and in the second with and we compare the healing time of the vulva

The first case was a 72-year-old woman with hypothyroid-ism who presented with verrucous squamous cell carcinoma of the midline vulva from 1 cm above the urinary meatus classified after surgery as stage IIIB according to FIGO 2021.

Recovery was obtained 37 days after surgery.

The second case was a 68-year-old diabetic who presented with basaloïd carcinoma of the left labia minora which classified stage IIIB according to FIGO 2021.

We used the V-Y advancement gluteal fold flap. which allowed faster healing in 18 days after surgery.

**Results** Surgical management of vulvar cancer should be individualized, and the most conservative operation that will result in cure of the disease should be performed.

Fast postoperative recovery was obtained in the case of vulvar reconstruction, who will be referred for adjuvant therapies.

**Conclusion** Vulvar cancer is a rare pathology, which represents 2% of female genital tract tumors. It is a cancer generally affecting postmenopausal women with an average age of diagnosis of 70 years.

The treatment is mainly surgical with total or partial resection, associated or not with an inguinal lymphadenectomy. In order to limit the surgical morbidity and the healing time, various techniques of perioperational reconstruction exist.

**Abstract #1107 Figure 1 The benefit of reconstruction in vulva cancer**

**Conclusion** Vulvar cancer is a rare disease, so we don’t have standardized guidelines for treatment. However, it seems that vulvar reconstruction allowed a better recovery and we need further study to confirm this.

**Disclosures** I have no conflict of interest.