Fine Needle Aspiration Cytology: Interpretation and Diagnostic Difficulties

Fine needle aspiration cytology (FNAC) has grown in its scope over the decades as an established tool for the tissue diagnosis of various lesions. Here is a textbook of Fine Needle Aspiration Cytology authored and published in India.

I duly take the book and move my hand over its sleek and glossy cover, read on its back the promise of conciseness among other things and hold it open. Promise fulfilled, what is the first aspect that catches the eye? It is the vastly zoomed out section of contents. It names each lesion in its sequential and rightful place, in the relevant chapter. The name of the lesion is followed faithfully by the subheading of diagnostic difficulties, listing the other items with which it may be confused, thus highlighting at the very outset the intent on differential cytomorphology and diagnosis.

The book spans 13 chapters, spread over 191 pages. The first chapter introduces the subject, outlines the technique of FNAC, its complications and touches on general cytomorphological evaluation, including the major sources of error. The 12 chapters that follow describe the FNA morphology of the different organ systems, e.g. salivary gland, thyroid, breast, lymph node, lung, mediastinum, kidney, etc. on a standard and time-tested format, along with the special considerations that pertain today to each one of these. The last chapter deals with the problematic area of round cell tumors.

As one browses through the book, one encounters a brief description of each entity condensed even further in a box for the reader wanting a quick revision of the subject. The pages are busy with numerous microscopic pictures and illustrations, which should help prime the student with the rudiments of FNAC. The references at the end of each chapter include many by the author himself. These attest to his prolific writing on a multitude of facets, skimming practically the whole field of FNAC.

The book is one of the more compact among most FNAC related contemporary texts which grace the bookshelves of the MD pathology student who sits burning the midnight oil in pursuit of his or her degree. He or she may find in it a ready reckoner of the basics that serves to pave the way to more detailed and specialized texts.

The same advantage will be gained by the practicing pathologists whose job description includes a working knowledge of FNAC sufficient to complement their microscopic skills and enable them to extrapolate the given cytomorphology to its corresponding histomorphology and also sufficient to further advance their practice of clinical pathology.

May Dr Dey’s efforts bear fruit!

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