (2011–2013), 215 (2014–2015), 276 (2016–2017), 347 (2018–2019), 385 (2020–2021) cases. In total, 905 pts came from NRW and 555 patients from other states.

Conclusion We observe a centralization of patients from whole Germany with rare gynecological cancers in our center with a rising number of patients during the observation period. This provides a unique chance for further research in rare gynecologic tumors and also allows to offer prospective trials.

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ANGIOMYXOMA AGGRESSIVUM – SURGICAL COMPLETE RESECTION OF EXTREMELY RARE TUMOR OF PERINEUM

¹Marcin Jedryka, ¹Andrzej Czekanski, ¹Piotr Lepka, ²Marcin Zietek. ¹*Oncological Gynecology, Wrocław Medical University and Lower Silesian Oncology Center, Wrocław, Poland;* ²*Oncological Surgery, Wrocław Medical University and Lower Silesian Oncology Center, Wrocław, Poland*

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Introduction/Background Angiomyxoma aggressivum is an extremely rare perineal tumor that expansively grows compressing the locally adjacent organs.



Abstract 2022-RA-786-ESGO Figure 1

Methodology This is a case report of a 47-year-old patient with huge tumor of perineum localised on the left side of perineum, along the vaginal and rectal wall stretching out from the left obturator fossa till the left buttock. The tumor was previously partially debulked in other hospital giving the histopathological diagnosis of aggressive angiomyxoma with high estrogen receptors expression. The adjuvant hormotherapy of GNRH analogues was then introduced with initial good clinical outcome. After almost one year of clinical remission the flabby tumor grew back to the vast dimensions causing many ailments. After thorough imaging diagnostics excluding local pelvic muscles infiltration and any distant metastases as well the patient was qualified for radical debulking surgery from the perineal access. The resection was completely performed when the proper dissecting plane of this locally aggressive tumor had been found with the anatomic respect of vital vessels and nerves. The perineal plastic surgery followed then the surgical complete excision simultaneously. The postoperative course was uneventful. The pathologic report confirmed the previous diagnosis of aggressive angiomyxoma with clear surgical margins.

Results The patient is being strictly followed-up for one year so far with no signs of the relapse both in clinical and imaging examinations.

Conclusion Perineal aggressive angiomyxoma is a very rare tumor with unequivocal tendency of local recurrence. The scant publications suggest that complete surgical resection is the best option to prevent of the disease relapse. Systematic treatment or radiotherapy have not been proved to be effective, however antiestrogenic hormone therapy is recommended as this kind of perineal tumor usually has pronounced hormonal receptors expression.

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THE IMPACT OF THE NEW RCOG 2019 CURRICULUM AND COVID 19 PANDEMIC ON GYNAECOLOGICAL TRAINING AMONGST THE SPECIALIST TRAINEES IN THE UNITED KINGDOM: A PROSPECTIVE STUDY

^{1,2}Anas Barakat, ¹Aemn Ismail, ^{1,2}Supratik Chattopadhyay. ¹*Gynaecology Oncology Department, University Hospitals of Leicester NHS Trust, LEICESTER, UK;* ²*Leicester Cancer Research Centre, University of Leicester, Leicester, UK*

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Introduction/Background The Royal College of Obstetricians and Gynaecologists (RCOG) introduced a new curriculum in 2019, where a new portfolio was implemented by all obstetrics and gynaecology trainees across the UK. Four professional identities replaced nineteen modules. Furthermore, the National Health Service was hit by the COVID 19 pandemic in 2020. Our survey aims to find how the new RCOG curriculum and COVID 19 pandemic affected gynaecological training amongst specialist trainees in the UK.

Methodology A cross sectional study was conducted using the University of Leicester online survey platform involving the RCOG trainees in the UK from the 1st of June 2021 to the 1st of October 2021. The survey was divided into two main categories: 1) new RCOG curriculum and gynaecology training, 2) COVID 19 pandemic and gynaecology training.