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Lymphnodes are catch basin or filters in the lymphatic drainage system and hence frequently enlarges, so their enlargement is most common presentation of various non malignant and malignant diseases and this is the reason why lymphnodes are biopsied in routine. Although not so common as the primary site of disease, they are involved virtually in all systemic infections and large number of malignant lesions. This makes the diagnosis of lymphadenopathy as one of the most common problems for a surgical pathologist.

Lymphnode is highly cellular organ, so that any delay in fixation results in poor preservation and leading to thick section, so that histopathological features are altered. Another cause of altered histology is that lymphnode react to all external stimuli leading to extreme degree of hyperplastic changes, so the accurate diagnosis is difficult to make (Ackerman, 1954).

There are various methods by which lymphnodes are examined; Fine needle aspiration cytology, Imprint cytology, and forzen section for rapid diagnosis and paraffin section for final diagnosis.
Greig and Gray (1904) first punctured the lymphnode in search of etiological agent in case of trypanosomiasis.

Guthrie (1921) was the first person to use aspiration technique on enlarged lymphnode and its cytological finding were described by Pronker in 1927.

Martin and Ellis (1930) studied 1844 cases of cervical tumour. Various other workers like Stewart (1933) and Pavlovsky's (1934) also made further research on this topic.

Berman (1953) studied the imprint cytology of the lymphnode and correlated it with histopathological findings and Dreyfus (1940) proved the advantage of Giemsa and Papanicolaou's staining for the lymphnode imprint.

By now though a large number of workers Dudgeon and Patrick (1927), Dudgeon and Barrett (1934), Lucas P.F. (1955), Ultamann et al (1958), Aust et al (1971), Godwin (1976), Bloustein and Silverbert (1977), Agarwal et al (1977), Solanki et al (1977), Suen et al (1976 & 1978), and Nagpal et al (1982) have critically evaluated and re-evaluated its diagnostic importance by imprint cytology method, but have not yet revealed universal acceptance. Various workers have stressed the utility of this technique on neoplastic and non neoplastic lesion
and most of these studies were however, confirmed to the lesions on lymphnodes. Therefore it was considered worth while to assess the value of imprint cytology in the diagnosis of lymphnode diseases.

This is a single retrial almost accurate procedure an adjunct to biopsy diagnosis. Some times also provides information of the histogenesis and pattern of tumour but is not helpful in assessing the depth of tumour infiltration.

Frozen section diagnosis has been useful surgical adjunct, since it was first popularised by Wilson in 1905 in the treatment of prostatic cancer, frozen section diagnosis during pelvic lymphnode staging biopsies are used.

This above technique is recent diagnostic procedure in pathology provides an quick tissue diagnosis, and quite simple technique and no fixative is needed so that there is not alteration in cellular morphology pattern of the lymphnode giving better and earlier results (Shivas and Fraser, 1971).

Because the diagnosis made by the pathologist with frozen section may have serious consequences for the treatment of the patient a high degree of accuracy is mandatory and quality control is important. The
surgeon constitutes a critical component of the diagnostic efforts by his selection of the tissue from which frozen section is to be done. No pathologist can overcome the handicap of being handed the wrong tissue consequently, both the surgeon and pathologist must be advised of the each other problem and limitations of frozen section are concluded to give maximum services (Ewing, 1925; Simpson, 1937; Sparkman, 1952; Ackerman et al, 1959; Tribe, 1973; and Kaufman Zui et al, 1986). The paraffin embedded section technique is an old history of histopathology itself but inspite of certain pit fall its still resumes universal acceptance because the technique is comparatively cheap, simple and to a good amount of reliability (Culling, 1963; Bancroft and Steven, 1977).