

Introduction/Background After the failure of Human Papilloma Virus (HPV) the vaccination campaign in 2018 in Romania, a new campaign has begun in 2021 with nonavalent HPV vaccine. Our study assessed the knowledge, attitudes, and practice of involved groups towards HPV infection and vaccination in Northeastern part of Romania.

Methodology Semi-structured interviews with teens, key informants comprising of parents, teachers, community leaders and health professionals involved in HPV were conducted. Thematic content analysis was used for data analysis.

Results From our findings, a significant proportion of teens, have limited knowledge of the subject. Vaccination of boys is viewed with suspicion by the parents and even teachers. However, the parent's attitudes are better now than in the first campaign, when the parent's rejection was the main reason for the failure of the campaign. A more positive attitudes was also observed among general practitioners and nurses. A potential problem that can affect the vaccination is the long waiting time to obtain the vaccine.

Conclusion This second HPV campaign started from much higher premises compared to the failed campaign of 2008. Active involvement in primary prevention strategies may promote the uptake of the vaccine encouraging the acceptability of vaccination.

Disclosures No disclosures.

#1007

COMPARING THE USE OF MRNA HIGH RISK HPV AND HPV DNA TEST COMBINED WITH LIQUID BASED CYTOLOGY AS PRIMARY SCREENING TOOL FOR CERVICAL CANCER (PRELIMINARY RESULTS)

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Introduction/Background During the last decades many countries have established national screening programs that include co-testing (HPV DNA and cytology). The addition of HPV testing to cytology resulted in an increased detection of CIN3+. HPV-mRNA is a promising alternative for cervical screening and more specific tool in recognizing an active infection. Our aim was to compare the use of both tests (HR-mRNA and HPV DNA) combined with liquid based cytology in a primary HPV cervical screening program.

Methodology In our prospective study we included women aged 25–65 (mean age=45 years old) that attended the gynecological department of the Naval hospital of Athens over the period 2019–2022. They underwent liquid-based cytology (LBC) and 14 type mRNA-HPV (APTIMA) along with 49 type HPV DNA (CLART, Genomica).

Results So far, 300 women have been tested. 30/300 (10%) have been found mRNA(+) and 82/300 (27,3%) HPV-DNA (+). Among patients with low grade findings in cytology (ASCUS, LGSIL) 79% were HPV-DNA (+) and 26% mRNA (+). Among patients with normal cytology 42% were HPV-DNA (+) and 12% mRNA(+). 10% of them developed CIN 2+ lesions in the next 2 years. Interestingly, there were 55/300 (18%) women that had minor intraepithelial lesions and were mRNA (-). Two HSIL patients being negative for HPV-

DNA were mRNA positive and CIN 2+ was confirmed in biopsies.

Conclusion Combination of both HPV tests with cytology undoubtedly increased sensitivity. mRNA had better specificity, over HPV DNA, in identifying cases with normal cytology that are at risk of developing CIN 3+ lesions. Furthermore, it can also be used as a triage of women with ASCUS and LGSIL cytology, that represent HPV transient infections, are often HPV DNA positive and cause a lot of anxiety among women. The main advantage of mRNA, over HPV DNA, is the identification of women with a true risk of developing cervical cancer.

Disclosures No conflict of interest

#1021

PSYCHOLOGICAL AND SOCIO-ECONOMIC FACTORS INFLUENCING HUMAN PAPILLOMA VIRUS (HPV) VACCINATION RATES AMONG ROMANIAN WOMEN: A MIXED-METHOD CROSS-SECTIONAL SURVEY EVALUATING ANTICIPATED REGRET RELATED TO CERVICAL CANCER (CC) DIAGNOSIS

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Introduction/Background Cervical Cancer (CC) is one of the foremost causes of mortality among Romanian women that vaccination programs can effectively prevent. Despite this, vaccination rates remain low. This study evaluated psychological and socio-economic factors influencing HPV vaccination rates in Romania.

Methodology A mixed-method cross-sectional survey was conducted among Romanian women. The 90 questions-survey collected demographic data, information related to anticipated regret related to CC diagnosis, the vaccination status of the responders, and basic knowledge about cervical cancer and the HPV infection and vaccine while evaluating the leading psychological and socio-economic barriers and facilitators for vaccination. The survey was delivered online.

Results Sixty-five women aged 19 to 62 partook in the survey. Only 22 women were fully vaccinated against HPV. Guilt, worries about what can happen, regret, feeling responsible for what happened, fear of dying, low confidence regarding sexual activity, and concerns regarding the ability to have children were the most common concerns among women who exhibit anticipated regret related to a CC diagnosis. Factors negatively impacting the vaccination rate were age, lack of information regarding the vaccine, lack of interest, not knowing the side effects or considering them too dangerous, the price of the vaccine, previous diagnosis of an HPV infection, and lack of trust. The main facilitators involved in the vaccination uptake were: the belief that the vaccine can prevent CC, the presumption that the vaccine minimizes the risk of infection, receiving a recommendation from an expert (gynecologist or other physicians), possessing more information regarding the infection, and perceiving the vaccine as safe.

Conclusion Anticipated regret related to a CC diagnosis did not seem to affect the vaccination rate among Romanian women. Price and lack of information or misinformation appeared to impact the decision to undertake the vaccine negatively.

Disclosures No conflict of interest.

#1029

CERVICAL CANCER PREVENTION AMONG UKRAINIAN REFUGEES DURING THE FIRST SIX MONTHS AFTER THE BEGINNING OF THE WAR: THE EUROPEAN NETWORK OF YOUNG GYNAE ONCOLOGISTS (ENYGO) SURVEY RESULTS

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Introduction/Background In 2022, over 8.2 million refugees were recorded across Europe after the Russian invasion in Ukraine. As every human crisis, the war is associated with changes in access to medical care. Due to the cervical cancer pathogenesis, results of compromised prevention may become visible after years since the beginning of war. The aim of the study was to evaluate experience of European centres in cervical cancer prevention among Ukrainian refugees.

Methodology This was a cross-sectional questionnaire based study. Questionnaires were distributed among clinicians from the European Network of Young Gynae Oncologists (ENYGO) network until August 2022. Our survey included questions about managing patients who voluntarily reported exclusively for the purpose of cervical cancer screening or treatment of preinvasive cervical lesions.

Results Our analysis included data obtained from 38 respondents practicing in Germany, Hungary, Italy, Norway, Poland, Romania, Slovenia, Spain, Turkey, and the UK. More than one third of these centres were accredited by the European Society of Gynaecological Oncology (ESGO).

Seven (17%) centres reported participation in Ukrainian refugees gynaecological cancer prevention measures. Seven (17%) respondent sites collected Pap smear or human papillomavirus (HPV) test. Three (7%) centres reported demand for HPV vaccination from the Ukrainian refugees.

Seven (17%) clinical centres managed Ukrainian refugees with precancerous cervical lesions. More than half of these patients (54%) required primary invasive treatment. 15% were admitted for continuation of treatment. 7% required follow-up after treatment. 23% underwent further diagnostic regimen without indication for invasive treatment.

Conclusion Prevention and treatment of cervical lesions in terms of war in Ukraine pose significant challenge both for European healthcare providers and Ukrainian refugees. The results obtained in present study show that even in specialized oncologic centres, which are mostly dedicated to treat invasive disease, Ukrainian refugees report and require both preventive and curative services of cervical lesions.

Disclosures Nothing to disclose

#1110

PILOT IMPLEMENTATION OF HPV SELF-COLLECTION FOR CERVICAL CANCER SCREENING IN COLOMBIA: CHALLENGES OF NON-ORGANIZED PROGRAMS

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Introduction/Background Colombia is a middle-income country with universal health insurance. Cervical cancer is the third cause of cancer incidence and mortality among Colombian women. The objective of this study is to assess acceptability and adherence to cervical cancer screening algorithms based on self-collected HPV testing among hard-to-reach women in Colombia

Methodology A randomized trial with three arms included: 1) HPV and pap-smear samples collected by clinicians in one visit and followed by colposcopy/biopsy and treatment; 2) HPV self-collection followed by colposcopy/biopsy and treatment; and 3) HPV self-collected followed by ablative treatment. Women 30 to 65 years without history of cervical cancer screening in the previous 3-years were invited to participate. Invitation and sample collection were planned by home visits and by mail. Acceptability was defined as percentage of women tested among invited, and adherence as percentage of women compliant with the diagnostic and treatment workup among HPV-positive women

Results No women could be recruited as planned given the low efficacy for home visits and mail/post. Alternative strategies were implemented including invitation by phone call, in-person invitation in health centers, and screening campaigns. Two hundred and fifteen women were included. The patients recruited in arms 1, 2 and 3 were 68, 72, and 75, respectively. 4.7% of women of the target population were reached by call, and 21.1% of women attending the screening campaigns were eligible. Acceptability was 74.4%, 94.7%, and 92.8% with the phone calls, in-person invitation, and screening campaigns respectively. the compliance with the diagnostic work-up was 100.0% and 53.3% in arms 1 and 2. Treatment compliance was not assessable

Conclusion HPV self-collection is highly acceptable; however, coverage of hard-to-reach populations is challenging for scenarios without organized programs

Disclosures None