

disappeared in an analysis restricted to women of comparable ages (60–70 years). We found no objective cognitive differences between women with a RRSO between ages 41–45 and women with a RRSO before age 40.

Conclusion Reassuringly, approximately 18 years after RRSO, we found no association between premenopausal RRSO and objective cognition.

2022-RA-1496-ESGO EVALUATION OF CERVICAL CYTOLOGY IN WOMEN ON TAMOXIFEN THERAPY

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Introduction/Background Tamoxifen, a selective estrogenic receptor modulator, is used for hormonal treatment of all stages of hormone receptor positive breast cancer due to its anti-estrogenic effect on breast tissues. Estrogen receptors are also present in squamous and columnar epithelium of cervix and vagina and are responsible for the changes in cervico-vaginal epithelium. In view of the potential adverse effects of tamoxifen on cervical cytology, this study was planned to study those effects on cervical cytology.

Methodology This is a cross sectional study done in Deen Dayal Upadhyay Hospital on the patients of breast cancer taking tamoxifen therapy. Patients of breast cancer on tamoxifen therapy for more than 6 months and currently on tamoxifen are included. The results are compared with Papanicolaou smear of healthy adult females coming for screening in cancer screening OPD without any gynaecological problem. Data is coded and recorded in MS Excel spreadsheet program. SPSS v23 (IBM Corp.) is used for data analysis. Group comparisons for continuously distributed data is made using independent sample 't' test when comparing two groups. Chi-squared test is used for group comparisons for categorical data.

Results 50 patients of breast cancer on tamoxifen therapy were taken as cases and 50 healthy women were included as controls. Mean age for the cases and controls was 48.5 years and 46.88 years respectively. Mean parity for cases and controls was 3.84 and 3.48 respectively. There was no significant increase in the frequency of squamous or glandular abnormalities in the patients on Tamoxifen therapy.

Conclusion There is no significant deleterious affect of Tamoxifen on cervical cytology. More research is required to confirm a protective effect.

2022-RA-1498-ESGO URINARY INCONTINENCE IN WOMEN WITH PREMENOPAUSAL RISK-REDUCING SALPINGO-OOPHORECTOMY COMPARED WITH WOMEN WITH POSTMENOPAUSAL RISK-REDUCING SALPINGO-OOPHORECTOMY

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Introduction/Background Women carrying *BRCA1/2* pathogenic variants are advised to undergo premenopausal risk-reducing salpingo-oophorectomy (RRSO) to reduce their risk of ovarian cancer. Our aim was to study the impact of a premenopausal RRSO (before the age of 46 years) on urinary incontinence at least 10 years later, compared to a postmenopausal RRSO, at the age of 54 years or later.

Methodology Between 2018 and 2021, 368 women with a high familial risk of breast/ovarian cancer participated in the study (premenopausal group, n=226, postmenopausal group, n=142). Women completed the Urogenital Distress Inventory (UDI-6) and Incontinence Impact Questionnaire short form (IIQ-SF). Differences between groups were analyzed using multiple regression analyses adjusting for current age, breast cancer history, use of hormone replacement therapy, BMI, hysterectomy, parity, delivery mode and type 2 diabetes. We defined symptomatic urinary incontinence (UI) as an UDI-6 score higher than 33.3.

Results Mean time since RRSO was 20.6 years in the premenopausal group and 10.7 years in the postmenopausal group (p<.001). In the premenopausal group, mean age at questionnaire completion was 62.7 years, versus 67.0 years in the postmenopausal group. Women with a premenopausal RRSO had an OR of 3.5 (95%CI 1.2;10.0) to have stress UI compared with age-matched women with a postmenopausal RRSO. The proportion of urge UI was similar between the two groups; 19.6% of the premenopausal RRSO group had urge UI compared with 22.7% in the postmenopausal RRSO group (p-value .48).

In the premenopausal group 23.6% had symptomatic UI compared with 18.9% in the postmenopausal group (p-value .31). After adjustment, women with a premenopausal RRSO had a borderline significantly increased risk of symptomatic UI according to the UDI-6 (OR 2.1 95%CI .93;4.78).

Conclusion More than 15 years after premenopausal RRSO, women more often experienced severe stress urinary incontinence compared with women who had undergone a postmenopausal RRSO.

2022-RA-1554-ESGO PATIENTS WITH PALB2 MUTATION FOLLOWED UP IN A HEREDITARY GYNAECOLOGICAL CANCER UNIT

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Introduction/Background PALB2 is located on chromosome 16, it is essential for the function of BRCA2. It is a high-risk gene, although the risk of breast cancer (BC) in carriers is greatly affected by family burden. Overall, a cumulative risk of BC at 70 years of age is estimated at 35%. Pathogenic variants in PALB2 also increase the risk of BC in men, and are associated with an increased risk of pancreatic cancer, and a slight increase in ovarian cancer (OC).

Methodology Retrospective observational study. Review of patients followed in the inherited cancer unit in a single tertiary centre between 1st January 2012 until 31st March