

A consideration of the trends in thyroid fine-needle aspiration cytology – Results from the Italian Cytopathology Committee National Practice Survey in Thyroidology

Ilker Sengul¹, Demet Sengul²

¹ Thyroidology Unit, Giresun University Faculty of Medicine, TR28100 Giresun, Turkey; Division of Endocrine Surgery, Giresun University Faculty of Medicine, TR28100 Giresun, Turkey; Department of General Surgery, Giresun University Faculty of Medicine, TR28100 Giresun, Turkey; ² Department of Pathology, Giresun University Faculty of Medicine, TR28100 Giresun, Turkey

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Dear Editor

It is with the utmost deference and profound interest that we peruse the recent contribution to these pages by Acanfora *et al.*¹, which offers a most valuable aperçu of the current state of thyroid fine-needle aspiration (FNA) cytology practice across the Italian peninsula in thyroidology. The authors are to be commended for their diligent undertaking, which illuminated several salient points of contemporary practice, particularly in the context of the Italian Consensus for the Classification and Reporting of Thyroid Cytology (ICCRTC). This survey, being a work of no small relevance, shall surely serve as a critical datum for future considerations. The finding that the volume of thyroid FNAs returned to pre-pandemic levels by the year 2022 is indeed a welcome sign of the restoration of clinical normalcy, and the widespread adoption of the ICCRTC system (90.4%) speaks volumes to the success of national standardization efforts. Such uniformity in reporting is, without question, a cornerstone of robust inter-institutional communication and patient care. Yet, a careful examination of the reported data prompts a gentle query regarding specific procedural nuances. The observation that the majority of FNAs (75%) are performed by non-pathologist physicians – chiefly endocrinologists and radiologists – is a point of interest. While the skill and dedication of these clinicians are not to be underestimated, the established literature suggests that the immediate presence of a cytopathologist for rapid on-site evaluation (ROSE) can significantly enhance specimen adequacy and diagnostic yield. One might, therefore, consider the potential for further optimization of the pre-analytical phase, perhaps through enhanced collaborative models that more closely integrate the proceduralist and the diagnostic cytologist, a matter of no slight consequence for patient management.

Furthermore, the reported rate of participation in the survey, at a modest 12.2%, while perhaps typical for such national endeavors, necessitates a cautious interpretation of the findings, a point which the authors themselves noted with candour. As such, the responses, being drawn from

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Correspondence

Ilker Sengul

E-mail: ilker.sengul.52@gmail.com

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a self-selecting cohort, may not fully encapsulate the entirety of the national practice, particularly among those institutions that may not be as closely aligned with the SIAPEC committee's activities. It is a matter of academic prudence to consider whether the reported high adoption of the ICCRTC is genuinely representative of all practitioners, or if it is somewhat inflated by the participation of the most engaged and compliant centers.

Herewith, the nascent, yet variable, integration of molecular testing (42.2% of participants) suggests an area ripe for future guidance. Indeterminate cytology remains being a great challenging issue in thyroidology²⁻⁶. As the indeterminate categories of the ICCRTC (TIR3, TIR4) become increasingly refined by molecular data, a clear national strategy on the optimal selection of cases for testing and the subsequent reporting of these results will be invaluable to the practicing physician.

In essence, the work of Acanfora and colleagues is a laudable contribution to the field, providing a firm foundation upon which future improvements in Italian thyroid cytopathology may be built. Of note, we offer these reflections not as a critique, but as a humble contribution to the ongoing scholarly discourse. This issue merits further investigation. We thank Acanfora *et al.*¹ for their study on thyroid FNA cytology for thyroidologists. *Mater artium necessitas...*

CONFLICT OF INTEREST

The authors declare no competing interests.

AUTHORS' CONTRIBUTIONS

Conceptualization, Formal analysis, Investigation, Methodology, Project administration, Resources, Software, Validation, Visualization, Writing-original draft, Writing-review&editing. DS: Conceptualization, Formal analysis, Investigation, Methodology, Project administration, Resources, Software, Supervision, Validation, Visualization, Writing-original draft, Writing-review&editing.

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DATA AVAILABILITY

Data sharing is not applicable to this article as no new data were created in this study.

ETHICAL CONSIDERATION

Not applicable.

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