Diagnostic Pathology: Open Access

Denis, et al., Diagn Pathol Open 2023, 2:218

Open Access

***Corresponding author:** Dr. Mwesigwa Boaz, Department of Cytologyrresponding author:

Demographic	Value	df	P value
Age	144.6	2362	0.01
Sex	23.691	13	0.034

5: Chi-square test for association of social demographics with speci c diagnosis.

yroid nodules are common entities, frequently discovered in clinical practice, either during physical examination, but also incidentally, during various imaging procedures [4]. Fine Needle Aspiration (FNA) of thyroid is a cost-e ective, simple, diagnostic tool in the initial screening of patients with thyroid lesions [5]. Its role is to classify the examined lesion as malignant, suspicious, or benign and, thus, to select the patients who would be treated surgically [6]. In this retrospective study, cases of thyroid lesions were predominant in females accounting for 158(92.8%) which was in concordance with studies done by Melak, et al., and Masereka, et al., [7,8]. is is possibly because of good health seeking behaviour exhibited by females as compared to the males. Benign lesions were most commonly diagnosed with a percentage of 77.6% was congruent to the study done by Nassanga, et al., and Sharma, et al., [9,10]. Colloidal nodule represented majority of benign cases which was similar to studies done by Sinna, et al., [11]. Papillary carcinoma was the most commonly reported lesion in the malignant category which is contrary to studies done by Shirish, et al., [12] which reported follicular carcinoma as the most predominant lesion. is is probably because the present study comprised of a smaller sample size (n=170) in comparison to the latter study (n=606). Signi cant association was observed between sexes (P=0.035) with the female sex being the most a ected.

C

e present ndings are consistent with those published i5.8 lhe p6c6.2911 1 T1 Tw -1.575 -1.2 TD[ll.,(t)-5.9(h t)tbeing

9. Nassanga R, Kisembo H, Othieno E, Bugeza S, Fualal J (2015) Sonographic correlation of thyroid nodules with ultrasound aided ýne needle non aspiration cytology. EAMJ. 92:270-278.

10. Sharma C (2015) Diagnostic accuracy of ýne needle aspiration cytology of thyroid and evaluation of discordant cases.JENCI. 27:147-53.

11. Sinna EA, Ezzat N (2012) Diagnostic accuracy of ýne needle aspiration cytology in thyroid lesions. JENCI. 24:63-70.

12. Shirish SN, Monal D, Kamal M, Amit VV, Shankhini G (2018) Evaluation of Thyroid lesions by ýne-needle aspiration cytology according to Bethesda system and its histopathological correlation. Int J Appl Basic Med Res. 8:76-82.