A 60-year-old man was referred to us because his abdominal CT findings showed several swollen mesenteric lymph nodes. He had been diagnosed with follicular lymphoma five years earlier, and complete remission had been achieved by chemotherapy. Lymphoma recurrence was suspected, and EUS-FNA was performed for confirming diagnosis. We used a newly launched needle — the Expect™ 19ga Flex Needle — and transgastric needle puncture was performed three times. Sufficient material was successfully obtained, and the patient was diagnosed with follicular lymphoma recurrence on the basis of histopathological findings (Figure 1).

This needle has several advantages over previous 19-gauge needles. The needle shaft is more flexible than previous 19-gauge needles. Therefore, it is much easier to angulate the needle tip, which makes puncture easier. Furthermore, the needle tip is clearly visible on EUS images, and even the needle wall is visible as two hyper-echoic strands (Figure 2). Thus, the Expect 19ga Flex Needle is useful for sampling.

DISCUSSION
Histological assessment is often essential, and diagnosing certain conditions, e.g., lymphoma, solely on the basis of cytological assessment is difficult. Moreover, histopathological assessment and sub-classification are essential for choosing treatment strategies and predicting prognosis.

Therefore, in suspected lymphoma cases, we often use 19-gauge needles to obtain material for histological assessment. We previously found that lymphoma sub-classification is possible in patients when EUS-FNA samples are obtained using a 19-gauge needle (Endoscopy 2006, AJG 2012).