#983 **KELIM DURING NEOADJUVANT CHEMOTHERAPY AS PREDICTOR OF INTERVAL DEBULKING SURGERY AND TREATMENT RESPONSE IN ADVANCED OVARIAN CANCER**

[1]Zara Vidales Sepulveda*, [1,2]Juan A Marín-Jimenez, [1]Irene Ortiz, [3]Sergi Fernández, [3]Carlos Ortega, [3]Carlos Torrejon, [1,2]Jose Maria Piulats, [3]Lola Martí, [1]Marta Gil-Martin, [1]Beatriz Pardo. *[1]ICO (Catalan Institute of Oncology) – L'Hospitalet. Oncology department, L'Hospitalet De Llobregat (barcelona), Spain; [2]Cancer Immunotherapy Group (CIT), Bellvitge Biomedical Research Institute (IDIBELL), L'Hospitalet De Llobregat (barcelona), Spain; [3]Bellvitge University Hospital. Gynecology Department, L'Hospitalet De Llobregat (barcelona), Spain*

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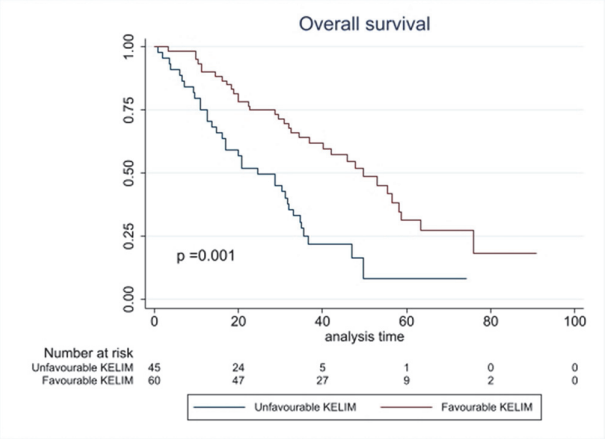
Introduction/Background Modeled CA-125 ELIMination rate constant K (KELIM) during neoadjuvant chemotherapy (NACT) predicts survival of advanced ovarian cancer (AOC) patients. The objective of this study is to validate KELIM score in a real-world data cohort of AOC and evaluate its impact on IDS performance, treatment response and survival.

Methodology Single-centre retrospective study including FIGO III-IV ovarian carcinoma patients treated with NACT between 2015–2020. KELIM score was calculated using Neo-Ca125 validated calculator in Biomarker KineticsTM website. Patients were classified by KELIM score into favourable ($\geq$1) or unfavourable (<1) prognosis; variables were compared between groups using Student-t-test for continuous and $\chi 2$ for categorical variables. Progression free survival (PFS) and overall survival (OS) were calculated using Kaplan-Meier method and compared by log-rank test. An ordinal logistic regression was performed to identify predictors of CRS.



Abstract #983 Figure 1

Results 105 patients were included, 40 in unfavourable and 60 in favourable group. No differences between KELIM groups were observed by age (p=0.08), PS (p=0.25), histologic subtype (p=0.07), FIGO (p=0.78), BRCA status (p=0.80) and maintenance therapy (p=0.80). The majority received CBDCA-paclitaxel (87%, p=0.25). Favourable KELIM was associated with radiological response to NACT (p=0.004), less cycles of NACT (4 vs 4.5, p=0.04), less time to surgery (15.6 vs 17 weeks, p=0.03), IDS performance (p<0.001), complete resection (R0, p=0.046) and better CRS (p=0.02). With a median follow-up of 31 [13–42] months (m), favourable KELIM predicted better OS (49.6 vs 24.6 m, HR 0.38 [CI95% 0.15–0.97], p=0.001) and a trend for better PFS (13.3 vs 11.3m, HR 0.84 [CI95% 0.37–1.93, p 0.07]) was observed.

Conclusion Neoadjuvant KELIM was associated with radiological response, IDS performance feasibility, better CRS to NACT and was an independent prognostic factor of OS in this cohort. KELIM score may be a valuable clinical tool to guide NACT in AOC.

Disclosures No disclosures