



Abbreviations: avg, average; PARPi, poly (adenosine diphosphate-ribose) polymerase inhibitor; PROC, platinum-resistant or -refractory ovarian cancer; SLR, systematic literature review; USD, United States dollar  
<sup>a</sup> Dose not mentioned.

### Abstract EP197/#453 Figure 1

recurring within six months of the last platinum-based chemotherapy. The SLR was conducted per the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Statement.

**Results** A total of 19 records from 18 studies were included, two of which were US cost-effectiveness analyses (CEAs) from the updated SLR. A 2022 US CEA reported that olaparib was cost-effective vs niraparib for BRCA1 and BRCA2-mutation-positive PROC at a willingness-to-pay threshold of \$100,000. In another CEA from 2022, total parenteral nutrition was not cost-effective for the management of inoperable malignant bowel obstruction in PROC. Overall, the cost-per-cycle for PROC treatment ranged from \$53 to \$4,360 for chemotherapy, \$6,989 to \$9,806 for bevacizumab, and \$7,780 to \$9,022 for poly-(adenosine diphosphate-ribose) polymerase inhibitors (figure 1). Reported incremental cost-effectiveness ratios were high and most interventions were not considered cost effective (table 1).

**Conclusion/Implications** High healthcare and treatment costs associated with the management of PROC emphasize the need for cost-effective treatment options in PROC.

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### KNOWLEDGE, ATTITUDE, AND ACCEPTANCE TOWARD COVID-19 VACCINE OF GYNECOLOGIC CANCER PATIENTS IN THAILAND: A MULTICENTER STUDY

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**Introduction** To evaluate the knowledge, attitudes, and acceptance toward covid-19 vaccine of gynecologic cancer patients in Thailand

**Methods** Participants from Chiang Mai University Hospital, Khon Kaen university hospital, Khon Kaen Hospital, Prince of Songkla university hospital, and the National Cancer Institute (NCI) were surveyed on these issues using a WHO survey tool.

**Results** Between February and September 2022, 1,263 patients participated in this project and 1,084 (85.8%) received the COVID-19 vaccine. The highest rate of vaccination was from NCI followed by Khon Kaen, Chiang Mai, and Songkhla. 356 participants (28.2%) were infected with COVID-19 and 46 infected participants (12.9%) were unvaccinated. Regarding knowledge and attitudes, most participants felt quite easy to get health literacy, moderate probability to get the severity of covid-19 infection, proper behavior for prevention, little stress of COVID infection, quite a lot to trust in healthcare workers, quite agreed with lifting regular rules for control covid-19 pandemic, and often general well-being. The significantly different level (level 0–6: the least to the most) vaccination decision factors in unvaccinated versus vaccinated participants were as follows: health ministry recommendation (3.92 vs.4.16), how easy to get the vaccine (3.6 vs. 3.9), no need to vaccine due to rare disease (2.6 vs.2.2), stress made me not want to vaccinate (2.6 vs 2.1), if everyone is vaccinated, no need for me to vaccinate (2.5 vs 1.9), and the importance of covid-19 vaccines (3.7 vs.4.2)

**Conclusion/Implications** Most gynecologic cancer patients received covid-19 vaccine and revealed a good knowledge and attitude toward this pandemic

### AS08. Gynecologic pathology/cytology and disease pathogenesis

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### ATR-FTIR SPECTROSCOPY ANALYSIS OF GYNECOLOGICAL TUMOR PARAFFIN BLOCKS

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**Introduction** Epithelial ovarian cancer (EOC) is the most lethal cancer among gynecological malignancies worldwide, accounting for 90% of all ovarian cancers. Our study's primary objective is to discriminate benign from malignant ovarian tumors using tissue samples that underwent formalin fixation using ATR-FTIR spectroscopy.

**Methods** This is a retrospective, single center study. Inclusion criteria were of formalin fixed tissue taken from pathology