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VIDEOLAPAROSCOPIC PROPYLACTIC SALPINGO-OOPHORECTOMY: INITIAL EXPERIENCE

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Introduction: The BRCA mutation substantially increases the risk of ovarian cancer, from 20% to 60% when the mutation is in BRCA1, and 10% to 20% in BRCA2. Bilateral salpingo-oophorectomy may be the most important intervention in these patients, with clear impact on the reduction of mortality caused by ovarian cancer, and about 85% to 50% of reduction in the incidence of breast cancer. Salpingo-oophorectomy should be performed from the ages of 35 to 40 in patients with BRCA1 mutation, and after the age of 40 for BRCA2 carriers. **Objectives:** To present our initial experience of prophylactic bilateral salpingo-oophorectomy in patients with BRCA mutation. **Method:** This is a retrospective study. We included all patients who had tested positive for the BRCA mutation assisted from 1999 to 2019. Seven patients were identified with BRCA mutation and underwent videolaparoscopic salpingo-oophorectomy. The procedure was classic. The pieces were removed in endobags and sent to histological analysis with serial sections. The study was approved by the Research Ethics Committee, report n. 2.817.502. **Results:** No tumor was found in the surgical piece. The mean age of patients when they underwent surgery was 45.8 years. The patients, together, added 21 cases of breast cancer and 4 cases of ovarian cancer among 1st, 2nd and 3rd degree relatives. Five (71.4%) patients presented with BRCA1 mutation. Three patients had been diagnosed with breast cancer, none with previous ovarian cancer. As to the surgery: 3 (42.8%) also underwent bilateral or contralateral risk-reducing mastectomy with reconstruction, and 4 (57.2%) only underwent bilateral salpingo-oophorectomy. All patients are alive and without an active oncologic disease, with mean follow-up of 32 months. **Conclusions:** In this sample, we did not find any occult tumor in patients submitted to bilateral salpingo-oophorectomy due to BRCA mutation.