



ESULTS

BACKGROUND

BC is the most common malignancy and the leading cause of cancer-related death in women. PABC is defined as BC that is diagnosed during pregnancy or within one year of delivery (≈ 1 of 3000 pregnancies). PABC often presents in a more advanced stage, with axillary lymph node involvement and larger tumor size. It is associated with more aggressive characteristics: less differentiated, lymphovascular invasion, hormone receptors negative and up to 30% with HER2 overexpression.

This work intended to evaluate the characteristics and prognosis of PABC versus non-PABC in a young female cohort of our institution.

METHODS

Retrospective analysis of our institution's female population with invasive BC diagnosed from 2014 to 2020, with 40 years or less at the time of diagnosis. Data was collected from patients' electronic clinical process and, for statistical analysis, qui-square test was used to compare categorical variables, Kaplan Meyer for survival analysis and log rank-test to compare survival differences. A difference was considered significant if *p*<0,05.

CONCLUSIONS

Our data confirms the good prognosis associated to BC at younger ages and the association mentioned in literature of more aggressive tumour subtypes and higher rates of axillary lymph node metastases with PABC. Although not statistically significant, a trend to worse DFS and OS was observed in the PABC group. The retrospective study design limits the interpretation of this data. A longer follow-up time and a larger sample size are needed to support these findings.

223P - PREGNANCY-ASSOCIATED BREAST CANCER: A SINGLE CENTRE EXPERIENCE

Isa Peixoto^{(1)*}, Ana Sofia Mendes⁽¹⁾, Raquel Romão⁽¹⁾, Maria João Ramos⁽¹⁾, Ridhi Ranchor⁽¹⁾, Fernando Gonçalves⁽¹⁾, Joana Simões⁽¹⁾, Joana Raposo Alves⁽¹⁾, José Polónia⁽¹⁾, Glória Ferreira⁽¹⁾, Noémia Afonso⁽¹⁾, António Araújo⁽¹⁾

(1) Centro Hospitalar Universitário do Porto *No conflicts of interest to declare; isa.peixoto13@gmail.com

Fifty-nine patients were identified: 12 (20,3%) with PABC and 47 (79,7%) with non-PABC (4 synchronous BC in the latter group). The majority had stage II disease (Graph 1).

Global

population

37

24-40

9 (15,3)

47 (79,7)

38 (60,3)

25 (39,7)

38 (60,3)

20,51

4.57-80.93

PABC

33,5

26-40

3(27,3)

8 (72,7)

11 (91,7)

1 (8,3)

8 (66,7)

22,88

4.57-64.20

Non-PABC

38

24-40

6 (13,3)

39 (86,7)

27 (52,9)

24 (47,1)

30 (58,8)

19,56

4,57-80,93

p value

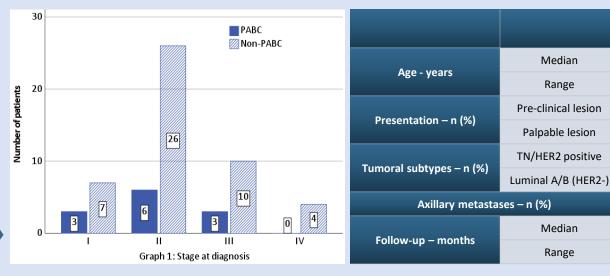
0,021

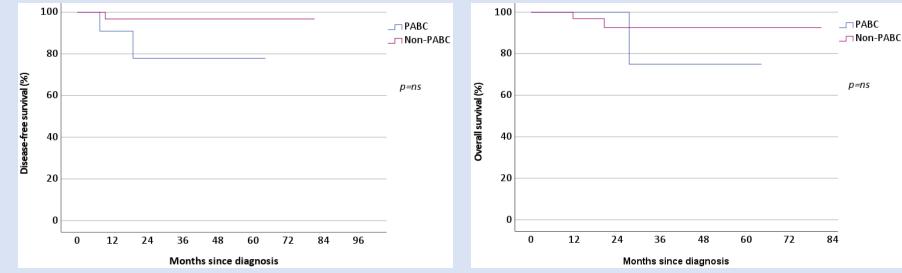
ns

0,014

ns

ns





BC: breast cancer; PABC: pregnancy-associated breast cancer; non-PABC: non-pregnacy-associated breast cancer; HER2: human epidermal growth factor receptor 2; TN: triple negative;

HER2-: HER2 negative; ns: not significant; DFS: disease-free survival; OS: overall survival