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Fine-needle aspiration biopsy (FNAB) in the diagnosis of suspicious intraocular lesions.

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Purpose: To study 28 consecutive fine aspiration biopsies performed or assisted the first author between 1996 and 1999 regarding clinical diagnosis versus cytology findings needle route through the eye versus complications, and the influence of FNAB finding in the chosen treatment. To correlate the cytology findings with the histology reports when nucleation was the treatment of choice.

Methods: A retrospective chart review of 28 patients submitted to FNAB to clear or clear or confirm a diagnosis of a suspicious intraocular lesion. All patients were investigated and treated between 1996 and 1999. Data collection according to a previously revised protocol was statistically analyzed.

Results: Considering the 28 studied patients, 13 were males and 15 were females, ages varied from 1 to 81 years mean 50.5 years. Std.dev=19.99. Only 17 patients were symptomatic. With a mean duration of 3.8 months. The majority of patients presented lesions in the posterior segment (n=17), for this reason the transvitreal route was preferred (n=24). After the procedure, 20 patients had vitreous hemorrhage, 17 of them were very limited. One patient had a traumatic cataract due to accidental lens touch. Retinal detachment has not occurred in this series. The mean follow up of these patients was 17 4 months; currently 25 patients are alive with no signs of metastatic disease.

Conclusion: FNAB had a greater impact on changing treatment of smaller lesions FNAB appears to be a safe and reliable diagnostic

Technique although is should be used in selected cases. Larger series or randomized clinical trials would be necessary to allow indication of FNAB as a routine diagnostic procedure.