**Original article:**

**Cytologic evaluation of lymphadenopathy in a tertiary care hospital of central India**

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**Abstract:**

 **Introduction -** With the increasing costs of medical facilities, any technique which speeds up the process of diagnosis, limits the physical and the psychological trauma to the patient and saves the expenditure of hospitalization, is of tremendous value. Fine needle aspiration cytology (FNAC) reduces the necessity to perform excision biopsy in many cases, thus saving patients from surgical complications. FNAC of lymph nodes also helps the surgeon to select, guide and modify the treatment plan in patients who require surgeries. To study the different cytomorphological patterns associated with various lymphadenopathies in a tertiary referral hospital of central India.

**Method-** A cohort study was conducted over a five year period from January 2011 to December 2015. FNAC of 480 patients with lymphadenopathy was performed after informed consent. Smears were prepared, stained and studied.

**Results-** The age of the patients ranged from 2 yrs to 90 yrs with a male to female ratio of 1:1.1. Maximum incidence of lymphadenopathy was seen in third decade of life. Cervical region was reported as most frequent site of lymphadenopathy. Reactive hyperplasia of lymph node and tuberculous lymphadenitis were the common benign lesions observed and squamous cell carcinoma was the most common metastatic lesion in our study.

**Conclusion-** FNAC is safe, simple and inexpensive definite diagnostic procedure to render a prompt diagnosis in cases of reactive, infective & neoplastic lymphadenopathies and lymph node biopsy is required only in inconclusive cases or sometimes in the cases of malignancy. Patients with reactive cytological changes and who clinically also appear benign, can avoid unnecessary surgery. FNAC can also pick up unsuspected malignancies.

**Key words:** FNAC, Lymphadenopathy,Lymph node