Template (MUPIT) image based ISBT. A descriptive analysis was done for doses received by HRCTV, bladder, rectum and sigmoid colon. At the end of treatment, early response at 3 months along with overall survival (OS) and disease free survival (DFS) was also calculated.
Results: All the patients recruited were locally advanced with 3 patients in IIB, 1 patient in IIIA and 3 patients belonging to IIIB. The mean dose received by 95% high risk CTV (HRCTV) by IMRT was 49.75 Gy. Out of 7 patients, 3 were taken up for ISBT due to anatomical restriction whereas remaining 4 patients were included because of lack of dose coverage by ICBT. The mean doses received by 90% of HRCTV, 2 cc bladder, 2 cc rectum and 2 cc sigmoid colon were 20.58 Gy, 2.73 Gy, 3.19 Gy and 2.82 Gy respectively. The early response at 3 months was 57.14%. The DFS at one year and OS at 3 year were 53.6% and 53.3% respectively.
Conclusions: Our descriptive analysis of seven patients being treated by image based ISBT have revealed that locally advanced cervical cancer patients for whom ICBT is unsuitable can achieve equitable LRC and OS with a combination of EBRT by IMRT and image based HDR-ISBT.

Cervix: Poster Abstract

Breaking the myth: All carcinoma cervix presenting as pyometra will have only palliative treatment

C. Aarthi, A. C. Senthil Kumar, P. Sasireka[1]

Departments of Surgery and [1]Obstetrics and Gynecology, Saveetha Medical College, Chennai, Tamil Nadu, India

Introduction: Carcinoma cervix is the second most common female carcinoma. Every year in India, 1,22,844 women are diagnosed with carcinoma cervix and of them 67,477 die. Carcinoma cervix rates among women in the age group between 30-64 has decreased by 1.8% per year on average but still date account for 16%. Of these, advanced carcinoma are about 80% and early are only 20%.
Case Series: We are reporting 5 consecutive early carcinoma cervix cases who presented with pyometra and got treated at our hospital from April 2015-September 2015. Cases of early carcinoma cervix presented with pyometra were treated by pyometra drainage, intravenous antibiotics and appropriate treatment in the form of surgery (4 cases underwent Wertheim's hysterectomy and 1 case had radical chemo radiation as she opted for same in view of high cardiac risk for anaesthesia). All 5 of them are disease free at the end of treatment with follow up of minimum 4 months duration (range 4-10).
Conclusion: The idea is to emphasize that all carcinoma cervix with pyometra are not necessarily advanced and can still be given radical treatment like surgery or radiotherapy after pyometra drainage.

Cervix: Poster Abstract

Comparative dosimetric study between point and volume based brachytherapy in definitive treatment of de novo carcinoma cervix

Rahat Hadi, Mohammad Azam, Pooja Gupta, Satyajeet Rath, Mohammad Ali, Chandra Prakash, Anoop Kumar Srivastava, S. Farzana

Department of Radiation Oncology, Dr. Ram Manohar Lohia Institute of Medical Sciences, Lucknow, Uttar Pradesh, India

Introduction: Cervical cancer has a high incidence in developing countries including India. Brachytherapy (BT) is an important component in the curative management of carcinoma of the cervix, and significantly improves survival. In gynaecologic BT, correlation between the radiation dose and the normal tissue effects have been assessed using point doses. Since 1985, these points have been defined in the international commission of radiation units and measurements (ICRU-38) report. However GEC-ESTRO recommended volume based treatment planning in their respective series (I-IV). For cervical cancer BT, the correlation of ICRU point doses and volume based treatment planning is investigational till date. Analysis becomes feasible when cross sectional image-based treatment planning for BT using computerized tomography (CT) or magnetic resonance imaging (MRI) is utilised as per GEC-ESTRO recommendation.
Methods: It is a retrospective pilot study includes patients (pts.) of carcinoma cervix treated with high dose rate (HDR) BT 9 Gy in 2 fractions 1 week apart. All volume based dosimeteric parameters regarding high risk clinical target volume (HRCTV), intermediate risk clinical target volume (IRCTV) like D90, D100 and for organ at risk (OAR) D 0.1 cc, D 1.0 cc and D 2.0 cc were delineated and dose coverage was analysed in point dose based planning.
Results: We have analysed twenty pts. of squamous cell carcinoma (SCC) cervix. The median age was 52 yrs. (41-65 yrs), stage II B 10 pts. & III B 10 pts. The mean value of D90 & D100 in HRCTV during I and II session were 8.64, 6.75 and 5.76, 4.36 Gy respectively. Same values for IRCTV were 6.31, 4.91 and 3.68, 3.15 Gy respectively. Analysis of OARs demonstrated that mean dose received by 0.1, volume of bladder during I and II session received 10.68, 9.47, by 1 cc volume 8.39, 7.57 and by 2 cc volume 6.84, 6.21 Gy respectively. The mean dose received by 0.1 cc of rectum were 11.59, 10.12, by 1 cc volume 9.53, 8.19 and by 2 cc volume 7.76, 6.81 Gy respectively. In point based analysis mean dose delivered to bladder point during I and II session were 5.63, 6.02 and to rectum point were 5.98, 5.46 Gy respectively. Doses to 0.1 cc volume of bladder and rectum were higher in volume based BT as compared to point based BT in respective fractions.
Conclusion: Both HRCTV and IRCTV had better dose coverage in 1st fraction as compared to 2nd fraction. Point doses to bladder and rectum is underestimated in point based (ICRU-38) BT. We need more number of pts in prospective randomized trial for more consistent result.

Cervix: Poster Abstract

Primary clear cell adenocarcinoma of cervix in a young women: A rare entity

Nidhi Jain, Rahul Manchanda, Anshika Lekhi, Sravani Chithra, Hena Kausar

Department of Gynaecology, Manchanda Endoscopic Hospital, New Delhi

Cervical cancer is the most common gynaecological malignancy worldwide. The most common type of cervical carcinoma is squamous cell carcinoma followed by adenocarcinoma of cervix, which constitutes only 15% of cases. Adenocarcinoma of cervix can be categorized histologically into clear cell, mucinous, endometrioid, serous and mesonephric subtypes. Clear cell adenocarcinoma (CCA) most commonly occurs in the ovary, followed by endometrium, vagina, and cervix. Primary CCA of cervix is a rare neoplastic entity, which occurs in young women exposed to diethylstilbestrol (DES) *in utero*. It is extremely rare in women without*in utero* DES exposure and in such cases it concerns mostly postmenopausal women. Here, we present a case of 30 year old woman who presented with primary infertility. There was no history of in-utero exposure to diethyl stilbestrol. She was diagnosed a case of cervical fibroid on ultrasonography. Diagnostic hysteroscopy was done and she was found to have friable, vascular growth in endocervix, which was extending to uterine cavity. Biopsy was taken. On histopathology, moderately differentiated clear cell adenocarcinoma of cervix was reported. Through this case, authors would like to highlight the probability of rare occurrence and how to manage challenges posed by cervical cancer in young girl wishing to conceive, stressing on the role of hysteroscopy in diagnosis.
Key words: Adenocarcinoma, cervix, DES exposure

Cervix: Poster Abstract

Carcinoma uterine cervix metastasis to the skin: A rare case report

Gajender Singh, Sant Parkash Kataria[1], Rajeev Sen[1]

Department of Pathology, Pt. B.D. Sharma PGIMS, Rohtak, Haryana, India, [1]Department of Radiation Oncology

Introduction: Most common site of metastasis from carcinoma cervix is lung, liver, bone and brain. Cutaneous metastasis is rare occurrence in carcinoma cervix. Incidence reported ranges from 0.1 to 2%. Common morphological pattern of skin metastases are nodules, plaques and inflammatory telangiectatic lesions.
Materials and Methods: A 68 years old postmenopausal female diagnosed as squamous cell carcinoma of cervix stage III B. She was given chemotherapy and radiotherapy and on regular follow up without no evidence of disease locally. After two years she presented with a sub cutaneous nodule of