

xCell based on RNA expression profiles of breast cancer from National Center for Biotechnology Information (NCBI) Gene Expression Omnibus (GEO). Kaplan-Meier analysis and LASSO-Cox PH regression model were used to assess the correlation of TILs and stromal cells infiltration with breast cancer distant relapse-free survival.

Results In this study, 123 HR positive/HER2 negative breast cancer patients derived from the dataset GSE25055 were eventually enrolled in the present study. LASSO-Cox PH regression analysis demonstrated that pre-NACT plasma cells and Th2 cells infiltration exhibited an independent prognostic value for DRFS (HR = 11.26, P = 0.036; HR = 15.13, P < 0.001; respectively). A risk scoring model based on the TILs was conducted to divide patients into different risk groups with significantly different DRFS rates (P=0.0028). Compared with low risk group, high-risk group was comparatively associated with worse DRFS rates (3-year DRFS rate, 72.3% vs. 93.2%, P=0.0028).

Conclusion/Implications These results suggested that pre-NACT immunological plasma cells and Th2 cells infiltration is an independent predictive factor of DRFS for the patients with HR positive/HER2 negative breast cancer, which provides valuable and profound perspective of immune microenvironment and NACT prognosis.

EP033/#639

BREAST DESMOID FIBROMATOSIS: ABOUT FIVE CASES AND REVIEW OF THE LITERATURE

¹Fathi Mraïhi*, ²Montacer Hafsi, ¹Jihene Basly, ¹Feriel Slama, ¹Amani Mezni, ¹Zeineb Ghali, ¹Maroua Hajri, ¹Mohamed Mahdi Gharbi, ¹Dalenda Chelli. ¹Tunis Manar University, Research Laboratory LR18SP05, D Departement, Maternal Center of Tunis, Tunis, Tunisia; ²Menzel Temim Hospital, Gynecology and Obstetrics, Nabeul, Tunisia

10.1136/ijgc-2023-IGCS.157

Introduction Desmoid fibromatosis is a rare, locally aggressive fibroblastic tumor. It can occur in various parts of the body, including the breast. In this study, we describe five cases of breast desmoid fibromatosis and review the relevant literature.

Methods We conducted a retrospective analysis of five cases of breast desmoid fibromatosis at our institution between 2010 and 2022. We collected data on patient demographics, clinical presentation, imaging findings, surgical management, and outcomes.

Results The study cohort included five women with a mean age of 34 years. All patients presented with a breast mass, which was initially misdiagnosed as a benign lesion in three cases. Magnetic resonance imaging (MRI) was the most useful imaging modality for diagnosis. All patients underwent surgical excision, with clear margins achieved in four cases. The mean follow-up period was 36 months, during which there were no local recurrences or distant metastases.

Conclusion/Implications Breast desmoid fibromatosis is a rare entity that can mimic benign breast lesions on imaging. MRI is the most reliable imaging modality for diagnosis. Surgical excision with clear margins is the treatment of choice, and long-term follow-up is necessary to monitor for local recurrences or distant metastases. Our study adds to the limited body of literature on breast desmoid fibromatosis and highlights the importance of considering this diagnosis in the differential diagnosis of breast masses.

EP034/#855

ASSOCIATION BETWEEN CANCER STIGMA AND DEPRESSION AMONG TUNISIAN PATIENTS FOLLOWING BREAST AND GYNECOLOGIC CANCERS

¹Sofiene Fendri, ¹Yosra Berrazaga, ¹Seif Haddaoui, ²Haifa Rachdi*, ²Myriam Saadi, ¹Nouha Daoud, ²Nesrine Mejri, ²Boussen Hammouda. ¹Abdraham Mami Hospital, Medical Oncology, Ariana, Tunisia; ²Aberrahmen Mami Hospital, Medical Oncology Department, Tunis, Tunisia

10.1136/ijgc-2023-IGCS.158

Introduction Cancer stigma can have a significant impact on cancer patient's mental health with risk of depression. Our study aimed to explore cancer stigma aspects among patients following breast and gynecologic cancers and to evaluate the association between cancer stigma and depression.

Methods Patients (n=61) treated for breast or gynecologic cancers were asked to answer a questionnaire adapted from the "Cancer stigma scale". The "Hospital Anxiety and Depression Scale" was used to measure depression.

Results Median age was 47.1 years. About 75% of patients had at least a high school educational level (EL). Around 78% of patients were urban and 32% reported low socioeconomic status. Breast cancer was the most common primary cancer (80%), followed by endometrial (10%) and ovarian (7%) cancers. About 29% of patients reported significant depressive symptoms. Fifty six percent of patients experienced at least one form of cancer stigma. Thirty nine percent of patients believed in the impossible total recovery after cancer experience and 46% held stereotypical views of themselves. About 33% reported social discrimination due to their cancers. Patients who experienced cancer stigma were 4.4 times more likely to have depression than patients with positive attitudes (p=0.001). Depression were more registered in young (under 55 years) (OR=2.24, p=0.029) and rural patients (OR=4.94, p=0.001) with lower EL (OR=5.6, p=0.001) and socioeconomic status (OR=3.5, p=0.001).

Conclusion/Implications Cancer patients who experienced cancer stigma are at increased risk of developing depression. Thus, it's important for healthcare providers to be aware of this relationship and provide an appropriate support.

EP035/#866

ADJUVANT TREATMENT FOR LUMINAL BREAST CANCER OF INTERMEDIATE PROGNOSIS

Donia Dhib, Nesrine Mejri, Yosra Berrazaga, Haifa Rachdi*, Myriam Saadi, Nouha Daoud, Boussen Hammouda. Abderrahmane Mami Hospital Ariana, Medical Oncology, Ariana, Tunisia

10.1136/ijgc-2023-IGCS.159

Introduction Our retrospective study analyzed the adjuvant treatment decision for localized intermediate risk breast cancer as well as the parameters leading to protocol de-escalation and It's impact on outcome.

Methods A retrospective study gathering 127 patients with localized (pT1–3pN1 or pT2–3pN0) luminal breast cancers; We analyzed the protocol decision and the parameters leading to de-escalation as well as the therapeutic results.

Results Median age was 52 years and 47% were pre-menopausal. One third of the tumors were pN0, mean tumor size (pT) was 28 mm, and grade III in 27.4% of cases. Most of

Abstract EP035/#866 Table 1 Clinico-pathological characteristic of the patients

	Sequentiel chemotherapy	TC chemotherapy
Age	50 years	60 years
Pre-menopausal Status	51%	30%
3 positive axillary nodes	17.6%	11.8%
Grade III	32%	5.9%
mean ki67	25%	10%

the tumors (66%) were of Luminal B and the mean ki67 was 26%. Adjuvant protocol was chemotherapy for 119 patients, sequential in 80.3% of cases and Docetaxel-Cyclophosphamide (TC) in 13.4% of cases. Twenty-four cases were reviewed by the medical committee, and a therapeutic de-escalation was decided for 12 patients among them, based on TC (6 patients) and hormone therapy for 6 patients. The patients characteristics are resumed in table 1. Concerning toxicity, we observed a higher rate of neutropenia (47.5% vs 11.8% $p=0.04$) and febrile neutropenia G3–4 (20.6% vs. 0% $p=0.02$) with sequential chemotherapy. With a median follow-up of 51 months, overall survival was 94% at 5 years. The choice of adjuvant treatment didn't significantly influence overall survival.

Conclusion/Implications De-escalation of adjuvant therapy in patients with intermediate risk localized breast cancer didn't impair overall survival.

EP036/#930

BELIEFS ABOUT BREAST AND GYNECOLOGIC CANCER CAUSATION: A TRIP INTO THE TUNISIAN CONTEXT

¹Sofiène Fendri, ²Yosra Berrazaga, ³Haifa Rachdi*, ³Myriam Saadi, ¹Nouha Daoud, ³Nesrine Mejri, ¹Boussen Hammouda. ¹Abdraham Mami Hospital, Medical Oncology, Ariana, Tunisia; ²Abderrahmane Mami Hospital Ariana, Medical Oncology, Ariana, Tunisia; ³Aberrahmen Mami Hospital, Medical Oncology Department, Tunis, Tunisia

10.1136/ijgc-2023-IGCS.160

Introduction Patients try to find an explanation to their disease in order to accept it. We aimed in our study to evaluate patients' beliefs about breast and gynecologic cancer causation and to assess its impacts on their mental healths.

Methods Patients (n=61) treated for breast or gynecologic cancers were asked to answer a questionnaire evaluating beliefs about cancer causation. The "Hospital Anxiety and Depression Scale" was used to measure depression.

Results Median age was 47.1 years [30–76]. Breast cancer was the most common primary cancer (80%), followed by endometrial (10%) and ovarian (7%) cancers. Two patients thought that the cancer was a contagious disease. Eighty seven percent of patients believed that god was testing their faith. However, two patients thought that the cancer was a divine punishment. Twenty nine percent of patients believed that they were the cause of their disease : stressful lifestyle in 16%, diet in 6%, lack of breastfeeding in 6% and tobacco in 1%. Beliefs of being the cause of the disease were associated with more depression symptoms (OR :3.7 [1.16–12.3]). Being practising muslim or not did not impact depression symptoms.

Conclusion/Implications Some beliefs could affect patients' mental health. Care providers should discuss with their patients, detect wrong belief and try to correct it.

AS03. Cervical cancer

EP040/#789

PREDICTIVE FACTORS OF COMPLETE HISTOLOGICAL RESPONSE IN PATIENTS MANAGED BY CHEMORADIOTHERAPY FOLLOWED BY RADICAL SURGERY FOR LOCALLY ADVANCED CERVICAL CANCER

Ines Zemni, Marwa Aloui*, Souha Jaouadi, Saida Sakhrî, Riadh Chargui, Tarek Ben Dhiab. Salah Azaiz Institute, Faculty of Medicine of Tunis, University of Tunis El Manar, Department of Surgical Oncology, Tunis, Tunisia

10.1136/ijgc-2023-IGCS.161

Introduction Exclusive chemoradiation represents the standard of treatment for locally advanced cervical cancer (LACC). Chemoradiation (CT/RT) followed by radical surgery (RS) may play a role for patients with a suboptimal response to CT/RT. This study aimed to identify predictive factors for complete histological response after CT/RT followed by RS.

Methods We conducted a retrospective study at the Salah Azaiez Institute of Oncology from January 1, 2010, to December 31, 2020, including 118 patients with locally advanced cervical cancer treated with curative intentions. They underwent CT/RT followed by RS. Histologic assessment was made on the surgical specimen.

Results Among 118 operated after CT/RT; 52 had Radical hysterectomy with pelvic lymph node dissection (RHPND), 1 patient underwent RHPND with paraaortic lymph node dissection, 4 patients underwent Radical hysterectomy, and 2 patients had hysterectomy with pelvic lymph node dissection. 59 patients (50.4%) presented complete responses on histological examination of the specimen. In our study, lymphovascular space involvement p (0.016) was identified as a predictive factor for complete histologic response after CT/RT. In contrast, tumor size p (0.794), parametrial involvement p (0.382), histologic grade p (0.959), FIGO stage p (0.520), type of CT p (0.150) and dose of RT p (0.990) were not factors affecting complete histologic response to CT/RT.

Conclusion/Implications Lymphovascular space involvement was identified as a prognostic factor for complete response on the surgical specimen in locally advanced cervical cancer managed by CT/RT followed by surgery.

EP041/#685

PREDICTIVE FACTORS OF PELVIC LYMPH NODES METASTASES IN LOCALLY ADVANCED CERVICAL CANCER

¹Marwa Aloui*, ¹Ines Zemni, ¹Houyem Mansouri, ²Nedia Boujelbene, ¹Mohamed Ali Ayadi, ¹Tarek Ben Dhiab. ¹Salah Azaiz Institute, Faculty of Medicine of Tunis, University of Tunis El Manar, Department of Surgical Oncology, Tunis, Tunisia; ²Salah Azaiz Institute, Faculty of Medicine of Tunis, University of Tunis El Manar, Department of Pathology, Tunis, Tunisia

10.1136/ijgc-2023-IGCS.162

Introduction Pelvic lymph-nodal involvement is a major prognostic factor in cervical cancer. Lymph-node status is classically assessed by lymph-node dissection. This surgical approach is mainly of prognostic interest. In this study, we aimed to identify the risk factors associated with pelvic lymph node metastases (PLNM) in locally advanced cervical cancer.

Methods We conducted a retrospective study at the Salah Azaiez Institute of Oncology from January 1, 2010, to December 31, 2020, including 118 patients with locally