Preface to the Second Edition

This second edition of *Diagnosis of Endometrial Biopsies and Curettings: A Practical Approach* follows a number of favorable comments we received about the first edition. As before, this book is designed to offer a practical reference for the everyday interpretation of endometrial biopsies. This edition has been extensively updated to reflect the advances in our understanding of the pathology and pathophysiology of the endometrium over the past few years. In addition, a large number of color illustrations have been added to help the reader understand the morphologic changes described in the text.

Although the entire book has been revised, several areas received particular attention. Our knowledge of the utility of immunohistochemistry in the interpretation of these specimens, especially trophoblastic disease and endometrial neoplasia, has expanded considerably since the first edition. Accordingly, in this edition the problems, pitfalls, and utility of this valuable diagnostic adjunct have received greater attention. While immunohistochemistry is discussed in all the chapters, it is also summarized in the final chapter, which addresses methods of endometrial evaluation.

Expanded knowledge of newer entities, such as the epithelioid trophoblastic tumor, endometrial intraepithelial carcinoma, and the effects of tamoxifen on the endometrium have received increased emphasis in this edition. Because hydatidiform mole is now commonly recognized at an earlier stage of gestation, the features of these "early moles" are discussed in greater detail. The chapter on polyps was revised to further clarify the terminology of these common lesions, as they demonstrate a wide spectrum of morphologic features. Information about the distinction of endometrial carcinoma from endocervical adenocarcinoma also was significantly revised.

Most importantly, however, the text continues its focus on those aspects of endometrial biopsy interpretation that can be especially vexing, such as the diagnosis of atypical hyperplasia, grading of endometrial carcinoma, and the myriad of benign changes and artifacts that can be confusing to the pathologist. In addition, a clear understanding of the terminology that the pathologist uses to communicate diagnostic information to the clinician is critically important. A diagnosis of carcinoma

is straightforward, but a clear and precise diagnosis of the various benign, yet abnormal pattens of endometrial development and bleeding can be a challenge.

Finally, we have tried to not only provide a reference for evaluating the morphologic details of a wide variety of lesions but also to convey to the reader the manner by which we approach the evaluation of the endometrial biopsy. It is not possible to cover every aspect of endometrial pathology in a single text of this size, but we believe that the book is a reasonable foundation and starting point for the diagnosis of these specimens. We hope it will be useful to pathologists and gynecologists.

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Preface to the First Edition

The incentive for writing this book came from a short course, "Endometrial Biopsy Interpretation," that we presented for five years at the United States and Canadian Academy of Pathology. The enthusiastic response we received from this endeavor prompted us to consider writing a practical text on the histologic interpretation of these specimens, which are commonly encountered in the surgical pathology laboratory but are given short shrift in standard texts. Several gynecologic pathology textbooks, such as *Blaustein's Pathology of the Female Genital Tract*, 4th ed. (1994), describe the morphologic features and classification of benign and malignant endometrial lesions, but little attention is given to the subtle differences between physiologic changes and pathologic conditions and the artifacts of biopsy and processing. In addition, microscopic findings that can be safely ignored because they have no clinical bearing are generally not discussed in standard texts. It is our impression that it is precisely these areas that present most of the difficulties in daily practice, more so, in fact, that the diagnosis of a malignant tumor.

This text is not a reference or atlas that describes pathologic curiosities that one might never encounter in a lifetime of practice. Instead, we attempt to provide a logical approach to formulating a pathologic diagnosis from the diverse array of fragmented, often scant pieces of tissue and blood received in the laboratory. As such, the material is presented in a less traditional fashion. Conventional histopathologic classifications remain an integral part of the text, but the various chapters focus on a clinically oriented approach to the microscopic diagnosis of common problems. For example, the individual chapters address the clinical questions and specifics of reporting the findings, aspects that vary according to the patient's age and the clinical circumstances.

One important subject is that of changes in the endometrium induced by breakdown and bleeding, independently of the underlying pathology. These alterations are highly prevalent in endometrial biopsies and are often misinterpreted, so they are described in detail. The updated World Health Organization classification of endometrial hyperplasia is based on the distinction of atypical and non-atypical hyperplasia. This topic is especially important, since cytologic atypia is the critical prognostic feature in their behavior, yet the characteristics of what constitutes

atypia are not well appreciated. Metaplasia and other benign changes can mimic hyperplasia and carcinoma, so the text focuses on these lesions in detail. Clinical management of endometrial carcinoma is greatly influenced by the histologic evaluation of the curettings. Accordingly, the discussion of endometrial carcinoma considers not only the differential diagnosis, but also the grading of carcinoma and the distinction of endometrial from endocervical primary tumors.

Trophoblast presents unique problems in diagnosis. This is largely because the pathologist lacks experience with the diverse morphologic array of trophoblastic changes in benign and malignant lesions. Gestational trophoblastic disease is rare in routine practice. Furthermore, trophoblast of abortion specimens, including the trophoblast of the implantation site, usually receives little scrutiny. Two chapters have been included to cover this complex subject, one devoted to physiologic and one to neoplastic conditons.

Almost all the illustrations used in this text are from biopsies, and some show artifact and distortion, as occurs in routine specimens. We intentionally use this less-than-perfect material, since it better illustrates the problems that the pathologist faces in the interpretation of these specimens.

Since this monograph is not a reference text or atlas, we suggest reading it in its entirety in order to appreciate the clinically oriented problem-solving approach that we advocate. We hope that the reader finds this approach informative, useful, and enjoyable.

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