

**964P Preoperative c-reactive protein and thrombocyte count as potential markers for longterm survival in ovarian cancer**

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**Background:** Aim of this study was to evaluate the predictive role for C-reactive protein (CRP) and thrombocyte count as surrogate markers for the interleukin-6 pathway for longterm survival with ovarian cancer.

**Methods:** Patients and methods: Within the tumorbank ovarian cancer (TOC) preoperative CRP values and thrombocyte counts were collected for longterm survivors (survival of  $\geq 8$  years after initial diagnosis) from seven gynecologic-oncology centers as well as classical ovarian cancer patients diagnosed in the same timeframe (survival < 5 years after initial diagnosis). Receiver operating characteristics (ROC) curves and logistic regression analyses were conducted to evaluate differences between cohorts.

**Results:** In this study 336 longterm survivors (LTS) and 172 control patients could be included. There was no difference in preoperative thrombocyte count with a median of 326/nl in LTS (n = 136) vs. 325/nl in control patients (n = 151), p = 0.59. Regarding preoperative CRP values at initial diagnosis there was a significant difference in both univariate and multivariate analyses: Median CRP was 9.2 mg/l in LTS (n = 56) compared to 18.4 mg/l in control patients (n = 85), p = 0.002. ROC-curves showed an area under the curve of 0.66 (95% CI 0.56-0.75), p = 0.002. After adjusting for age, FIGO stage, grading and histology there was still a significant difference between the two cohorts (p = 0.002). Patients with CRP < 1.3 mg/l had a 15-fold higher chance to survive longer than eight years compared to patients with a CRP > 40 mg/l at initial diagnosis (p = 0.001, 95% CI 3.3-70.5).

**Conclusions:** Preoperative C-reactive protein was significantly lower in longterm survivors compared to classical ovarian cancer patients indicating the potential role of CRP as prognostic marker for longterm survival. Further studies are highly warranted in order to gain more insight in this unique and sparsely known patient cohort.

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