BRCA 1/2 germline mutations. Oncological counseling is essential to ensure an appropriate interpretation of the genetic test result, explain the management possibilities, helping people in the choices of medical options. Mutations of the BRCA 1 and BRCA 2 genes increase the risk of developing familial breast and ovarian cancer. Prevention options we can offer to BRCA mutated patients are intensified surveillance, chemoprevention and prophylactic surgery regarding breast and ovarian cancer.

Methods A 35-item questionnaire on the type of prevention choice made was developed and offered to 197 BRCA mutated patients of the Sant 'Anna Hospital in Turin from September 2018 to February 2021. We selected 61 patients who correctly completed the questionnaire.

Results Concerning breast cancer risk reduction, 63% of patients tell us that the preferred option is intensified breast surveillance while for the ovary, the preferred option is surgery in 50% of patients. In both cases the variable ‘desire for motherhood’ influenced the patient’ choices in an important way. The 90% of women were satisfied with the doctor’s help in directing their choice of prevention.

Conclusions Physicians should discuss the advantages and disadvantages of risk reduction strategies with high-risk women. Concerning ovarian surgery, surgical menopause and estrogen deprivation are two aspects to consider and to inform patients about symptoms and their treatment. From the point of view of breast surgery, it is considered appreciable talk about aesthetic outcome.

**INFOGRAPHIC**

**EP322/#302 INFORMATION NEEDS OF LYNCH SYNDROME AND BRCA 1/2 MUTATION CARRIERS CONSIDERING RISK-REDUCING SURGERY: A QUALITATIVE STUDY OF THE DECISION MAKING PROCESS**

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**Objective** Risk-reducing surgery (RRS) may be offered to BRCA and Lynch syndrome mutation carriers to reduce risk of gynecological cancer. This study was conducted to better understand patients’ information needs when navigating the decision-making process surrounding RRS and how patients weigh different sources of information in their decision-making process.

**Methods** This study used a qualitative approach to understand patients’ perspectives towards RRS. Semi-structured interviews were conducted virtually. Inclusion criteria included women offered RRS between 35 and 70 years of age with an identifiable BRCA or LS mutation. Data from interviews was coded with constant comparative analysis to develop themes.

**Results** Of eight participants, six made decisions regarding RRS; five decided yes to RRS; one decided no. Two were undecided. Thematic analysis found that the key factors affecting patient’s decisions around prophylactic surgery were cancer risk, surgical menopause, and psychological readiness. To make an informed decision, patients relied most heavily on information provided by healthcare professionals and family members with prior cancer experience. Information from friends and the Internet also contributed to decision-making. However, some participants reported feeling inadequately informed and identified COVID-19 as a significant barrier affecting access to information.

**Conclusions** This qualitative study revealed the key sources of information influencing attitudes regarding risk-reducing surgery. Results underscore the need for greater attention to patients’ information needs in the context of psychological readiness, particularly amidst the pandemic. Research involving a larger sample size may help to better support the information needs of individuals with BRCA and LS mutations considering risk-reducing surgery.