apparent early-stage epithelial ovarian cancer(EOC) at tertiary-level-center.

Methodology We retrospectively analyzed data with patients aged-eighteen years or above with an apparent early-stage EOC who underwent surgical staging and treatment. Besides demographic and imaging parameters, we collected tumour histology and grades. In addition, operative-notes were reviewed for the extent of disease spread in pelvis and apparent stage, as well as whether the omentum and peritoneal surfaces in question appeared to have metastatic disease, and whether biopsies were of normal tissue(random-biopsy) or of abnormal appearing tissue(targeted-biopsy).Patients with positive lymph-nodes and evident abdominal disease were excluded

Results We performed 166 primary staging since January2017, with 72 being exclusively for EOC. Among these,20 revealed borderline-pathology. Histology for EOC were serous with 36% followed by mucinous(22%) and least with clear-cell-carcinoma(1%). Out of these,24% were positive on peritoneal-fluid analysis.12% had positive peritoneal biopsies. Among these,18% showed omental occult metastasis. Among 46 cases of clinical stage1a, 6 upstaged due to positive ascitic-fluid or peritoneal-fluid cytology, 3 due to ovarian surface involvement, 2 due to fallopian-tube involvement,1 due to positive pelvic peritoneal biopsy and 5 cases due to positive omental metastasis. In Stage 1b, 14 cases were upstaged. One surgical spill case was turned up with 3a omental metastasis. 2b stage upstaged with 1 case to 3a. Omentectomy is shown to improve upstaging and should be included in early-stage EOC staging laparotomy. Random peritoneal biopsies were not beneficial for early-stage EOC due to few positive outcomes in biopsies.

Conclusion Omentectomy is shown to improve upstaging and should be included in early-stage EOC staging laparotomy. Due to few positive outcomes in biopsies, random peritoneal biopsies do not appear to be beneficial for early-stage EOC.

Disclosures None

#62 MICRORNA 1181 AND 4314 AS PROMISING BIOMARKERS FOR EPITHELIAL OVARIAN CANCER DIAGNOSIS AND PROGNOSIS

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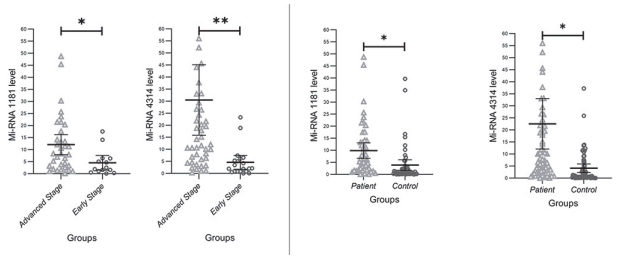
Introduction/Background Epithelial ovarian cancer (EOC) is the most ominous tumor of gynecological cancers due to its poor early detection rate and unfavorable prognosis. To date, there is no reliable screening method for the diagnosis of ovarian cancer at an early stage. MiRNAs are small non-coding RNA molecules, and their main function is to downregulate gene expression. The present study compared the serum miRNA1181 and miRNA4314 levels in patients with EOC and healthy controls to measure the diagnostic and prognostic value as candidate biomarkers.

Methodology We extracted serum samples from a total of 135 participants (69 patients with EOC and 66 healthy controls) at the Department of Gynecologic Oncology between September 2018 and December 2019. Relative expressions of miRNA1181 and miRNA4314 were measured by quantificational real-time polymerase chain reaction assay (qRT-PCR).

Results Of the 69 patients with EOC, 15 were stage I, four were stage II, 35 were stage III, and 15 were stage IV (according to FIGO classification). The median OS was 31.9 months (range 0.9–42.1) and the median DFS was 20.4 months (range 0.9–39.0)The present study revealed that both serum miRNA 1181 and miRNA 4314 levels in patients with EOC were dramatically increased compared to healthy controls with $p<0.001$ for each marker. In addition, there was a significant relationship between miRNA 1181 and miRNA 4314 overexpressions and the stage and prognosis of the disease. Finally, patients with high expression levels of miRNA 1181 and miRNA 4314 had significantly shorter survival rates than those with low expression levels.

Conclusion The current study proposed that serum miRNA1181 and miRNA4314 could discriminate the EOC patients from healthy controls. In addition, both miRNA1181 and miRNA4314 may be predictive biomarkers for ovarian cancer prognosis. Further studies are needed to confirm the findings of the present study.



Abstract #62 Figure 1 On the right (The relative expression levels of miRNA1181 and miRNA 4314 in patients with epithelial ovarian cancer and healthy controls. *p-value is less than 0.001) On the Left: The relative expression levels of a miRNA 1181 and miRNA 4314 in early stage and advanced stage of epithelial ovarian cancer. *p-value is 0.012, **p-value is less than 0.001.

Disclosures We declared that we have no conflict of interest

#63 CENTRAL NERVOUS SYSTEM METASTASIS IN GYNECOLOGIC CANCERS: SEEKING THE PROGNOSTIC FACTORS

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