Diagnostic Utility of FNAC in HIV Positive Lymphadenopathy Cases.

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ABSTRACT:

Aims and Objective: This Study has been undertaken to evaluate the role of Fine needle aspiration cytology (FNAC) in Forty Human Immunodeficiency Virus (HIV) positive Lymphadenopathy patients. Materials and Method: Forty HIV positive Patients with Lymphadenopathy were subjected to FNAC over a period of 8 months (January 2016 to August 2016). FNAC was done as a routine procedure using twenty two gauge needle with standard precautions. Smears obtained were stained with May-Grunwald-Giemsa (MGG), Papanicolaou (PAP) and Haematoxylin & Eosin (H&E). Special stain used was Ziehl-Neelsen (ZN) for Acid Fast Bacilli (AFB). Result: Maximum Number of cases were reported in the age group of thirty one to forty years, majority of the patients were Males. Cervical lymphnodes were the most common site encountered. The most common diagnosis was Tuberculous Abscess (42.5%) followed by reactive lymphadenitis (27.5%). Conclusion: FNAC is simple and safe investigative procedure for lesions of lymph nodes in HIV patients. It obviates surgical excision and guides subsequent therapy and management. Many opportunistic infections can also be found out with this procedure.

Key Words: FNAC, HIV, Lymphadenopathy, Tuberculous abscess.

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