Fine Needle Aspiration Cytology (FNAC)

What Is Fine Needle Aspiration Cytology (FNAC)?

Fine needle aspiration cytology (FNAC) is a diagnostic procedure where a needle is inserted into your body, and a small amount of tissue is sucked out for examination under a microscope.

Why Is FNAC Required?

Fine needle aspirations are often performed when a suspicious lump is found, for example a breast lump or an enlarged lymph node, or if an abnormality is detected on an imaging test such as x-ray, ultrasound or mammography. FNAC is a relatively non-invasive, less painful and quicker method as compared to a surgical biopsy.

How Is FNAC Performed?

First some questions are asked about the lump: where it is, how and when you first became aware of it, and if you've noticed any changes in it. Next, the lump is felt. Holding the lump with one hand, the doctor precisely samples the lump with a thin needle. Usually, 2 to 3 samples will be required from the lump to provide an accurate diagnosis. The lump or mass to be aspirated is fixed between the fingers. The needle is gently pricked into the lump and more slowly in different directions. The needle is taken out before blood is seen in it.

How Long Does It Take For The FNAC Procedure?

Each sample only takes about 10 -20 seconds to obtain. The whole procedure from start to finish usually takes no more than 10 to 15 minutes.

When Are The Results Available?

Generally, the results are available in 3 to 4 working days. The results can be grouped into 3 categories:

- *Clearly benign* (Not Cancererous)
- *Clearly malignant* (Cancerous)
- *Non-definitive* (Dilemma between Cancerous and noncancerous)

How Reliable Is FNAC?

In the hands of a skilled FNAC practitioner, this test is very reliable.
In the scenario of a clearly benign diagnosis, it may prevent you from undergoing surgery.
In the case of a clearly malignant diagnosis, it quickly establishes the need for further treatment.
In the less frequent occurrence of a non-definitive diagnosis, either a repeat FNAC or a surgical biopsy is usually recommended.