overall MMR status when age 50 was used as a hypothetical testing threshold. After correcting for tumour grade as a confounding variable it was shown that MLH1 and MSH2 expression were negatively correlated with increasing age while MSH6 expression was positively correlated with increasing age at diagnosis (figures 1 and 2).

**Conclusion** There is no statistically significant difference in overall immunohistochemical MMR status when using the age of 50 as a threshold for tumour analysis. Such a threshold would have missed 82.3% of cases with tumoral MMR deficiency and should not be included in lab protocols for EEC IHC analysis. Reflex testing of all EEC cases is highly advised as IHC testing is no longer solely about diagnosis of Lynch syndrome. Prospective evidence is required to clarify the role IHC scoring and semi-quantitative analysis should play in MMR status interpretation and patient management especially in the ever-evolving field of targeted therapeutics.

**Disclosures** This study was self-financed. Authors declare they have no conflict of interest, financial or otherwise.

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**Abstracts**

**598**)

**RECURRANCE AND SURVIVAL AFTER LAPAROSCOPY VERSUS LAPAROTOMY IN EARLY STAGE ENDOMETRIAL CANCER: FOLLOW-UP FIVE YEARS AFTER A RANDOMISED TRIAL**

1Bianca Reijntjes, 1Geertnudia H De Bock, 2Mieke Van Suijlichem, 3Arjan A Kaaftjenbrink, 3Lasse Paulsen, 4Nathalie Reesink-Peters, 5Jorien Woolderink, 6Marlies Bongers, 3Lasse Paulsen, 7Nathalie Reesink-Peters, 8Jorien Woolderink, 9Marlies Bongers, 3Mirjam Appelooh, 10Marjan IE Maaturs. 1University Medical Center Groningen; University of Groningen; Gynaecologic Oncology; 2Rijnstate Ziekenhuis; Gynaecology; 3Wilhelmina Hospital Assen; Gynaecology; 4Medical Spectrum Twente Enschede; Gynaecology; 5Martini Hospital Groningen; Gynaecology; 6Maxima Medical Centre Veldhoven; Gynaecology; 7Medical Centre Leeuwarden; Gynaecology

**Conclusion** This is the first study reporting on survival among women with early-stage endometrial cancer randomised to TLH or TAH, without routine lymphadenectomy. No significant differences were found in disease-free, overall and disease-specific survival five-years postoperatively. This supports the widespread use of laparoscopic hysterectomy as primary treatment procedure for early-stage, low-grade endometrial cancer.

**Disclosures** None.

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**613**)

**PREDICTING LYMPHEDEMA ASSOCIATED WITH LYMPH NODE DISSECTION IN PATIENTS WHO UNDERGO SURGERY FOR ENDOMETRIAL CANCER: ROLE OF DEMOGRAPHIC AND CLINICAL CHARACTERISTICS**

1Nazila Shokri, 2Afteh Moridi, 3Yekta Parsa, 5Shahin Rezaee, 1Maryamsadat Hosseini, 3Farah Farzaneh, 1Masoumeh Raoufi, 3Shahid Beheshi University of Medical Sciences; Obstetrics And Gynecology; 2Imam Khomeini Hospital Urooncology Research Center; 3Preventative Gynecology Research Center, Obandyn Dep; Shahid Beheshi University of Medical Sciences

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