(52%), visual impairment (48%), headache (38%), power loss (43%) and speech disorder (30%). **Methodology:** Surgery was performed to extrinsic component of mass in 3 patients of pons gliomas.For other HGG: 7 subtotal resection and 16 gross total resection had performed.7 patients died before RT. And other 37 patients received radiotherapy. RT total doses varied between 50-60 Gy.7 patients were not received chemotherapy, 3 of them died before chemo, and others received only RT. For other HGGs, platin based regimens used for the first line treatment. Temozolamide, bevacizumab, irinotecan as the other options. **Results:** Median progression free survival time was 6 mos (2weeks-25 mos) for pons gliomas, for other gliomas median progression free survival time was 14 mos(0 -74 mos). For pons gliomas: Event free survival rate for 6 mos was 75%, for one year 17%;one year, 18 mos, and two years overall survival rates were 84%,52% and 10%respectively.For other HGGs: Event free survival rate for one year and two years were 57% and 17% respectively. One year and two years overall survival rates were 73% and 36% respectively. **Conclusion:** High grade glioma is a group of tumors in which still the helplessness experienced in treatment. Despite radiotherapy and chemotherapy, prognosis is very poor. The progression free and overall survival rates of patients were similar to literature. With new developments in molecular pathology, as the use of molecular target therapies, the progression free survival rates newly will improve.

https://doi.org/10.1016/j.htct.2021.10.1093

PP 83

ONC 201 PRACTICE IN DIFFUSE MIDLINE GLIOMA (H3K27M MUTANT)

Bahattin Tanrıkulu [1], Cengiz Canpolat [2], Ahmet Harun Yaşar [3], Ayça Erşen Danyeli [4], M. Memet Özek [1]

[1] *AcibademUniversity School of Medicine Department of Neurosurgery Division of Pediatric Neurosurgery*
[2] *AcibademUniversity School of Medicine Department of Pediatrics Division of Pediatric Hematology and Oncology*
[3] *AcibademUniversity School of Medicine Department of Neurosurgery*
[4] *AcibademUniversity School of Medicine Department of Pathology*

Objective: Diffuse Midline Gliomas (DMG), H3 K27M-mutant have the poorest prognosis among all pediatric high-grade gliomas, with a median survival of 9-11 months. Although radiotherapy (RT) is standard treatment for these tumors, unfortunately there has been no approved and effective treatment which completely diminishes the tumor yet. In our clinic, we started an up-to-date approach to manage DMG, which is adjuvant fractionated external beam radiotherapy along with ONC 201 after tissue diagnosis. **Methodology:** Between January 2016 and June 2021, a total of 11 patients with H3 K27M-mutant diffuse midline glioma, diagnosis confirmed by Next-Generation Sequencing (NGS) were enrolled in study. All patients received ONC201 orally once a week following radiotherapy. Safety, and radiological evaluations were regularly assessed every 12 weeks. **Results:** Among the 11 patients, the median age of diagnosis was 5. Seven (63.6%) patients were male and 4 (36.4%) were female. Primary lesions were localized in the pons in 5 (45.5%) patients, unilateral thalamus (2 on the left, 1 on the right) in 3 (27.3%) patients, bilateral thalamus in 2 (18.2%) patients, and temporo-insular in 1 patient (9.1%). Median progression-free interval was 10 months and median overall survival was 16 months. **Conclusion:** Diffuse midline glioma has dismal prognosis. None of the treatment options made any dramatic changes in disease course during last 30 years. In our series, diffuse midline glioma patients who had ONC201 tend to have few months more progression free and overall survival (16 vs 11 months) in comparison to patients who had classical treatment in literature. As a neurooncology team, we strongly advocate to obtain tissue samples from diffuse tumors, to establish definite diagnosis and to perform NGS

https://doi.org/10.1016/j.htct.2021.10.1094

NEUROBLASTOMA

PP 84

PARATESTICULAR INVOLVEMENT IN NEUROBLASTOMA

Volkan KÖSE [1], Sabri DEMİR [2], Neriman SARI [1]

[1] *Division of Pediatric Hematology and Oncology, Ankara City Hospital, University of Health Sciences*
[2] *Division of Pediatric Surgery, Ankara City Hospital, University of Health Sciences*

Case report: Neuroblastoma is 7-10% of all pediatric cancer cases. Primary testicular and paratesticular neuroblastoma is very rare in the literature. We aimed to present our experience with a 4-year-old patient with an abdominal and right paratesticular mass. The patient's imaging revealed extensive lung and bone metastases. In the diagnostic biopsy, the primary tumour consistent with poorly differentiated neuroblastoma and the right paratesticular mass biopsy revealed neuroblastoma metastasis.

https://doi.org/10.1016/j.htct.2021.10.1095

BONE TUMOURS

PP 85

PRIMARY EWING'S SARCOMA OF SPHENOID BONE EXTENDING TO BRAINSTEM; AN ORDINARY TUMOUR AT AN EXTRAORDINARY LOCATION AND INVOLVEMENT

Seda ŞAHİN, İnci İlhan

Ankara Şehir Hastanesi