

Diagnosis validity of AgNOR staining for differentiating non-Hodgkin lymphoma from reactive hyperplasia

Zh.Torabizade (MD)
Department of Pathology
Mazandaran University of Medical Sciences

F.Naghshvar (MD)
Department of Pathology
Mazandaran University of Medical Sciences

O.Emadian (MD)
Department of Pathology
Mazandaran University of Medical Sciences

Corresponding Author:

Jh.Torabizade

E-mail: zhtorabi@yahoo.com

Abstract

Background&Objective: There are different methods including H&E, immunohistochemistry, flow cytometry, AgNOR staining for differentiating reactive hyperplasia from lymphoma. This study was done to determine diagnostic validity of AgNOR staining for differentiating non-Hodgkin lymphoma from reactive hyperplasia.

Materials&Methods: Fifty paraffin blocks belong to patients with confirmed diagnosis are as below: Thirty five blocks with lymphoma and fifteen blocks with reactive hyperplasia. AgNOR dots among one hundred cells were counted, by two experienced pathologists. The mean of AgNOR dots were calculated. Student T-test used to compare mean AgNOR dots.

Results: The mean AgNOR count was 2.2 (range 1.4-3, SD=0.8) in reactive hyperplasia and 6.7 (range 3.9-9.5, SD=2.8) in non-Hodgkin lymphoma. A statistically significant difference was observed between the AgNOR count of reactive hyperplasia and non-Hodgkin lymphoma ($p<0.05$).

Conclusion: The findings support the validity of AgNOR technique for differentiating and confirming non-Hodgkin lymphoma from reactive hyperplasia.

Key Words: AgNORs- Reactive hyperplasia- Non Hodgkin lymphoma