LETTERS TO THE EDITOR

Percutaneous biopsy of mediastinal tumours under sonographic guidance

In his editorial (March 1991:46:157-9) Dr K Wernecke states that sarcomas and other rare primary mediastinal tumours cannot be diagnosed accurately by percutaneous biopsy even on the basis of large tissue cylinders. I would beg to disagree with him on this issue. Large cylinders of tissue obtained with wide bore needles can be sufficient for diagnosis even of these rare lesions. There have been great advances in the application of immunocytochemical markers to aid in the diagnosis of soft tissue tumours. In addition, germ cell tumours can be accurately typed by means of several markers, such as human chorionic gonadotrophin, a fetoprotein, and placental alkaline phosphatase. Use of these markers can help the pathologist to come to a firm diagnosis even with formalin fixed material. Several sections can be obtained from these cylinders of tissue and the appropriate antibodies applied. We have recently been able to obtain sufficient tissue cylinders with the biopsy gun needle (Radioplast, Sweden) from lesions in the peripheral lung to give a correct diagnosis in most cases, using both light microscopy and immunocytochemistry.

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AUTHOR'S REPLY

We are grateful for Dr Sheppard's critical remarks concerning our statement that "sarcomas and other rare primary mediastinal tumours cannot be diagnosed accurately by percutaneous biopsy even on the basis of large tissue cylinders." This statement is based on current reports and on our personal experience. We agree with Dr Sheppard that there have been great advances in the application of immunocytochemical markers. No data, however, are available as yet regarding the diagnostic advantages of these new immunocytochemical methods for percutaneous biopsy material from mediastinal tumours.

In Hodgkin's lymphoma no improvement can be expected with immunocytochemical markers as the diagnosis is essentially dependent on the presence of Reed-Sternberg cells. The diagnosis of non-Hodgkin's lymphoma is also complicated by sampling errors, as the nodes contain large areas of non-neoplastic lymphocytes. In theory, immunocytochemical techniques may assist in the diagnosis of thymomas (evidence of epithelialoid structures with cytokeratin-IH). The same holds true for the rare thymic carcinoid (use of neuroendocrine markers). Several immunocytochemical markers have also been described for sarcomas (rhabdomyosarcoma: actin, desmin; fibrosarcoma: vimentin; histiocytoma: lysocyn; neurosarcoma: P100), which could improve diagnosis from percutaneous biopsy specimens.

These theoretical ideas, however, regarding the value of immunocytochemical markers for the diagnosis of sarcomas and other rare mediastinal tumours from biopsy cylinders require further evaluation in clinical trials.

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NEW EDITOR OF THORAX

Dr Stephen G Spiro is taking over from Professor Anne Tattersfield as Editor of Thorax on 1 October 1991. Papers being submitted to Thorax should be sent to him at the Royal Brompton National Heart and Lung Hospital, Sydney Street, London SW3 6NP.

NOTICES

Update courses in cardiopulmonary pathology

Two "update in cardiopulmonary pathology" courses will be held at the National Heart and Lung Institute. The first, on cardiology (congenital heart disease, cardiomypathies, innervation, and conduction defects), will be on 26 and 27 March 1992 (course organiser Professor R H Anderson); and the second, on lung tumours (cell biology, pathology, radiology, staging, surgery, chemotherapy, radiotherapy, terminal care), will be on 6 and 7 April 1992 (course organiser Dr M Sheppard). Further details from the Postgraduate Education Centre, National Heart and Lung Institute, London SW3 6LY (tel: 071 351 8172, fax: 071 376 3442).

Conference on asthma deaths

A conference on sudden deaths from asthma and their prevention will be held at the Royal College of Physicians, 1 St Andrew's Place, London NW1 4LE, on Wednesday 11 December 1991 (fee £25). Application forms may be obtained from the organiser, Dr C Rajagopal, Department of Paediatrics, St Mary's Hospital, Newport, Isle of Wight, PO30 5TG.