Conclusion/Implications Initial FIGO stage and histologic subtypes were significant prognostic factors for survival. For patients with stage IVB disease, chemotherapy only might be preferable rather than combined therapy.

**EP358/#615**
METHYLATION PROFILING IDENTIFIES TWO DISTINCT CLUSTERS OF SMALL CELL CARCINOMA OF THE OVARY HYPERCALCEMIC TYPE (SCCOHT)

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**Introduction** Small cell carcinoma of the ovary hypercalcemic type (SCCOHT) is a highly aggressive ovarian malignancy that occurs in young women and is defined by inactivating mutations in SMARCA4. While current treatment modalities only show limited success, emerging evidence suggests that a subset of patients may respond to immunotherapy. Here we set out to assess if methylation profiling can stratify SCCOHT into clinically meaningful subgroups.

**Methods** We collected a multicenter series of clinically annotated SCCOHT. Tumor samples were analysed using the Illumina EPIC and 450k BeadChip. Focal copy number score (FCS) was computed from segmented array data using CNApp. Statistical analyses included the Chi-Squared tests and one-way ANOVA.

**Results** Our cohort included 27 SCCOHT. The age at diagnosis ranged from 7 – 47 years (n=25, median of 25 years) and 45% of tumors where this information was available (n=20) presented with low stage disease. Clustering analysis of DNA methylation data identified two distinct tumor clusters (C1, n=15 and C2, n=12). C1 was associated with a trend towards younger patient age when compared to C2 (23.7 years vs. 30.2 years). Tumors assigned to C1 also showed a trend towards a lower mean FCS as compared to tumors from C2 (7.4 vs. 12.75). There was no difference in clinical stage between the two clusters.

**Conclusion/Implications** Based on a small series our data suggests that there are two distinct DNA methylation clusters of SCCOHT. Analyses of larger cohorts of SCCOHT are warranted to understand, if the clusters identified correlate with patient survival and/or response to (immuno-)therapy.

**EP360/#693**
PROGNOSTIC FACTORS FOR SURVIVAL IN PATIENTS WITH RARE PERITONEAL SURFACE MALIGNANCY: DIFFUSE MALIGNANT PERITONEAL MESOTHELIOMA- A SINGLE INSTITUTION EXPERIENCE

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**Introduction** Diffuse malignant peritoneal mesothelioma (DMPM) is a rare and aggressive cancer that originates in the peritoneum. Due to its poor prognosis, a better understanding of its clinical characteristics and prognostic factors is needed. This study aimed to investigate such factors and their association with survival in patients with DMPM.

**Methods** We conducted a retrospective analysis of patients diagnosed with DMPM at Ajou University Hospital from February 2000 to June 2022. Various clinical characteristics and potential risk factors that may influence survival were evaluated.

**Results** We identified a total of 22 patients (6 male, 16 female) with DMPM. The median age of the patients was 57.5 years (range 20–80). The overall median survival was 31.1 months (95% CI 15.8–46.4), with a 5-year survival rate of 25.3%. Of the patients, 2 received cytoreductive surgery and followed by adjuvant chemotherapy, 4 received cytoreductive surgery followed by hyperthermic intraperitoneal chemotherapy (CRS+HIPEC). Survival analysis revealed that cytoreductive surgery (p=0.014) and intraperitoneal