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Title	Place of CD56 in the Thyroid Papillary Carcinoma.
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Aim	Check out these highly promising results for future use of CD56 in current practice.
Materials & Methods	Our study included 55 thyroid samples collected in anatomy and pathological cytology department of Charles Nicolle hospital in Tunis. There were 44 cases of papillary carcinoma of the thyroid (PCT) (PCT 17 cases of classical form (PCTC), 25 cases of papillary carcinoma in his vesicular variant (PCTV) , 2 cases of PCT oncocytic variant(PCTO)) and 11 control cases. These consisted of four cases of follicular adenoma, 3 cases of thyroid oncocytoma, 3 multinodular goiter (MNG), 1 case of thyroiditis and 55 samples of normal thyroid tissue attached to the tumor lesions and inflammatory described above. The positivity threshold (according to research cited above) was set at 10%.
Result	For anti-CD56 where the absence of labeling in favor of malignancy antibody, we observed the absence of expression in 81% of PCT and 58% of the control lesions. The sensitivity of CD56 in the diagnosis of PCTV was 80% and 88% in the diagnosis of PCTC. The specificity of this marker in the diagnosis of carcinoma PCT was 42%. Note that a diffuse expression (> 50% of tumor cells) was observed in only one case PCTO while 50% of the control lesions were marked by intense and diffuse.
Conclusion	Our results show sensitivity and specificity below that reported in the study cited above. However, we believe that CD56 may be a diagnostic aid. Indeed, an intense expression and distributes of CD 56 is rarely observed and should call into question the diagnosis of PCT.