the histological type (p=0.036), tumor grade (p=0.009), depth of myometrial invasion (p=0.018), serous invasion (p=0.003), cervical invasion (p=0.013), lymphovascular space invasion (LVI) (<0.0001) and tumor necrosis (<0.0001). On multivariate analysis, independent factors of LN metastasis were the presence of LVS (OR=0.312, 95% CI: 0.012-0.533, p=0.041), tumor necrosis (OR=0.431, 95% CI: 0.111-0.668, p=0.041) and serous invasion (OR=0.264, 95% CI: 0.028-0.690, p=0.034).

Conclusions Since LN metastasis represent an independent prognostic factor for survival, a nomogram based on histological and clinical characteristics could lead to a better detection of patients with high risk of LN metastasis.

**EP161/#735**

**THE ACCURACY OF MAGNETIC RESONANCE IMAGING FOR PRE-OPERATIVE ASSESSMENT OF MYOMETRICAL AND CERVICAL INVASION AND LYMPH NODE STATUS IN ENDOMETRIAL CARCINOMA**


1. University of Tunis El Manar, Sciences Faculty of Tunis, Laboratory of Microorganisms and Active Biomolecules, Tunis, Tunisia; 2. Salah Azaiez Institute of oncology, Surgical Oncology Department, Tunis, Tunisia; 3. Regional Hospital of Jendouba, Surgical Oncology Department, Jendouba, Tunisia; 4. Salah Azaiez Institute of Oncology, Radiotherapy Department, Tunis, Tunisia; 5. Salah Azaiez Institute, Pathology Department, Tunis, Tunisia.

10.1136/ijgc-2022-igcs.252

**Objectives**

To evaluate the accuracy of preoperative magnetic resonance imaging (MRI) to detect cervical extension, depth of myometrial invasion, and lymph node involvement in patients with endometrial cancer.

**Methods**

We retrospectively reviewed 50 cases of women with endometrial cancer, who underwent preoperative MRI assessment and surgical staging over a period of 2 years (2019-2021). The MRI findings were then compared with the postoperative histopathological findings that served as reference standards.

**Results**

The sensitivity, specificity, positive (PPV) and negative predictive values (NPV) of MRI for differentiation between deep myometrial invasion and superficial myometrial invasion were 100%, 58.33%, 72.22%, and 100% respectively. The sensitivity, specificity, PPV and NPP were 17.39%, 85.19%, 50%, and 54.75% for cervical invasion and 72.73%, 60.61%, 38.1 and 86.96% for lymph node metastasis, respectively. There was a significant correlation between preoperative FIGO-MRI staging and FIGO-histological staging (p<0.0001).

**Conclusions**

Pre-operative MRI has the advantage of making the pretreatment information about myometrium invasion and lymph node status allowing planning for the scale of surgery and preoperative counseling.

**EP162/#1008**

**IMMUNE T CELLS EXPRESSION IN ENDOMETRIAL CARCINOMA**


10.1136/ijgc-2022-igcs.253

**Objectives**

Although endometrial carcinoma (EC) is generally considered to have a good prognosis, quarter of patients will present with extraterine disease. This variability of evolution may be due to interaction between tumor cells and the tumor microenvironment. This study specifically provided and overview of the expression of immune T cells in EC.

**Methods**

We retrospectively analyzed by immunohistochemistry 24 patients with EC. Membranous expression of CD4 and CD8 and nuclear expression of FOXP3 were analyzed in T cells infiltrating the tissues in three independent high-power representative microscopic fields of the stained slides. Clinico-pathological characteristics were recorded.

**Results**

Patients mean age range was 63.9 years. CD4, CD8 and FOXP3 markers were significantly expressed in EC tissues in both the tumor nests and the surrounding stroma. Interestingly, high CD8 positive cells were reported in EC (median 17) compared to CD4 and FOXP3 (not exceeding a median of 2) suggesting a high cytotoxic T cell infiltration. CD8 high expression was found in patients with early stages (I+II), those with low grades (I+2), and in patients without metastatic nodes.

**Conclusions**

Our preliminary results showed a high expression of T cells infiltrating the tumor in EC. High tumoral density of CD8+ T infiltrating tumor in early stages and low grades emphasizes the role of CD8+ T cells in the control of tumor progression. Our study should be consolidated in a larger cohort and completed by further functional analysis to establish the implication of infiltrating T cells in EC.