

1920–29 112 35(31.2%); 1930–39 685; 344(50.2%); 1940–49 86 40(46,5%); 1950–59 88 82(93,1%); 1060–69 65 58 (87.6%); 1070–79 50 46(92.0%); 1980–89 56 47(83.9%); 1990–99 31 24(77,4%); 2000–05 41 39(95.1%); Total 1214 714(86.6%).

Conclusion(s) 1 - HPV DNA was found in 58.8% of all cases, with low rates of detection in material diagnosed in the first 3 decades (1920–1940). 2 - The lower rate of HPV detection was related with poor quality of DNA, probably due to the fixative used. 3 - The most common viruses in invasive cervical carcinomas from Portuguese women were HPV 16, 18, 33, 45, 31, 35, 52, 4 - Patient's mean age at diagnosis of invasive carcinoma was slightly lower in the beginning of the 20th century compared to last decades.

P3.60

Identification of NLRP7 mutation in a Tunisian family with recurrent hydatidiform mole

Landolsi H.; Rittore C.; Gribaa M.; Yacoubi M.; Touitou I. Laboratoire d'anatomie et de cytologie pathologiques, CHU Farhat Hached, Sousse, Tunisie

Background Familial recurrent hydatidiform moles (FRHM) are a rare recessive condition in which molar tissues have biparental contribution to their genome. One maternal locus responsible for this condition has been mapped to 19q13.4 and the causative gene, NLRP7, identified. Several affected families have been described. Our objective was to look for the presence of NLRP7 mutation in a Tunisian family with RHM in two sisters.

Methods Molecular analyses were conducted on genomic DNA extracted from the peripheral white blood cells of the two patients, their two sisters (with no RHM), and the parents. All exons of the NLRP7 gene were sequenced in both directions for the two patients. A high resolution melting (HRM) analysis was also performed for quick screening and confirming mutation in the two patients, their sisters and the parents.

Results Sequencing and HRM curves demonstrated an homozygous stop codon, p.E570X (c.1708G>T), mutation in exon 4 in the two sisters with RHM and a third sister who presented with non-molar abortion. The fourth asymptomatic sister and the parents were heterozygous for this mutation.

Conclusion(s) These findings confirm and extend previous studies on NLRP7 mutations, as a cause of recurrent reproductive wastage. This mutation was recently reported for the first time in an Asian patient with 3 complete hydatidiform moles. Here we show that p.E570X is involved in gestational pathology other than RHM. Moreover, this is the first case of FRHM reported in Tunisia and the second case with North-African origin.

P3.61

Ovarian serous tumor with mural nodule of sarcomatoid carcinoma and reactive changes

Basheska Trajce N.; Veljanoska S.; Zografski G.

Department of Histopathology and Clinical Cytology, University Clinic of Radiotherapy and Oncology, Medical Faculty, Skopje, the Former Yugoslav Republic of Macedonia

Background Serous ovarian tumors with mural nodules are very infrequent, with only a dozen of cases described, including four cases of sarcomatoid carcinoma. We report a first case of a mural nodule with features of both sarcomatoid carcinoma and prominent sarcoma-like reactive changes associated with ovarian serous cystic tumor.

Methods A 52-year-old woman underwent left salpingo-oophorectomy and partial omentectomy because of a cyst. Forty-five months previously a total abdominal hysterectomy with right salpingo-oophorectomy and left ovarian resection had been performed. Postoperatively the patient received full-dose chemotherapy and is clinically free of disease at 76 months' follow-up.

Results Within the wall of the largest locule of the left ovarian multilocular cyst, 12.5 cm in diameter that had ruptured at operation, there was a 4x4x1.5 cm nodule. The smaller locules were lined with benign serous epithelium, while the largest locule had morphology of a serous borderline tumor with small foci of superficial invasion. The mural nodule was composed of carcinomatous nests intermingled with pleomorphic mononuclear cells, multinucleated giant cells, histiocytes and other inflammatory cells. The luminal epithelium and underlying pleomorphic cells were diffusely positive for cytokeratin and epithelial membrane antigen, and focally positive for vimentin. Benign spindle cells and multinucleated giant cells were vimentin positive. The ovarian capsule was not invaded.

Conclusion(s) This study confirms the usefulness of immunohistochemistry in distinguishing variant forms of mural nodules in cystic ovarian tumors. It further suggests that malignant nodules in serous tumors do not necessarily carry a poor prognosis.

P3.62

P57KIP2 immunohistochemical expression: a useful diagnostic tool in discrimination of complete hydatidiform mole from its mimics

Sarmadi S.; Izadi-Mood N.; Abbasi A.; Tavangar S.

Mirza Koochak Khan Hospital, Tehran University of Medical Sciences, Tehran, Islamic Republic of Iran