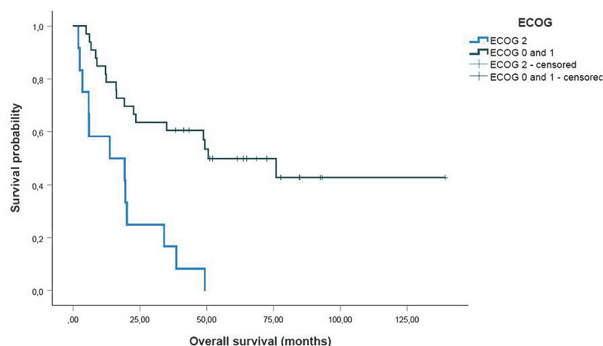
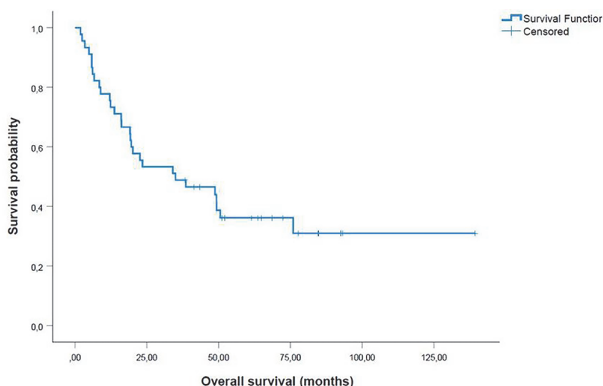


30–91). Forty-four patients were diagnosed with squamous cell carcinoma, one patient had adenocarcinoma. Equal number of cases belonged to stage II and III (40% each) of the FIGO 2021 classification. Fourteen patients (31.1%) had verified lymph node metastases. Fourteen patients also received cisplatin. Thirty-one patients (68.9%) received external beam radiotherapy only, the remaining received a combination of external beam and brachytherapy. Median total tumor dose (EQD2) was 70.1 Gy (range 58.9–80.6). Thirty-three patients presented with ECOG 0–1 at start of radiotherapy, the remaining 12 had ECOG 2. Twenty-one patients (46.7%) experienced recurrence of the cancer, of these 19 recurred in the vulvar region. Median time to progression was 6.0 months. Median overall survival for the whole cohort was 35.0 months (range 1.9–139.3). ECOG 0–1, concomitant cisplatin and use of brachytherapy was significantly associated with improved survival.



Abstract EP421/#895 Figure 1



Abstract EP421/#895 Figure 2

**Conclusion/Implications** Carefully selected patients with good performance status can experience long-term survival after chemoradiation for vulvar cancer. Quality of life should be monitored in future prospective studies.

EP422/#1018

### EXTRAMAMMARY PAGET'S DISEASE (EMPD) OF THE VULVA: OUTCOMES OF 22 PATIENTS TREATED WITH IMIQUIMOD CREAM

<sup>1</sup>Ramapadmavathi Devi Namuduri\*, <sup>2</sup>Yeo Ching, <sup>2</sup>Mark Aan. <sup>1</sup>KK women's and Children's Hospital, Department of Gynaecological Oncology, Singapore, Singapore; <sup>2</sup>KK women's and Children's Hospital, Department of Pathology, Singapore, Singapore

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**Introduction** Extramammary Paget's disease (EMPD) of the vulva is a rare form of intra epithelial adenocarcinoma, which is most common in postmenopausal women. The gold standard treatment for non-invasive EMPD vulva is wide local excision. Surgery is challenging in elderly women with multiple comorbidities. Imiquimod, a topical immune response modifier is a new treatment modality with encouraging results.

**Methods** Retrospective analysis Objective is to retrospectively investigate the efficacy of 5% imiquimod cream in patients with non-invasive vulvar Paget disease both primary and recurrent.

**Current Trial Status** Results IRB permission and individual consent for photo documentation was available for all patients. Data were available for 22 patients with complete clinical, histological and photo documentation. Thirteen patients (59%) were treated for primary EMPD, and 9 patients (44.4%) were treated for recurrent EMPD. A complete response was reported in 11 patients (50%), and 11 patients (50%) had a partial response. A histologic complete response was observed in 5 of the 11 patients with a complete response. Duration of use of imiquimod was 12 to 28 weeks. No systemic side effects noted in any patient. Local irritation was noted and documented in 6 patients. Lesion size was noted less than 8 cm in patients with complete clinical response. Extensive lesions extending to groin folds and perineum responded partially. conclusion Topical 5% imiquimod cream can be an effective and safe treatment alternative for small volume non-invasive vulvar EMPD.

EP423/#119

### PROGNOSTIC FACTORS AND CLINICAL OUTCOMES IN PATIENTS WITH VULVAR CANCER: A 15-YEAR RETROSPECTIVE STUDY

<sup>1</sup>Tharinee Rahong\*, <sup>1</sup>Vuthinun Achariyapota, <sup>2</sup>Panitta Sitthinamsuwan, <sup>2</sup>Suchanan Hanamornroongruang, <sup>1</sup>Khemanat Khemworapong. <sup>1</sup>Siriraj Hospital, Mahidol University, Obstetrics and Gynecology, Bangkok, Thailand; <sup>2</sup>Siriraj Hospital, Mahidol University, Pathology, Bangkok, Thailand

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**Introduction** The primary objective was to determine the prognostic factors affecting progression-free and overall survival. The secondary objective was to determine the progression-free survival (PFS) and overall survival (OS) in vulvar cancer patients.

**Methods** We retrospectively reviewed the medical records of vulvar cancer patients at Siriraj Hospital between 2006 and 2020. Patient characteristics, surgical outcomes, pathological characteristics, and immunohistochemical (IHC) results: p16,