



X-Plain *Breast Lumps - Biopsy* **Reference Summary**

Introduction

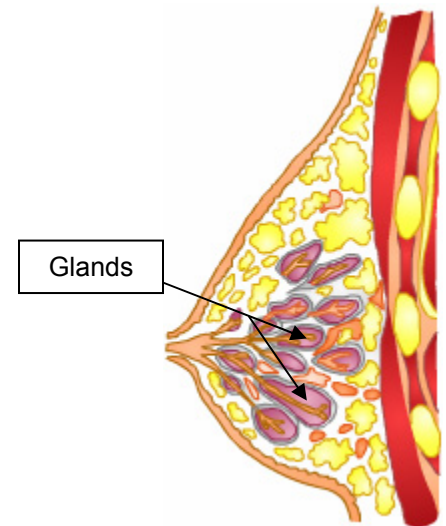
Breast lumps are a common condition that affects millions of women every year. Men can also be affected by breast lumps.

Breast lumps may be cancerous. Breast cancer occurs in approximately one in every 8 to 9 women.

Your doctor may have recommended a biopsy to determine if your lump is cancerous or not. The decision whether or not to have a breast biopsy is also yours. This reference summary will review the benefits and risks of a breast biopsy.

Anatomy

The breast contains glands responsible for making, storing, and delivering milk. Milk is usually produced in women's breasts after the delivery of a baby. The milk is made and stored in the glands inside the breast tissue. From the glands, milk flows through special ducts to the outside, passing through the nipple area.



Symptoms and Their Causes

Many lumps are discovered by patients themselves during a breast self-exam. Routine mammograms can also detect lesions too small to be felt during an exam.

Most lumps found in the breast are NOT cancerous. However, your doctor SHOULD examine all lumps to make sure they are not cancerous.



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Medical Examination

Your doctor will review your medical history and examine your breasts to determine if they are healthy. Your doctor may recommend other tests such as ultrasound and mammography to diagnose breast lumps.

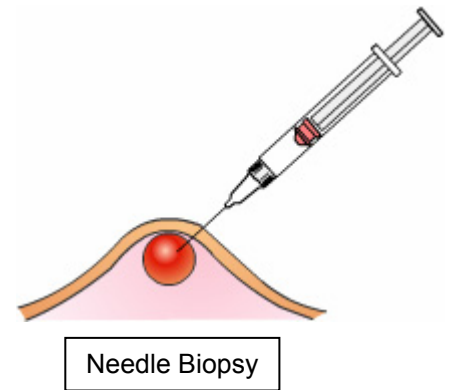
A breast biopsy may be needed to determine if a lump is cancerous. A biopsy means that either a small part of the lump or nodule or the whole lump is taken out for a pathologist to look at and decide if it is cancerous.

Surgical Procedure

Breast biopsies are done under local or general anesthesia. There are several different biopsy procedures.

In a needle biopsy, a needle may be inserted into the lump. Fluid and tissue samples would then be taken for pathological studies. Needle biopsies are done through the needle puncture, so an incision may not be necessary.

If the lump is filled with fluid, your doctor can remove all the fluid during a needle biopsy and no further surgery may be needed.



In an open biopsy the skin and the underlying tissues are incised until the lump is reached.

During an incisional biopsy, a small part of the lump is taken out through that incision.

In an excisional biopsy, the entire lump, and some surrounding tissue are removed through the incision. This is known as lumpectomy. After the operation is done, the skin is closed.

During a biopsy, if the lump is small or deep and cannot be located easily, a flexible wire may be placed in it under x-ray guidance. The surgeon then follows the wire to the lesion. This is known as “wire localization.”

Your doctor will help you decide which type of breast biopsy is the best suited for you.

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The pathologist will examine the sample of tissue taken from your breast during biopsy and determine if it is cancerous (malignant) or not cancerous (benign).

If the lump is benign (not cancerous), no further surgery may be needed. If, on the other hand, the lump is cancerous, further surgery may be needed.

At times the radiologist or surgeon can do the biopsy using radiological guidance. This is known as stereotactic breast biopsy. The potentially abnormal area is located using a special mammography machine. While the breast is still in the machine, the doctor inserts a needle in the abnormal area and takes a piece of it. Because the patient does not move in the machine, the doctor can be certain that the biopsy was taken from the abnormal area.

Risks and Complications

Breast biopsy is very safe. There are, however, several possible risks and complications. These are unlikely but possible. You need to know about them just in case they happen. By being informed, you may be able to help your doctor detect complications early.

The risks and complications include those related to anesthesia and those related to any type of surgery. Risks related to anesthesia include, but are not limited to: stroke, kidney failure, pneumonia, and blood clots in the legs. Your anesthesiologist or nurse anesthetist will discuss these risks with you in greater detail.

Some of the risks are seen in any type of surgery. These include:

- Infection, deep or at the skin level. Treating deep infections may require long-term antibiotics and possibly surgery.
- Bleeding, either during or after the operation. This may necessitate a blood transfusion or another operation.
- Fluid may collect under the skin, which is known as “seroma.” This may need to be taken out with a needle. A seroma could cause the incision to open up.
- Skin scars that may be painful or ugly.

After The Biopsy

Breast biopsy is an outpatient procedure. In other words, it is a same day surgery where the patient goes home after the surgery.

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After surgery, you will be taken to the recovery area where a nurse will monitor you. When you wake up, the nurse will ask you to drink and sit up.

An adult should drive you home because you may feel temporarily drowsy, particularly if the biopsy was done under general anesthesia. Your health care provider will give you instructions before you go home. These may include:

- Not showering before 48 hours.
- Applying an ice bag to the incision to reduce the swelling and ease pain.



Make sure to contact your doctor in case of any new symptoms, such as fever, bleeding, severe pain, weakness, swelling, or infection.

Summary

Breast lumps are a very common condition that affects millions of women. It also affects men. These lumps should be thoroughly examined to determine if they are cancerous. A breast biopsy helps determine if a breast lump is cancerous.

Breast biopsy is a very safe procedure. Risks and complications are very rare. Knowing about them will help you detect and treat them early.

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