

group not using ICG-FA. On univariate analysis, the presence of residual tumour ($p=0.03$) and surgical time($p=0.005$) were predictors of colorectal anastomotic leakage, while the use of ICG-FA was a protective factor ($p=0.02$). On multivariate analysis, surgical time ($p=0.02$) was an independent predictor of colorectal anastomotic leakage, while the use of ICG-FA showed an independent protective role ($p=0.01$).

Conclusion The use of ICG-FA for the assessment of colorectal anastomosis perfusion has proven to be a safe and effective technique, showing a significant reduction in the rate of anastomotic leakage. This technique should be performed in all cases of ovarian cancer undergoing rectosigmoid resection.

2022-RA-1305-ESGO OVER-EXPRESSION OF MULTIMERIN1 PROTEIN IN OVARIAN CANCER PROGRESSION

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Introduction/Background Asymptomatic nature of ovarian cancer makes 5th most common cancer worldwide and often called ‘Silent Killer’. Late diagnosis makes it highly dreadful malignancy among women. A non-invasive early screening method will help to reduce its high mortality rate. Multimerin 1 is EMLIN family protein which massive, soluble, disulfide-linked homo-polymeric ECM protein that is expressed in megakaryocytes, platelets and endothelial cells and found associated with different types of cancers including ovarian cancer with undefined role.

Methodology In this context, we performed validation of differential expression patterns for Multimerin1 via; western blotting, ELISA, Immunohistochemistry and RT-PCR in an independent cohort of ovarian cancer saliva and tumor tissues. Cell properties like viability, apoptosis, wound healing, adhesion; migration and invasion were studied by siRNA mediated knockdown of MMRN1 in in-vitro experiments in SKOV3 cell line.

Results Significant over expression of MMRN1 was observed by western blot and ELISA in saliva samples of ovarian cancer patients. Average concentration of MMRN1 in saliva of healthy control was 28.7 pg/ml, whereas 42.53 pg/ml in low grade and 52.91 pg/ml in high grade ovarian cancer. Its over-expression at mRNA level indicates its progression with tumors and found to be 7.4 in low grade and 12.36 in high grade ovarian cancer. Immunohistochemistry also confirms upregulated cytoplasmic expression of MMRN1 in ovarian cancer tissue. siRNA mediated knockdown of MMRN1 in SKOV-3 cell line showed reduced cell viability by 55%. Cell adhesion, migration and invasion by were also reduced by 46.5, 43, and 55.1 percent respectively. Cell scratch assay showed reduced wound healing capability of SKOV3 cells. Based on our findings, we believe that MMRN1 protein has potential to be explored further to established its plausible role in ovarian cancer.

Conclusion Perceived results indicated that MMRN1 expression increases with disease progression and induce cell proliferation thereby helping in metastasis.

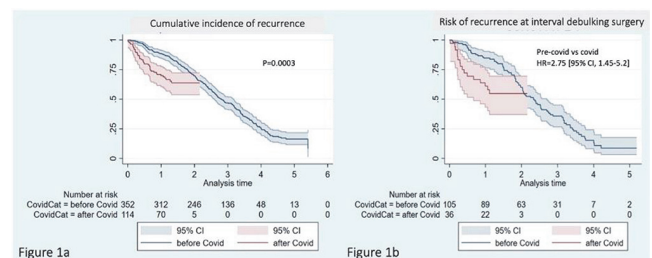
2022-RA-1306-ESGO EFFECT OF THE COVID-19 PANDEMIC ON PRIMARY THERAPY AND ONCOLOGIC OUTCOMES IN WOMEN WITH ADVANCED STAGE TUBO-OVARIAN CARCINOMA IN A TERTIARY CANCER CENTER

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Introduction/Background The COVID-19 pandemic resulted in significant alterations in access to health care services globally. The Norwegian Radium Hospital was declared ‘Covid-free’ to maintain cancer care at the same level as prior to the pandemic. Despite this, concerns regarding possible delayed diagnosis and suboptimal therapy have been raised. **Objective:** To explore if management and outcomes for women with advanced stage high-grade serous tubo-ovarian carcinoma (HGSC) was altered during the COVID-19 pandemic.

Methodology Women with stage III/IV HGSC from 2017–2021 were identified in our institutional database. Pre-Covid cohort January 2017 – March 2020, and Covid-cohort April 2020 – August 2021. Demographics, treatment characteristics and oncologic outcomes were compared between cohorts.



Abstract 2022-RA-1306-ESGO Figure 1

Abstract 2022-RA-1306-ESGO Table 1 Patient, tumor and treatment characteristics