

14. Cytologic Features of Castleman's Disease — A Case Report —

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Castleman's disease is infrequently diagnosed in surgical specimens, but cytologic features are not described well. Recently, we experienced a case of Castleman's disease diagnosed by FNA.

The patient was a 33-year-old woman who had splenomegaly, persistent microcytic hypochromic anemia, increased ESR, polyclonal hypergammaglobulinemia, and plasmocytosis and erythroid hyperplasia in BM. Radiologic studies showed a large peripancreatic mass (7 × 8 cm) with regional lymph node hyperplasia and splenomegaly. Sono-guided FNA of mass demonstrated moderate cellularity composed of mature lymphocytes, many plasma cells and clusters of capillary structures, which was strongly suggestive of Castleman's disease, in conjunction with clinical features. It was confirmed in multiple peripancreatic mesenteric lymph node resections. Additionally, Hodgkin's disease was found in central portion of the mass with a background of Castleman's disease. Staging operation including splenectomy, liver wedge biopsy and BM biopsy was followed. The retrospective review of FNA showed no diagnostic Hodgkin cells.

15. Fine Needle Aspiration Cytology of Lymphoproliferative Disorders

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For many years, fine needle aspiration (FNA) cytology has been accepted as an accurate technique for diagnosing both primary and metastatic epithelial neoplasms. However, its usefulness in diagnosing lymphoproliferative disorders had been questioned. During the last few years, there has been a rapidly growing body of documentation that FNA material could be used both for diagnosis and subclassification of lymphoproliferative disorders with using of immunocytochemistry.

We have experienced 9 cases of nodal (4) and extranodal (5) lymphoproliferative disorders : 6 Non-Hodgkin's lymphoma, 1 Hodgkin's disease, 1 multiple myeloma and 1 acute lymphocytic leukemia. A case was a gastrointestinal lymphoma which was diagnosed by cytologic examination and an immunocytochemical study of surface markers. The patient didn't undergo unnecessary operation.

The use of immunohistochemical techniques on aspiration cytology specimens improves the diagnos-