Disclosures There have no conflicts of interest to disclose.

Introduction/Background Radical surgery is the only curative treatment for persistent or recurrent cervical cancer. Pelvic exenteration is the preferred treatment and is associated with significant morbidity and mortality.

The objective of this study is to review the cases of radical surgery for recurrence or persistence of cervical cancer in a tertiary hospital in Spain between 2017 and 2022.

Methodology A retrospective descriptive study was carried out. Patients undergoing surgery for recurrence or persistence of cervical cancer in a tertiary hospital in Madrid (Spain) between 2017 and 2022 were selected.

Results A total of 12 cases were studied: 3 (25%) adenocarcinomas, 8 (66.6%) epidermoid carcinomas, 1 (8.3%) mixed carcinoma (adenocarcinoma and neuroendocrine). Primary treatment was radiotherapy and chemotherapy in 9 cases (75%) and surgery in 3 cases (25%). Radical surgery was performed in 6 (50%) cases due to persistent disease and in 6 (50%) cases due to recurrence. Surgeries performed were: 2 posterior exenterations (16.7%), 2 anterior exenterations (16.7%), 2 total exenterations (16.7%), 2 total exenterations + LEER (lateral extended endopelvic resection) (16.7%), 1 simple hysterecmy (8.3%), 2 radical hysterectomies (16.7%), 1 vaginal cuff removal with parametrectomy and lymphadenectomy (8.3%). Surgical margins were negative in 10 cases (83.3%) and positive in 2 (16.7%). In 2 (16.7%) cases there was an exitus due to complications associated with surgery, 2 patients (16.7%) remained free of disease and the other 8 patients (66.6%) had recurrence. The median time to recurrence was 0.63 years.

Conclusion Studies with larger sample sizes are needed to assess the benefits of salvage surgery in cases of persistent or recurrent cervical cancer, given the high morbidity of surgery and the frequent early recurrence after surgery.

Disclosures There is no conflict of interest among the authors.

Introduction/Background Atypical glandular cells, favor neoplastic (AGC-FN) PAP smears are rare and might be frequently associated with cervical precancer/cancer. This study explores the value of the HPV test and methylation test as a co-test in stratifying patients with AGC-FN cytology for further management.