

previous transvaginal ultrasound performed by gynaecologists or radiologists. Patients with a diagnosis of BOT by histopathological findings were included. Descriptive analyses were performed.

Results Of 18 patients diagnosed with BOT, with a mean age of 39 (\pm) 17 years, 11 (73%) were premenopausal, their median CA 125 was 115 (\pm) 32 U/mL. The mean maximum diameter of the lesion was 54 (\pm) 72 mm, 9 (60%) were described as unilocular solids, 5 (33%) as multilocular solids and 1 (7%) as unilocular. In addition to the classic criteria such as vascularization in the papilla found in 15 (83%) of the cases, we found novel characteristics such as: a low level of echogenicity content in 14 (78%) and a pattern of microcystic tissue that resembles a group of small bubbles in 12 (67%) of these tumors. Furthermore, when these three characteristics were positive, the tumors were diagnosed by histopathology as being of serous origin.

Conclusion This study proposes additional characteristics that are of interest for the approach and diagnosis of BOT by ultrasound.

2022-RA-1704-ESGO DIAGNOSTIC ACCURACY OF THE IOTA ADNEX MODEL FOR BORDERLINE OVARIAN TUMORS

^{1,2}Nadiezha Rodríguez, ¹Nicolas Rodríguez, ¹Nathalia Ayala, ^{2,3}Catalina Buritica, ²Natalia Ramírez, ²Camila Saravia, ²Ángela Nastar, ^{1,2}Alba Esquivel. ¹Gynaecology, Fundacion Santa Fe de Bogota, Bogota, Colombia; ²School of medicine, Universidad de los Andes, Bogota, Colombia; ³Pathology, Fundacion Santa Fe de Bogota, Bogota, Colombia

10.1136/ijgc-2022-ESGO.191

Introduction/Background The aim of this study was to perform a diagnostic accuracy evaluation of the International Ovarian Tumor Analysis (IOTA) – Assessment of Different Neoplasias in the adnexa (ADNEX) model for the diagnosis of borderline ovarian tumours (BOT).

Methodology A retrospective study of patients who underwent gynaecological surgery between 2012 and 2022 with a previous diagnosis of adnexal mass by transvaginal ultrasound at a tertiary referral university hospital with a specific gynaecological oncological unit. Sociodemographic data, ultrasound information, and pathological findings were retrieved from the patient's medical records. The IOTA ADNEX model was used to estimate the probability of benignancy or malignancy (borderline, stage I, stages II-IV, or metastatic) with a threshold of 10%. Definitive pathology was the reference standard used. Sensitivity, specificity, positive (PPV) and negative predictive values (NPV), and likelihood ratios (LR) were calculated.

Results A total of 757 patients underwent surgery and had a pathology report. The IOTA ADNEX model identified 586 (77.6%) masses as benign and 171 (22.4%) as malignant. Of those identified as malignant, 64 (37.4%) were identified as borderline by the IOTA ADNEX model, and pathology identified 18 (28%) as BOT. These women had a mean age of 39 (\pm) 17 years, 11 (73%) were premenopausal, their median CA 125 was 115 (\pm) 32 U/mL. The IOTA ADNEX model had a sensitivity, specificity, PPV, NPV, LR(+) and LR(-) of 72%, 68%, 28%, 93%, 2.28 and 0.40, respectively for the diagnosis of BOT.

Conclusion This diagnostic accuracy study showed that the IOTA ADNEX model has good sensitivity in diagnosing BOT in our center. However, its regular performance in the

likelihood ratio could suggest the need to incorporate additional variables in the ultrasound findings.

2022-RA-1705-ESGO HOW TO DIFFERENTIATE BETWEEN TRUE POSITIVES AND FALSE POSITIVES IN THE DIAGNOSIS OF BORDERLINE OVARIAN TUMORS

^{1,2}Nadiezha Rodríguez, ¹Nicolas Rodríguez, ¹Nathalia Ayala, ^{3,2}Catalina Buritica, ²Ángela Nastar, ²Camila Saravia, ²Natalia Ramírez, ¹Alba Esquivel. ¹Gynaecology, Fundacion Santa Fe de Bogota, Bogota, Colombia; ²School of medicine, Universidad de los Andes, Bogota, Colombia; ³Pathology, Fundacion Santa Fe de Bogota, Bogota, Colombia

10.1136/ijgc-2022-ESGO.192

Introduction/Background Currently, the diagnosis of borderline ovarian tumors (BOT) by ultrasound is a challenge. Our study proposes how to differentiate between true positives (TP) and false positives (FP) in the diagnosis of BOT.

Methodology A retrospective study of patients who underwent transvaginal ultrasound with a diagnosis of adnexal mass and a subsequent surgery between 2012 and 2022 at a tertiary referral university hospital with a gynaecological oncology unit. The IOTA ADNEX model was used to estimate the probability of benignancy or malignancy, with a cut-off of 10% for malignancy. Pathology was the reference standard used. Descriptive statistics and bivariate analysis were performed.

Results For a total of 757 patients, the IOTA ADNEX model identified 171 (22.4%) masses as malignant, of which 64 (37.4%) were classified as BOT. 18 (28%) masses were confirmed as TP by histopathology and 46 (72%) as FP. Its usual ultrasound characteristics were similar with the particularity of having a greater number of papillae and blood vessels in papillary projections in the TP. Therefore, additional sonographic features, such as the presence of a low level of echogenicity content and a pattern of microcystic tissue resembling a cluster of tiny bubbles, were evaluated. These characteristics were relevant in most of the TP. Regarding the FP, histopathology showed that 40% were serous cystadenofibroma, 20% ovarian tube abscess, 10% Low-grade serous carcinomas, among others.

Conclusion Our findings show how some usual and novel features in ultrasound are necessary for an adequate differentiation of BOT.

2022-RA-1712-ESGO INCONCLUSIVE OVARIAN TUMOURS BY IOTA SIMPLE RULES AND APPLICATION OF O-RADS MRI SCORES IN A TERTIARY REFERRAL CENTRE

¹Isabel Matas Barcelo, ²Lledó Cabedo, ¹Pere Fusté, ¹Cristina Ros, ²M Carmen Sebastia, ¹Meritxell Munmany. ¹Gynecology Department, Hospital Clinic Barcelona, Barcelona, Spain; ²Radiology Department, Hospital Clinic Barcelona, Barcelona, Spain

10.1136/ijgc-2022-ESGO.193

Introduction/Background The purpose of this study was to evaluate the Ovarian-Adnexal Reporting Data System Magnetic Resonance Imaging (O-RADS MRI) score for risk stratification of sonographically indeterminate adnexal masses.

Methodology Thirty-four patients with sonographically indeterminate adnexal mass according to Simple Rules were enrolled between March 2020 and March 2021. Subjective impression