assess their physical, emotional, social, and functional well-being.

Methodology A cross-sectional anonymous survey was conducted on 25 patients with gynecological cancer treated with brachytherapy in the last 3 months at Salah Azatie Institute using two questionnaires, FACT-Cx and EORTC QLQ-C30.

Results The median age was 63 years (31–78). Thirteen patients (52%) received low-rate brachytherapy, while 12 patients (48%) received high-rate brachytherapy.

For physical well-being, the majority of patients did not experience extended bedridden periods (65%), lack of energy (35%), or need assistance with daily tasks (75%). However, 80% of patients reported difficulty meeting their family’s needs, and all patients required rest. Only six patients (24%) had difficulty sleeping.

Socially, 12 (48%) patients were satisfied with their communication with family and friends about their illness. Half of them reported that their physical condition or medical treatment interfered with their family and social life. Half of patients were afraid to have sex. In addition, 55% did not feel sexually attractive, and 85% were dissatisfied with their sex life. Emotionally, 70% of patients were nervous or worried about their condition, but 85% had not lost.

Financial difficulties related to medical treatment and physical condition were experienced by 60% of patients.

As for side effects, 25% of patients were bothered by vaginal odor, 35% experienced vaginal discharge or bleeding, and only 7% reported constipation or diarrhea.

The median rating of overall quality of life was 5 out of 7. The comparison of FACT-Cx scores between High-rate and Low-rate Brachytherapy revealed a mean average total score of 118 and 116, respectively.

Conclusion Brachytherapy may cause side effects affecting patients’ quality of life. Healthcare professionals should manage outcomes and provide supportive care to maintain patient well-being.

Disclosures Nothing to disclose.

ELEVATED VAMP8 EXPRESSION REGULATES THE PROGRESSION OF HPV16-INFECTED CERVICAL LESIONS BY PROMOTING CELLULAR AUTOPHagy

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Methodology Proteomics analysis was employed to study the relative expression of VAMP8 in cervical cell lines (ECT-1, Hela, SiHa, C-33). TCGA was used to explore the cancer prognosis and immune infiltration. CCK-8, Transwell, and flow cytometry techniques were employed to analyze the effects of VAMP8 on cell proliferation, migration, invasion, cell cycle distribution, and apoptosis. Transmission electron microscopy, immunofluorescence, and WB experiments were conducted to detect autophagy levels. Tumor growth and metastasis in vivo was evaluated using a nude mouse subcutaneous xenograft model.

Results Proteomics analysis revealed that VAMP8 expression was higher in LSIL than HSIL and cervical cancer but significantly higher than in normal HPV16-negative cervical tissues. In vitro experiments demonstrated that relative overexpression of VAMP8 in HPV16-positive ECT-1 cells resulted in increased autophagic flux, decreased cell proliferation, migration, invasion, increased apoptosis, and an increased proportion of cells in the G1 phase. In other words, elevated VAMP8 expression in HPV16-infected cervical cells promotes autophagy while inhibiting normal cervical cell growth. In cervical cancer cells, high VAMP8 expression promotes autophagy and tumor cell growth. In vivo experiments further confirmed that overexpression of VAMP8 promotes cervical cancer growth and metastasis.

Conclusion VAMP8 promotes autophagy in cervical cells, inhibiting cellular function and maintaining homeostasis in the early stages of persistent HPV16 infection. However, in cervical cancer, VAMP8 promotes tumor cell growth and metastasis. This may be due to the differing roles of autophagy at various stages of tumor development. These findings suggest that VAMP8 may serve as a potential prognostic biomarker and therapeutic target for cervical cancer.

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AGE AND CERVICAL HISTOLOGY, THE MOST IMPORTANT FACTORS TO PREDICT HUMAN PAPILLOMA VIRUS CLEARANCE

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Introduction/Background Introduction: Cervical Cancer (CC) is a common cancer which is associated with HPV-infection. The aim of this study is to investigate the risk factors which affects HPV-clearance.

Methodology Methods: This study was carried out on women with high risk HPV infection. All the patients underwent pap smears and cervical biopsy. Demographic data, marital status, vaccination history and consumption of tobacco, alcohol, opioids and oral contraceptive pills was asked through a questionnaire.

Results Results: The results showed that in one year follow-up, 142 (67.1%) patients showed HPV clearance. The HPV clearance decreased by increasing age (p=0.028) or higher CIN numbers (p=0.017). In case of parity, there was no significant difference in univariate analysis (p=0.147), but it was significant in multiple logistic regression analysis (95% CI: 0.413–0.941, OR=0.624, p=0.024).

Conclusion Conclusion: It seems that age, cervical histology and parity at the start of HPV infection are the most important factors for HPV clearance.

Disclosures No