

mass index (BMI), waist circumference (WC), and other healthcare data, measured and collected during a health examinations and cancer-screening survey. By setting a normal weight/WC group (BMI, 18.5–22.9 kg/m² or WC, 80.0–84.9 cm) as the reference, we conducted multivariate analyses.

Results The total follow-up duration was 22389854.63 person-years. In post-menopausal women, as the BMI classification level increased from normal to class II obesity, the risk of endometrial cancer (aHR, 2.11; 95% CI, 1.81–2.46) and ovarian cancer (aHR, 1.38; 95% CI, 1.20–1.58) significantly increased. The risk of endometrial cancer also increased as the WC classification increased from <75.0 to ≥95.0 cm. With a WC of 80.0–84.9 cm as the reference, the lowest risk of endometrial cancer was observed in WC <75.0 cm (aHR, 0.75; 95% CI, 0.67–0.84) while the highest risk was observed in WC ≥95.0 cm (aHR, 1.56; 95% CI, 1.33–1.82). In premenopausal women, the trends of endometrial and ovarian cancer incidence in pre-menopausal women were similar to those observed in post-menopausal women. For cervical cancer, only class II obesity was significantly associated with increased risks in both post-menopausal women (aHR, 1.18; 95% CI, 1.01–1.39) and pre-menopausal women (aHR, 1.27; 95% CI, 1.02–1.57).

Conclusion/Implications In Korean women, the impact of obesity on the development of gynecologic cancers differs according to the malignancy type and menopausal status.

EP191/#664

FACTORS ASSOCIATED WITH UPTAKE OF RISK-REDUCING SALPINGO-OOPHORECTOMY IN BRCA 1/2 MUTATION CARRIERS: SINGLE CENTER EXPERIENCE

Bora Kim*, Yun Hwan Kim, Mi-Kyung Kim. *Ewha womans university Mokdong Hospital, Obstetrics and Gynecology, Seoul, Korea, Republic of*

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Introduction Risk-reducing salpingo-oophorectomy (RRSO) is one of key prevention strategies for female BRCA1/2 mutation carriers. The purpose of this study was to identify the factors associated with uptake RRSO among patients with BRCA1/2 mutation.

Methods We reviewed the medical records of 786 patients who underwent BRCA1/2 gene testing at Ewha Womans University Mokdong Hospital from June 13, 2007 to July 28,

2020. Socio-demographic and clinical characteristics were compared between non-RRSO group and RRSO group, and the factors affecting the uptake of RRSO were analyzed.

Results Among the final study population of 70 patients with BRCA1/2 mutation, 39 (55.7%) and 31 (44.3%) were in the non-RRSO group and RRSO group, respectively. There were significant differences in age (41.38±13.65 yr vs. 44.35±7.78 yr, P=0.042), marital status (30.8% vs. 3.2% in single; 66.7% vs. 87.1% in married, P=0.002), parity (43.6% vs. 6.5% in nullipara; 53.4% vs. 93.6% in primi-/multipara, P<0.001) and employment status (41.0% vs. 32.3%, P=0.019) between non-RRSO group and RRSO group. However, no significant differences between the two groups were observed in personal and familial histories of breast or gynecologic cancer. Univariate analysis found significant associations between RRSO uptake and parity, marital and employment status. In RRSO group, the median time interval between BRCA1/2 testing and RRSO uptake was 8.8 (6.2–19.6) months. No subsequent cancer cases occurred in either group during the surveillance.

Conclusion/Implications RRSO uptake in patients with BRCA1/2 mutation was affected by parity, marital and employment status. These findings may be of useful assistance to clinicians when counseling patients with BRCA1/2 mutations receiving RRSO.

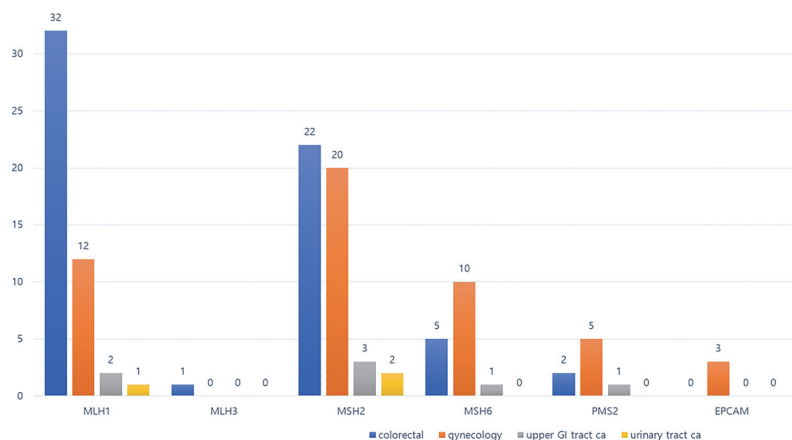
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CLINICAL FEATURES OF CANCERS DIAGNOSED IN PATIENTS WITH LYNCH SYNDROME-ASSOCIATED GENE GERMLINE MUTATIONS

¹Ji Eun Lee*, ²Dongju Won, ³Ji Soo Park, ⁴Tae Il Kim, ¹Eunji Nam. ¹Yonsei University College of Medicine, Department of Obstetrics and Gynecology, Women's Cancer Center, Yonsei Cancer Center, Institute of Women's Life Medical Science, Seoul, Korea, Republic of; ²Severance Hospital, Yonsei University College of Medicine, Department of Laboratory Medicine, Seoul, Korea, Republic of; ³Yonsei Cancer Center, Yonsei University College of Medicine, Department of Internal Medicine, Division of Medical Oncology, Seoul, Korea, Republic of; ⁴Division of Gastroenterology, Severance Hospital, Yonsei University College of Medicine, Department of Internal Medicine, Seoul, Korea, Republic of

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Introduction The purpose of this study is to determine the clinical features of comorbid cancers by gene (MLH1, MSH2, MSH6, PMS2, EPCAM) in patients diagnosed with Lynch syndrome (LS).



Abstract EP192/#809 Figure 1