which can oppose the anti-proliferative effects of PI3K/mTOR inhibition, was not observed with the combination of baiacalein and SR04 on Western blots.

Conclusion/Implications The combination of baiacalein and AMPK activator SR04 inhibits endometrial cancer cell proliferation in a synergistic manner. The combination does not appear to activate AKT and MAPK pathways which can hinder efficacy. The combination of baiacalein and SR04 may offer a novel treatment paradigm for endometrial cancer.

Methods We present a retrospective case series of five patients who are undergoing fertility sparing treatment for early endometrial cancer, who also underwent bariatric surgery for treatment of obesity and related comorbidities. We aim to show early regression of endometrial cancer for all the patients and also report on the other health benefits of bariatric surgery.

Results All five patients in this series achieved early regression of endometrial cancer within six months of undergoing bariatric surgery. They also achieved significant weight loss and resolution of obesity-related comorbidities. Bariatric surgery could be a promising component of fertility sparing management for obese patients. Long term, prospective studies are required to confirm the benefits reported in this series.

Introduction Endometrial cancer (EC) is the most common gynecological cancer in Japan. The initial treatment of EC is surgery followed by platinum-based chemotherapy, therefore, platinum resistance is major factor of poor prognosis. In this study, we focused on IGF2BP2 which is highly expressed in platinum resistant EC cells and analyze its function.

Methods We performed iTRAQ-based exhaustive and quantitative protein analysis using EC tissues of platinum sensitive and resistant cases, and detected high expression protein (IGF2BP2) among platinum resistant cases. Using 119 EC cases, we also performed survival analysis to reveal the correlation between IGF2BP2 expression levels and overall survival. Moreover, we generated IGF2BP2 knockdown EC cell lines using siRNA, and measured IC50 value of platinum reagent.

Results iTRAQ-based protein analysis detected 2299 proteins, and IGF2BP2 was one of the highly expressed proteins in platinum resistant EC cases. High expression of IGF2BP2 was associated with poor prognosis of EC (p<0.05). Knockdown of IGF2BP2 decreased IC50 value of platinum reagent (p<0.05).

Conclusion/Implications High expression of IGF2BP2 is poor prognostic factor and is related platinum resistance of EC.

Introduction Obesity is a major risk factor in the development of endometrial cancer in young patients in the reproductive age group. Fertility sparing treatment is a viable option for a select group of patients with early endometrial cancer, and involves systemic and intra-uterine hormonal therapy. Weight loss has been associated with improved outcomes in this group. Bariatric surgery has been shown to be the most effective and durable method of weight loss in obese patients. However, there is a paucity of data studying the benefit of bariatric surgery as part of fertility sparing management.

Methods We performed a retrospective cohort study using data between January 1, 2000, and December 31, 2020 at two tertiary centers in Korea and Taiwan. Adjuvant therapy was divided into 3 categories: systemic chemotherapy, radiotherapy, and combination chemotherapy and radiotherapy since there is limited research available that compares their outcomes.

Results After removing patients with incomplete data from a total of 626 patients with high-risk endometrial cancer, 519 patients were included in the study. Among these, 176 received radiotherapy, 200 received chemotherapy, and 143 received a combination of radiotherapy and chemotherapy. After matching patients using propensity scores, 83 patients were included in each treatment group for analysis. There was no significant difference in survival between groups when all patients, early stage patients (stage I-II), and advanced stage patients (stage III-IV) were considered. Although statistical significance was not reached after matching, advanced stage patients had a higher survival rate when treated with combined chemotherapy and radiotherapy. Further analysis of the combined treatment by dividing it into different methods did not reveal any differences in survival.

Conclusion/Implications There was no significant variation in the survival benefits among the different stages and treatment categories. However, for stage III and IV groups, the