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P30-8  Sarcomatoid changes of pulmonary squamous cell carcinoma to pulmonary spindle cell carcinoma

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Pulmonary spindle cell carcinoma (PSCC) is a very rare subtype of pulmonary sarcomatoid carcinoma (PSC), which consists of spindle cells only. We report a PSCC case in an 80-year-old man with systemic multiple metastases; however, the pathological images showed a sarcomatoid pattern.

The patient was diagnosed with pulmonary squamous cell carcinoma (SCC) 11 years ago and underwent chemoradiation therapy (CDPP + VNR + RT). Moreover, he had prostate cancer 4 years ago and underwent endocrine radiation therapy (BCL + Leuprolin + IMRT). No recurrence of both carcinomas has ever been observed. He was referred to our hospital due to back pain and an MRI revealed a malignant tumor in the back. A rise of tumor marker level was seen, and PET-CT scan showed systemic accumulation of FDG, including humerus, femur, and liver, but not in the lungs. We performed a biopsy of the tumor below the iliopsoas muscle. Histopathology showed that the tumor consisted of spindle cells, and the tumor cells were suggested to be separated into smooth muscle cells. The patient was diagnosed with leiomyosarcoma, and he underwent treatment with Pazopanib. However, he died 2 months after the hospitalization.

An autopsy revealed SCC with a spread of 5 cm and 9 mm adenocarcinoma in the lung. The sarcomatoid tumor consisted of spindle cells only. Immunostaining was positive for vimentin while it was weakly positive for AE1/AE3, CAM5.2, and EMA. We diagnosed systemic metastases of PSCC that originated from SCC.

PSC has a poor prognosis and has advanced at the time of the diagnosis. It is often diagnosed by autopsy. Genetic testing is useful to diagnose PSCC, but in a city hospital, genetic diagnosis is not always possible. It is necessary to check detailed medical history, perform a thorough physical examination, and differentiate and diagnose PSCC from other diseases based on the clinical course and pathological features, including immunostaining.

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P30-9  A case of thymic adenocarcinoma that responded to lenvatinib therapy

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A 63-year-old woman complained of dyspea lasting for 5 months and was referred to our hospital. Physical examinations revealed wheezing, bone pain in the pelvis, and subcutaneous weight loss. Tumor markers, CA125 andNSE, were found to be slightly elevated, but others remained unaffected. Computed tomography (CT) findings of the chest and abdomen revealed an invading anterior mediastinal mass with stenosis of the trachea, multiple liver mass, and osteolysis of the pelvis. Histological examination showed that the tumor consisted of spindle cells, and the tumor cells were weakly positive for vimentin, while it was positive for AE1/AE3, CAM5.2, and EMA. We diagnosed systemic metastases of PSCC from other diseases based on the clinical course and pathological features, including immunostaining.

Histopathology showed that the tumor consisted of spindle cells, and the tumor cells were suggested to be separated into smooth muscle cells. The patient was diagnosed with leiomyosarcoma, and he underwent treatment with Pazopanib. However, he died 2 months after the hospitalization.

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P31-1  Psychosocial aspects in relation to ovarian cancer patients after COVID pandemic in South India - observational study

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The prolonged global threat and lockdown imposed by COVID-19 pandemic has created immense stress among ovarian cancer who had already been detected in advanced stages. Here majority of patients were from distant places and below poverty line. We conducted a questionnaire based study to assess the impact in this situation affecting their quality of life and their perspective to current situation.

Ovarian cancer patients with locally advanced disease and recurrence registered in the month of January to June 2020 were collected from medical records were tracked during July month 2021 after 1 year. Majority of patients had visited the hospital intermittently and few had defaulted. They were clinically radiologically assessed and interrogated with treatment related perspectives with a questionnaire. Psychological status were analysed with GAD-7 (Generalised anxiety disorder questionnaire), PHQ-9 (patient health questionnaire).

Results: Among 102 ovarian cancer patients 39.3% were in city, 24.5% from suburban 36.2% were from adjacent rural areas. Only 56% were educated. 87% wanted to continue treatment while remaining patients were concerned of COVID. 43 patients were started on neoadjuvant chemotherapy, 59 patients were on chemotherapy for recurrence either first line or subsequent line. 26 patients were on neoadjuvant chemotherapy had progressive disease and switched to next line. 40/17 patients, had completed chemotherapy and had undergone surgery. 23 of 59 patients with recurrent ovarian cancer either had progressive metastases. 4 patients had died due to disease progression. 24 patients had acquired COVID infection of which one died. 51%, 42%, 7% had mild, moderate and severe anxiety. 69%, 25%, 6% had mild, moderate and severe depression. The severe anxiety and depression correlated with those on neoadjuvant chemotherapy and educated patients.

This study reflects that attitude and psychological impact of ovarian cancer patients during the pandemic.

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P31-4  Differentiated omental-derived adipose stem cells-conditioned medium promotes ovarian cancer migration and angiogenesis

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Background: Ovarian cancer (OC) is one of the commonly occurring cancers in women. It is usually diagnosed at advanced stage (FIGO stage III/IV) when cancer cells have spread along the peritoneal surface. The omentum is an apron of adipose tissue in the abdominal cavity. To understand the role of omental adipose cells on OC cell migration, we hypothesized that adipocytes differentiated from omental-derived adipose stem cells (O-ASC) can promote cell migration and metastasis. However, co-culture of cells (from HGS or endometriosis patients) with O-ASC CM signi

Results: O-ASC CM significantly promoted in vitro migration of cells from OC and angiogenesis. The effect of O-ASC CM on the metastatic and angiogenic potential of malignant cells from OC patients was assessed through transwell migration assays and tube formation assays. Cell proliferation was evaluated with co-culture of OC cells with differentiated O-ASC, or incubation of OC cells with O-ASC CM, followed by MTT assays. Patient-derived cells from endometriosis lesions were used as a comparator.

Results: O-ASC CM significantly promoted in vitro migration of cells from OC and endometriosis patients, as compared with control media. Differentiated O-ASC from OC patients with various histological subtypes [high-grade serous (HGS), clear cell, mucinous and endometrioid] secreted soluble factors capable of enhancing angiogenesis. However, co-culture of cells (from HGS or endometriosis patients) with differentiated O-ASC, did not enhance their proliferative capacity. Similar results were obtained when cells from HGS or endometriosis patients were incubated with O-ASC CM.

Conclusion: This study has shown that the omentum provides a hospitable environment for the development of OC metastasis by promoting cell migration and angiogenesis. It is interesting to observe that cells from endometriosis patients (considered benign) behave similarly to cells from OC patients in the migration and cell proliferation assays.

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