

EUS Guided Fine-needle Aspiration (EUS Guided FNA) of Pancreatic Masses: Experiences from the Beginning of the Era and Implications to the Present Day

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EUS

Cytology		N	%	N	%
malignant		52	37		
	adenocarcinoma			30	21.1
	undifferentiated cancer			16	11.3
	lymphoma			4	3
	Neuroendocrine tumor			2	1.4
benign		70	49		
	pancreatitis			40	28.2
	normal pancreas			18	13
	cyst			7	5
	cystadenoma			5	4
unclear		20	14		

Table 1: Cytology of FNA.

survival, which has basically remained unchanged during the past

reminder for the need for constant endoscopic training and keen awareness the regarding potential detrimental risks immanent to EUS and EUS guided FNA [51,52].

We found no evidence of needle-tract or cutaneous malignant seeding having taken place by EUS guided FNA in the histopathologic specimens. Ypuncture sites located in the duodenum were resected during the following surgery. Which appears to be fY YWIX in current bX|b|ğ as being restricted to single cases [48,49]. No fatal complication was recorded following interventions described in this series.

