Purpose or Objective: To evaluate post-operative treatment results in the post-operative treatment of Clear-cell endometrial carcinoma (CCEC) related to overall survival (OS), local control and distant relapses from 2005 to 2014

Material and Methods: Twenty patients (pts) with CCEC were treated at our centre with post-operative radiotherapy. All patients were staged after surgery using the 2009-FIGO classification: 6-IA, 4-IB, 2-II, 1-IIA, 4-IIIC1, 2-IIIC2, 1-IVA. Pathology. Grade (G): G1 in 2pts, G2- in 3pts, G-3 in 9 pts.
Myometrial invasion was observed in 36% of pts. Mean tumour size was 3.4cm in Group 1 and 3.5cm in Group 2. Vascular and lymphatic space invasion was presented in 5 pts (23.8%) in Group 1 and in 6 pts (46.2%) in Group 2.
Radiotherapy: all pts received high-dose-rate brachytherapy (1-3 fractions of 4.7 Gy) and 17/21pts in Group 1 and 12/13pts in Group 2 received external beam irradiation (mean dose of 45.2 Gy in Group 1 and 44.6 Gy in Group 2, after 3D planning and 4-field technique tailored to surgical results).
Chemotherapy: 4-6 cycles of carboplatin + paclitaxel in 8/21 pts in Group 1 and 6/13 pts in Group 2.

Results: The mean age: 67 years (51-79). Mean follow-up: 4.34 years (range, 0.96-9.75 years). Relapses: No pts developed vaginal relapse; 6/20 pts (33%) presented loco-regional relapse, 4/20 (20%) pts had distant metastasis (two with pelvic relapse 2/20 (10%); all 6 pts with relapse died (33%). The mean OS of 33.6 months (range 16.3-74.4 months).

Conclusion: At the time of the last control 70% of patients (14/20) were alive and without relapse. The main cause of relapse was loco-regional followed by distant metastases, with no patients showing vaginal relapse. The results of this study seem to be similar to those reported in the literature.

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Effects of upfront radiotherapy on isolated para-aortic lymph node metastasis in cervical cancer J.H. Kim1, K.Y. Eom2, I.A. Kim2, H.G. Wu1, H.J. Kim1
1Seoul National University Hospital, Department of Radiation Oncology, Seoul, Korea Republic of
2Seoul National University Bundang Hospital, Department of Radiation Oncology, Bundang, Korea Republic of

Purpose or Objective: To evaluate the clinical features and treatment outcomes of isolated para-aortic lymph node (PALN) recurrence in cervical cancer patients, and analyze prognostic factors for overall survival

Material and Methods: Between 1992 and 2014, 1302 cervical cancer patients received radiotherapy at two institutions, Seoul National University Hospital and Seoul National University Bundang Hospital. Of these, 29 had isolated PALN recurrence. The median age at recurrence was 62 years (range, 34-81 years). Twenty-seven of 29 patients received salvage treatment: 16 received sequential or concurrent chemoradiotherapy, 6 radiotherapy to the para-aortic region, 4 chemotherapy alone, and 1 chemotherapy followed by salvage operation.

Results: The median follow-up duration after salvage treatment was 17.4 months (range, 1.1-139.2 months). Treatment failure after salvage treatment occurred in 10 of 27 patients. The 5-year progression-free and overall survival rates of all patients were 25.1% and 30.5%, respectively. Disease-free interval >24 months and upfront radiotherapy (or chemoradiotherapy) were good prognostic factors for