Fine needle aspiration cytology in the diagnosis of Sjögren’s syndrome

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ABSTRACT

Introduction: Sjögren’s syndrome is an autoimmune disease belonging to the group of collagenases. It is characterized by lymphocytic infiltration of the exocrine glands, leading to their impairment or complete dysfunction. The inflammatory process usually involves cells of the salivary or lacrimal glands. However, also other organs and systems can be affected.

Purpose: The presentation of a Sjögren’s syndrome case. The pathologist’s role in the disease diagnosis.

Case presentation: A 63-year-old female patient with the enlarged left parotid salivary gland and symptoms of xerostomia and xerophthalmia was referred for ultrasound imaging and fine-needle aspiration biopsy (FNAB). Ultrasonography revealed inhomogeneous ecostructure of the salivary gland with multiple tiny, oval, hypoechoic areas, hyperechoic zones of fibrosis and enhanced vascularization of the gland. The pathological analysis of FNA showed a benign lymphoepithelial lesion, and Sjögren’s syndrome was suggested. Blood serum analysis found anti Ro-52 (SS-A), anti-La (SS-B) and anti-ANA antibodies at 1:1,000 titer. Sjögren’s syndrome was diagnosed based on accessory investigations and the clinical condition of the patient.

Conclusions: The pathomorphological analysis of fine-needle aspiration biopsy of the salivary gland contributed to the diagnosis of Sjögren’s syndrome in the patient.

Key words: Fine-needle aspiration biopsy, salivary glands, Sjögren’s syndrome