

Tilmelding af Foredrag

Foredragets titel

Prospective clinical application of the Bethesda System on thyroid cytology

Forfatter(e)

S.H. Madsen (1), M.L. Jespersen (1), S.J. Bonnema (2), K.Z. Swan (3)

Afdeling/praksis

1 Department of Pathology, Aarhus University Hospital

2 Department of Endocrinology, Odense University Hospital

3 Department of Oto-rhino-laryngology, Aalborg University Hospital

Uddannelsesniveau

KZ Swan præsenterer: 1. reservelæge (sen kursist)

Introduktion

The Bethesda System for Reporting Thyroid Cytopathology (BSRTC) is used to categorize thyroid fine needle aspiration biopsy (FNAB). The aim of this study was to evaluate the distribution of BSRTC categories and associated risk of malignancy in an unselected cohort, and to assess the derived management in terms of performing repetition biopsy or surgery

Materiale/metode

Thyroid FNABs assessed at the Department of Pathology, AUH, in the period 2016-2019 were retrieved from The Danish Pathology Data Bank. Prospectively applied BSRTC category was available for all biopsies. In addition, the number of biopsies and histological diagnosis (if available) were retrieved.

Resultater

In total, 2,873 thyroid nodules in 2,547 patients were included, resulting in 3,669 biopsies. The majority were BSRTC II (52.4%), while BSRTC I was found in 26.3% of the first available FNAB. BSRTC III-VI were less frequent (3.6-7.5 %). Repetition biopsy was performed in 23.6% of nodules. The frequency of BSRTC II increased (61.3%) while BSRTC I decreased (14.8%) from the first to the last biopsy. Surgery was performed in 38.2% of nodules. The malignancy rate correlated positively with the BSRTC category, being 2.8% in BSRTC II and 95.3% in BSRTC VI.

Diskussion

The BSRTC proved effective for communicating thyroid cytology in a standardized and concise way. The malignancy rates of BSRTC categories were in accordance with previous results. Repetition biopsy resulted in a higher rate of conclusive results. The indeterminate BSRTC categories (III-V) are challenging from a pathological and clinical perspective, but these were relatively rare in our series.

Forfatters fulde navn

Kristine Zøylner Swan

Forfatters email

kristineswan@dadlnet.dk