

# Role of image-guided fine needle aspiration cytology of lung lesions in diagnosis and primary care of patients: Experience in a Government Medical College of Eastern India

Dear Editor,

I read this article with great interest entitled, "Role of image-guided fine needle aspiration cytology of lung lesions in diagnosis and primary care of patients: Experience in a Government Medical College of Eastern India" by Chakrabarti *et al.*<sup>[1]</sup> and congratulate the author for well written manuscript. But there are few queries considering very frequently performed procedure and common condition. First title should be CT guided unless you have used more than one radiological modality like CT and Ultrasound both for procedure. This is full length article in which ethical approval was taken and author must had submitted their research proposal. But it was not clear, what was the inclusion and exclusion criteria. Whether author included all non-resolving radiological lesion for fine needle aspiration cytology (FNAC) or all suspected malignancy case are only included in study.

Author mention there one of the objectives to assess clinic-radiological and pathological correlation but it was not done. At least author should tabulate type of radiological lesion and their pathological diagnosis. Percutaneous CT-guided transthoracic fine needle aspiration cytology (TTFNA) is a well-established diagnostic method used in cytological evaluation of thoracic mass lesions but how many passes were taken, whether slides were screened for adequacy of the aspirate and those with inadequate material were also included is not clear. Proportion of patient have different lesion but what proportion of patient have combination of lesion like consolidation with effusion or collapse-consolidation etc?

Imaging guided FNAC or biopsy generally performed in peripheral locating tumour and most of the recent study<sup>[2,3]</sup> showed adenocarcinoma is the common cancer even in smoker specially in female but this study showed squamous carcinoma type as most common type and there argument as most of the patients are male and smoker, but what proportion of study patients are smoker that was not mentioned?

CT guided FNAC is not free of complication and various studies showed the it is between 6 and 50%.<sup>[4,5]</sup> We could not find their observation on safety of procedure in the article.

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### Conflicts of interest

There are no conflicts of interest.

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