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Cytopathology of the Glandular Lesions of the Female Genital Tract

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170 figures, 168 in color, and 26 tables, 2011
To Sara, for her family ‘sacrifices’ during her first 2 years of life and in the hope she will be the third step in our cytopathology saga.
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Preface

Following our first publication in the Karger series *Monographs in Clinical Cytology* (vol. 17), which was devoted to endometrial adenocarcinoma, we have spent the last 2 years preparing this second volume, *Glandular Lesions of the Female Genital Tract*. We have been supported in this by series editor Dr. Svante Orell and Karger Publishers. The subject is an area in which we have wide experience and, on this occasion, we have been honored to welcome contributions from 12 international experts in the cytopathology of glandular lesions. Their writings cover the wide spectrum of this challenging subject.

Genital glandular lesions, both benign and malignant, are an attractive area of cytopathology. Malignant lesions of the endocervix and endometrium are becoming more common all the world, compared to squamous cell carcinoma. In this volume we present discussions of in situ and invasive endocervical adenocarcinoma, endometrial adenocarcinoma and endometrial hyperplasias.

Ovarian lesions focusing data obtained from intraoperative studies are considered. Other areas of the genital tract, such as the vulva and the fallopian tube, which are less common and thus have seen fewer publications, are also presented. The impact of the Bethesda System and basic and ancillary techniques in the study of glandular lesions complete our monograph.

We hope that this monograph will be useful to cytopathologists, pathologists, cytotechnologists and to students of these specialities, as it deals with the most common areas of their daily work.

Acknowledgements

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Foreword

Glandular lesions of the female genital tract have always been a challenge for pathologists. The precise cytological diagnosis of these lesions is difficult because of their inherent complexity, as well as the lack of experience of many cytopathologists in this field.

This monograph brings to us an extensive review of the different glandular lesions of the female genital tract that can be recognized on cytological material. Through the different chapters, many authorities in the area show, in a very didactic way, the morphological criteria and the main differential diagnosis of several glandular lesions that will be very useful for pathologists and cytopathologists in daily practice. The 12 well-organized chapters also cover important topics in the area, such as routine and ancillary techniques for the diagnosis of glandular lesions and the 2001 Bethesda System classification of glandular lesions on cervical cytology. There are 170 figures, 168 in color, most of them of excellent quality – an important point in books dealing with morphological criteria for diagnosis. The 351 references distributed throughout the book and cited at the end of each chapter provide extensive coverage of all conditions discussed.

Some words for the editors of the monograph. For the first time in the 50-year history of the prestigious Monographs in Clinical Cytology, the same authors have been responsible for 2 different volumes of the series. Dr. Matias Jiménez-Ayala and Dr. Beatriz Jimenéz-Ayala Portillo were also editors of volume 17, entitled Endometrial Adenocarcinoma: Prevention and Early Diagnosis. This fact reflects the extensive experience of both editors in the field of glandular lesions of the female genital tract. As mentioned before, in this book they invited the most prestigious cytopathologists around the world with experience in glandular lesions to write, ensuring the excellent quality of the text.

In summary, this monograph is once more a valuable addition to the Karger series Monographs in Clinical Cytology, which is edited by Dr. Svante Orell, and I am quite sure that this book will be a practical bench resource for all professionals involved in the cytological diagnosis of glandular lesions of the female genital tract.

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List of Abbreviations

ACC  Adenoid cystic carcinoma
AD   Adenosis
ADSC Adenosquamous carcinoma of the cervix
AEC  Atypical endocervical cells
AEmC Atypical endometrial cells
AGC  Atypical glandular cells
AH   Atypical hyperplasia
AIS  Endocervical adenocarcinoma in situ
ASC-H Atypical squamous cells, high-grade SIL not excluded
ASC-US Atypical squamous cells of undetermined significance
ASR  Arias-Stella reaction
BGC  Bartholin gland carcinoma
BS   Bethesda System
CCA  Clear cell adenocarcinoma
CE   Cervical endometriosis
CGIN Cervical glandular intraepithelial neoplasia
CIN  Cervical intraepithelial neoplasia
CIS  Squamous carcinoma in situ
CVS  Cervicovaginal smear
DES  Diethylstilbestrol
EA   Endocervical adenocarcinoma
EBT  Endometrial brushing techniques
EC   Endometrial cytology
EH   Endometrial hyperplasia
EIA  Early invasive adenocarcinoma
EIN  Endometrial intraepithelial neoplasia
EmA Endometrial adenocarcinoma
EMBT Endocervical mucinous borderline tumor
EN   Endometrioid neoplasia
EP   Endocervical polyp
FNAC Fine needle aspiration cytology
FT   Fallopian tube
FTC  Fallopian tube carcinoma
GCC  Glassy cell carcinoma of cervix
GCT  Granulosa cell tumor
HC2  Hybrid Capture 2
HPV  Human papillomavirus
HSIL High-grade squamous intraepithelial lesion
IMBT Intestinal mucinous borderline tumor
IUD  Intrauterine device
LBP  Liquid-based preparation
LUS  Lower uterine segment
MA   Mucinous adenocarcinoma
MBT  Mucinous borderline tumor
MC   Metastatic carcinomas
MGH  Microglandular hyperplasia
MT   Metastases
NOS  Not otherwise specified
PB   Psammoma bodies
PD   Paget’s disease
PH   Papillary hidradenoma
PHGC Post-hysterectomy glandular cells
RVF  Rectovaginal fistulae
SA   Serous adenocarcinoma
SBT  Serous borderline tumor
SCC  Squamous cell carcinoma
SIL  Squamous intraepithelial lesion
SPC  Serous papillary carcinoma
SSPC Serous surface papillary carcinoma of the ovary
TM   Tubal metaplasia
VC   Vulvar carcinoma
VGA  Vaginal adenocarcinoma
VIN  Vulvar intraepithelial neoplasia
VSIL Vulvar squamous intraepithelial lesion
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