

Results

Thirty nine female patients with clinico-radiological diagnosis of ovarian cysts and cystic neoplasm underwent fine needle

aspiration cytology under ultrasonic guidance using different approaches depending on the site of the lesion (Tables 1 and 2) with an age range of (21-48) years.

Table 1: Site of ovarian cystic lesions in 39 patients

Site	No. of patients	%
Rt. Ovary	21	53.8
Lt. Ovary	14	35.8
Both	4	10.4
Total	39	100

Table 2: Approaches of FNAC for different ovarian cystic lesions

Approach	No. of patients	%
Transvaginal	3	7.7
Transrectal	0	0
Percutaneous	31	79.5
Intraoperative and /or immediately after surgical removal	5	12.8
Total	39	100

There were thirteen female patients with a non-neoplastic functional cystic lesions underwent cytological diagnosis, while twenty-six female patients had neoplastic ovarian cystic lesions, twenty-three were

benign and three were malignant in cytological diagnosis. Inadequate material was obtained in five patients (Tables 3 and 4).

Table 3: Cytological diagnosis in 39 cases with ovarian cystic lesions

Cytological Diagnosis	No. of patients	%
Non-neoplastic cyst	13	33.3
follicular cyst	9	23.0
corpus luteum cyst	4	10.3
endometrioid cyst	0	0
Neoplastic cyst	26	66.7
Benign		
serous cystadenoma	17	43.5
mucinous cystadenoma	4	10.3
mature cystic teratoma	2	5.2
Malignant		
Serous cystadenocarcinoma	3	7.7
Total	39	100