



Endoscopic Ultrasound-Guided Fine-Needle Aspiration (EUS-FNA)

Guest Editor:

Prof. Dr. Susumu Hijioka

Department of Hepatobiliary and
Pancreatic Oncology, National
Cancer Center Hospital, Tokyo
104-0045, Japan

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Message from the Guest Editor

Endoscopic ultrasound-guided fine-needle aspiration (EUS-FNA) has become widely used in clinical practice. Primarily, EUS-FNA is used for the histological diagnosis and cytodiagnosis of pancreatic diseases, lymph node lesions, and submucosal tumors. Recently, it has been widely used for hepatic lesions, biliary tract diseases, cystic lesions, and perivascular lesions. Improvements in the use of needles, such as an endoscopic ultrasound-guided fine-needle biopsy for genomic panel diagnosis have also been attempted to collect more tissue.

On the other hand, needle tract seeding after EUS-FNA has been sporadically observed in previous reports. Furthermore, the issue of the diagnostic ability in pancreatic carcinoma in situ and micropancreatic carcinoma has also come to light. This Special Issue will focus on the current knowledge, issues, and limitations of EUS-FNA use.





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Editor-in-Chief

Prof. Dr. Andreas Kjaer

Department of Clinical
Physiology, Nuclear Medicine &
PET National University Hospital,
Rigshospitalet, University of
Copenhagen, Blegdamsvej 9, DK-
2100 Copenhagen, Denmark

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