

Fine Needle Cytology of Intrathyroid Epidermoid Cyst

Lucio Palombini, M.D.,¹ Immacolata Cozzolino, M.D., Ph.D.,^{2*}
Serra Luigi, M.D.,³ and Antonio Pifano, M.D.¹

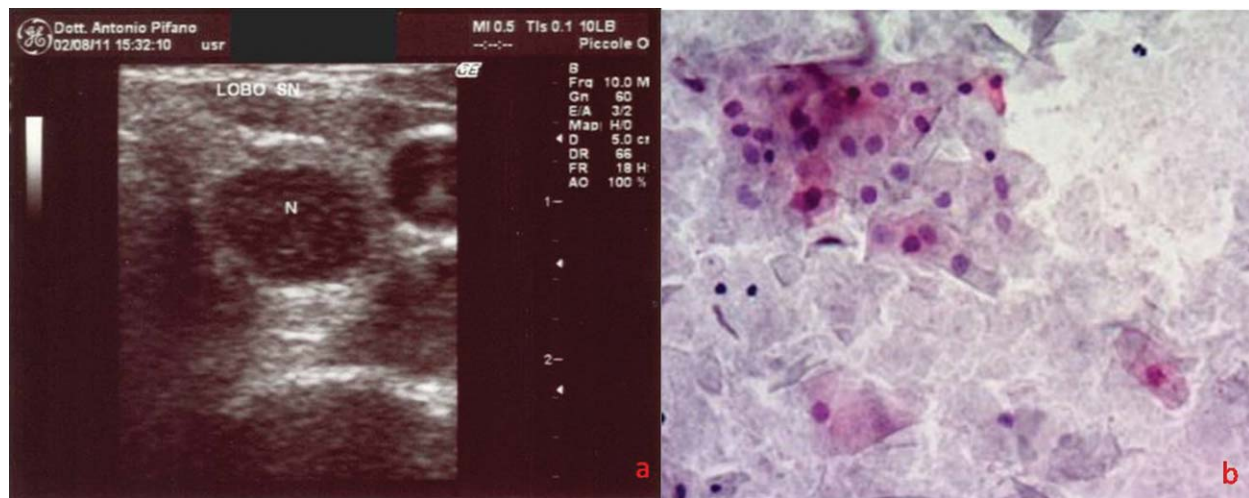


Fig. 1. (a) Ultrasound examination: a 1.2×1.0 cm hypoechoic nodule in left thyroid lobe; (b) Cytological examination: nucleated and anucleated squamous cells in a background with debris, without any type of inflammation (UF-Papanicolaou, $\times 20$ original magnification). [Color figure can be viewed in the online issue, which is available at wileyonlinelibrary.com.]

A 38-years-old woman, presented to the “Centro Barberio” Napoli, Italy, for further outpatient evaluation of a single nonpalpable left thyroid nodule that was cold at the thyroid

scan. The laboratory tests performed were noncontributive. An ultrasound examination showed a 1.2×1.0 cm hypoechoic mass in the left thyroid lobe (Fig. 1a).

An ultrasound guided fine needle sampling retrieved two drops of creamy, gray-greenish material. Two direct smears were prepared from each of the two passes, one was air-dried and stained by May–Grünwald–Giemsa and the other by the ultrafast-Papanicolaou method.¹

Microscopically, in a background with debris, without any evidence of inflammatory cells, there was only a monotonous cell pattern represented by intermediate-like cells with abundant cytoplasm and small normochromatic nuclei, as well as anucleated squamous cells (Fig. 1b). No inflammatory or dysplastic cellular changes were observed.

Based on US and cytologic features on fine needle sampling, the diagnosis of benign intrathyroid epidermoid

¹Centro Barberio Pathology Laboratory, Naples Italy

²Department of Public Health, cytopathology service, Università Federico II, Naples, Italy

³Morgagni Pierantoni Hospital, Forli, Italy.

*Correspondence to: Immacolata Cozzolino, M.D., Department of Public Health Università, Federico II, via Pansini, 5; 80131 Napoli, Italy. Tel.: +39 081 7463674. Fax: +39 081 7463679. E-mail: coimma@yahoo.it

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