patients (55.8%) had presented anemia of grade 1–2 and 18 patients (34.6%) had experienced anemia of grade 3–4, which seemed higher than the previous reports. Five patients received blood transfusions. As for non-hematological toxicity, nausea (25 patients, 48.1%), fatigue (20 patients, 38.4%) and blood creatinine increased (27 patients, 51.9%) were observed frequently (any grade). The incidence of blood creatinine increased also seemed higher than the previous studies. One patient discontinued olaparib due to prolonged renal dysfunction. In total, 22 patients (42.3%) required dose interruption, and 11 patients (21.2%) required dose reduction. No patient had suffered from acute myeloid leukemia or myelodysplastic syndromes.

Conclusion: Olaparib maintenance monotherapy was tolerable also for Japanese population, although the toxicity profile might be a bit different from the previous reports (SOLO2, Study 19).

Poster (O22)

Epithelial Ovarian Cancer including Borderline Tumor
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TP53 sequence analysis revealed distinct characteristics of p53 signatures in RRSO samples

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Objective: Risk-reducing salpingo-oophorectomy (RRSO) is recommended for women with *BRCA1/2* pathogenic variants upon completion of childbearing. Precursor lesions could be identified in the fallopian tubes of RRSO samples. Serous tubal intraepithelial carcinoma (STIC) is considered a precursor of high-grade serous carcinoma (HGSC), however, the significance of the p53 signature remains unclear. In this study, we analyzed the potency of the p53 signature as a precancerous lesion.

Methods: We analyzed the clinicopathological findings and conducted DNA sequencing for TP53 variants of p53 signatures isolated using laser capture microdissection in 13 patients with *BRCA1/2* pathogenic variants who underwent RRSO and 17 control patients with the benign gynecologic disease.

Results: p53 signatures were most frequently observed in fimbriae of fallopian tubes from RRSO samples. Between the RRSO group and the control group, there was no significant difference in the percentage of p53 signatures in fimbriae ($p=0.17$), whereas the percentage of pathogenic variants in TP53 variants identified in p53 signature lesions were significantly higher in the RRSO group than the control ($p<0.001$).

Conclusion: The characteristics of the p53 signature may be

different between specimens obtained during RRSO and those from controls. The sequence analysis for TP53 revealed distinct characteristics of p53 signatures as precancerous lesions.

Poster (O23)

Non-epithelial Ovarian Cancer
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Tumor recurrence and fertility in young women with malignant ovarian germ cell tumors who received fertility-sparing surgery

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Objective: We evaluated the tumor recurrence and fertility outcomes in young women with malignant ovarian germ cell tumors (MOGCTs) who received fertility-sparing surgery (FSS).

Methods: We reviewed the medical records of women aged ≤ 40 years with MOGCTs who received FSS between July 2002 and December 2018, retrospectively. FSS was defined as the preservation of the uterus and at least one adnexa.

Results: Forty-four women were included in the study. The median age of the patients was 22 years (range, 7–39 years). Twenty-nine patients (65.9%) received postoperative chemotherapy with bleomycin, etoposide, and cisplatin. During a median follow-up period of 62 months (range, 7–185), 4 patients (9.1%) had a recurrence. Of these, 2 patients with dysgerminoma had recurrences at para-aortic lymph nodes and 2 patients with immature teratomas had recurrences at the remaining ovary. Of a total of 44 patients, 37 (88.1%) had regular menstruations. Of 14 women desiring a pregnancy, 12 achieved the term delivery of 12 singleton pregnancies. The pregnancy and live birth rates were 85.7% and 100%, respectively.

Conclusion: FSS with or without adjuvant chemotherapy is an appropriate option for young women with MOGCTs who wish to preserve their fertility.

Poster (O24)

Non-Epithelial Ovarian Cancer
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Giant ovarian fibrosarcoma-a rare case report

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Objective: Ovarian fibrosarcoma is very rare malignant neoplasm, accounts for less than 1% of all ovarian