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Endoscopic Ultrasound Guided Fine Needle Aspiration/Brush in Cytopathology Diagnosis: A Fifteen-Month Study

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Abstract : Introduction: EUS-Guided Fine Needle Aspiration/Brush (EUS-FNA/Brush) has become increasingly popular for the diagnosis and staging of gastrointestinal and peri-gastrointestinal lesions. Objective: To evaluate the diagnostic accuracy and spectrum of lesions in gastrointestinal EUS-FNA. Material and Methods: A total of 124 EUS-FNA during the period from Aug 2015-Nov 2016 were studied. Results: Age ranged from 13-80 years with a slight female predominance. CBD was the most common site with 47 cases amongst which were 9 adenocarcinoma, and 7 cases were suspicious for malignancy. Pancreatic EUS-FNA showed 5 adenocarcinoma, 2 SPEN, 1 case each of neuroendocrine tumor, anaplastic carcinoma and NHL. Amongst oesophageal lesions, 3 cases were suspicious for malignancy, and 4 were inflammatory, 4 showed SCC, 1case each adenocarcinoma and leiomyoma. Stomach- 1 case each of adenocarcinoma, granulomatous inflammation, and GIST. Periportal lymph nodes were the commonest nodes, and there were 11 necrotising granulomatous inflammations, 3 metastatic adenocarcinoma, 2 cases of atypical cells and 1 case of NHL. 17 cases were unsatisfactory, 41 cases had histopathology follow up with 85% cases being concordant. Conclusion: EUS-FNA is reliable, sensitive and specific. It can be utilized for better management of intra-abdominal lesions.

Keywords : EUS-FNA, brush, cytology, histopathology
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