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**Title:** Predictive value of pre-test clinical diagnosis for mediastinal lymphadenopathy compared to histological outcomes from cervical mediastinoscopy

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**Body:** **OBJECTIVE** To compare pre-test diagnoses of mediastinal lymphadenopathy with histology obtained from cervical mediastinoscopy. **METHODS** Retrospective study of cervical mediastinoscopy outcomes between January 2009 and January 2011. We classified patients by histology and elicited whether the pre-test diagnosis was confirmed, supported or refuted by histology. The five histological groups were: i) non-caseating granuloma, ii) caseating granuloma, iii) undifferentiated granuloma, iv) malignant cells, and v) other (non-diagnostic tissue). **RESULTS** A total of 323 patients underwent cervical mediastinoscopy. 36% (n=115) had non-caseating granulomas, 11% (n=34) caseating granulomas, 2% (n=5) undifferentiated granulomas, 27% (n=87) malignant cells and 26% (n=82) were non-diagnostic. Patients with a pre-test diagnosis of tuberculosis or malignancy were more likely to have this confirmed by histology. Malignancy was confirmed in 42.6% of cases, where cervical mediastinoscopy was performed for staging (n=129), and excluded in 57.4%.

Relationship between histology and pre-test differential diagnosis / diagnosis.

Lymph node histology (n, %)	No. (%)	Mean age (yrs)	Sex (% male)	Proportion of patients where the pre-test diagnosis was confirmed by histology (%)
(i) Non-caseating granulomas	115 (36%)	51	61.7	52.2
(ii) Caseating granulomas	34 (11%)	46	47	93.9
(iii) Undifferentiated granuloma	5 (2%)	40	40	80
(iv) Malignant cells	87 (27%)	67	64.4	98.6

(v) Other	82 (26%)	65	64.6	1.2
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CONCLUSION A pre-test clinical diagnosis of tuberculosis was most predictive of histology supporting such a diagnosis.