

Introduction/Background Social media represents a strong instrument to share and divulge information targeting people of different ages and backgrounds. Little is known regarding how social media may impact patients' understanding and acceptance of their disease, large-scale screening and health care improvement. Due to the rising incidence of endometrial cancer globally, we aimed to understand the extent of posts regarding this disease on Instagram, one of the most used social media platforms.

Methodology We collected and analysed the number of Instagram posts for the following hashtags: #uterinecancer, #endometrialcancer, and #wombcancer from the launch of Instagram (October 2010) to May 5th, 2023. Moreover, using the Instagram algorithm, we highlighted the two top posts for each used hashtag.

Results We identified 83.670 posts related to endometrial cancer. More specifically, 48.597 posts for #uterinecancer, 28.234 posts for #endometrialcancer and 6.839 posts for #wombcancer. The most rated post on endometrial cancer belonged to a scientific research alliance providing an informative description of the disease, whereas the second top post consisted of a cancer-related nutritional advices' advertisement for patients. Figure 1 summarises the most frequent words gathered from the top post comments. It shows that endometrial cancer posts are usually linked to everyday life factors according to patients' point of view: hormonal changes, stressful life, hormonal therapy, and childbearing.



Abstract #183 Figure 1 The word cloud of the top ranked post on endometrial cancer

Conclusion In conclusion, Instagram may be considered a crucial social media platform for patients with endometrial cancer to obtain information regarding their disease.

Disclosures None

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MALIGNANT MIXED MULLERIAN TUMOUR OF THE UTERUS: ANALYSIS OF 80 CASES FROM A SINGLE ACADEMIC INSTITUTION

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Introduction/Background The aim of our study was to evaluate the clinicopathological features and prognostic factors of uterine mixed muller malignant tumor (MMMT).

Methodology In this retrospective study, the clinical characteristics patients with uterine MMT were evaluated. Survival curves were estimated by the Kaplan-Meier method and compared by the log-rank est.

Results Eighty patients with uterine carcinosarcoma were referred at University of Bari between 1995 and 2022. Their median age was 66.5 years. All women underwent total abdominal hysterectomy and bilateral salpingo-oophorectomy. Twenty-five percent had also omental resection. Pelvic lymphadenectomy was performed in 18% of the cases. The distribution by FIGO stage showed 21% in stage I (8% in stage IA and 13% in stage in stage IB), 35% in in stage II, 35% in stage III and 9% in stage IV. Adjuvant chemotherapy was administered to 54 patients (67%). Disease recurrence was observed in 26 cases (32%). The disease-free interval, defined as the time interval between the end of the first line of chemotherapy and the appearance of recurrence or distant metastases, was 23 months. The median overall survival was 103 months.

The evaluation of survival according to FIGO stage, histological type, tumour size, chemotherapy regimen, pelvic lymphadenectomy, and myometrial invasion provided results not statistically significant for prognostic purposes. However, no statistical differences were observed after adjusting for FIGO stage. Only tumour histotype was found to be a decisive element for prognostic evaluation after adjusting for stage: patients with homologous-type MMT demonstrated a survival advantage in an advanced stage compared to an early stage.

Conclusion Uterine MMT is an aggressive tumour, often diagnosed at an advanced stage and with a high rate of metastases or recurrences. Because of its rarity, its management is controversial and fixed prognostic factors cannot be defined.

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THE ROLE OF HISTOLOGICAL AND MOLECULAR FEATURES IN PREDICTING THE RISK OF NODAL DISEASE IN ENDOMETRIAL CANCER: A PROSPECTIVE STUDY

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Introduction/Background To assess the role of histopathological and molecular features in predicting the risk of nodal metastases in apparent early-stage endometrial cancer (EC) patients undergoing sentinel node mapping.

Methodology This is a prospective multicenter trial. Consecutive patients with apparent early-stage EC undergoing laparoscopic hysterectomy, bilateral salpingo-oophorectomy, and sentinel node mapping were enrolled. Histological and molecular features were recorded at the final pathological evaluation and were used to predict node positivity.

Results Charts of 210 EC patients were evaluated. The study population included 178 (85%) and 32 (15%) patients with endometrioid and non-endometrioid EC, respectively. According to conventional pathological uterine characteristics, 94, 46,