

X-ray (Stereotactic) guided vacuum-assisted excision (VAE)

Breast Imaging Department, Radiology

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Wash your hands with soap and warm water and dry thoroughly. Use hand gel, if provided, in care facilities.
- If you have symptoms of diarrhoea and vomiting stay at home and do not visit relatives that are vulnerable in hospital or in residential care. You will spread the illness.
- Keep the environment clean and safe. Let's work together to keep it that way. Prevention is better than cure.

Your doctor / member of the breast imaging team have advised you to have an X-ray (stereotactic) guided vacuum-assisted excision (VAE). This leaflet has been written to help you understand what the procedure involves.

What is an X-ray (stereotactic) guided vacuum-assisted excision (VAE)?

An x-ray guided (stereotactic) vacuum-assisted excision removes an abnormality seen in your breast on your mammograms using a needle attached to a vacuum (suctioning) device. The abnormality will then be analysed in the laboratory to see what it is.

The procedure uses X-rays to locate the abnormality within your breast which is to be removed.

What are the benefits of having the procedure?

- Your doctor / member of the breast imaging team will discuss the benefits with you prior to undertaking the procedure.
- An abnormality has shown on your mammogram (X-ray of your breasts) and a sample of tissue will have already been taken using a standard biopsy procedure. Your doctor will recommend a vacuum-assisted excision if the abnormality previously biopsied needs to be removed for further examination or if you have requested removal of the abnormality.
- In the past all breast abnormalities requiring removal would have been removed by open surgery which requires hospital admission, a general anaesthetic (you would be asleep) and an incision (cut) in the breast. A vacuum-assisted excision (VAE) is less invasive than surgical removal of the abnormality as it is performed as an outpatient, under local anaesthetic instead of general anaesthetic. This reduces your recovery time and you will not have to stay in hospital overnight. Scarring to the breast is also reduced with a vacuum-assisted excision (VAE) when compared with surgical excision as the incision required is much smaller.

What are the risks of the procedure?

- X-rays (mammograms) are required during and after the procedure. There are some risks involved with the use of X-rays. The overriding concern of your doctor and Radiology is to ensure that when radiation is used the benefits from making the right diagnosis outweigh any small risk involved.
- X-rays can very rarely cause cancer. According to the National Breast Screening Programme having a mammogram every 3 years for 20 years can very slightly increase the chance of getting cancer over a woman's lifetime.
- Radiologists / Radiographers who perform the examination are trained to ensure that the radiation dose associated with the examination is always kept to a minimum.
- A small amount of bleeding may occur at the excision site, and bruising to the breast is common. Sometimes the bruise may make your breast feel lumpy.
- **If you are on any blood thinning medication please contact the Radiology Department straight away.**
- Infection at the excision site is rare but a possibility.
- Sometimes the abnormality may not be completely excised (removed). This may mean that you will require surgery at a later date. Occasionally a woman might be found to have cancer after having an abnormality removed despite a previous biopsy showing no signs of cancer. If this is the case then a nurse or doctor will discuss this with you.

What will I need to do before the procedure?

- Please bring with you a list of your medication (we will need to know about certain medications before this procedure)
- You will be asked to remove the clothing from the top half of your body, including your bra, and wear a hospital gown. It is easier to wear a skirt or trousers instead of a dress for your appointment. You are welcome to bring your own dressing gown to your appointment.

- The specialist undertaking the procedure (or someone trained to take consent) will explain the procedure to you and you will have the opportunity to ask questions.
- The specialist will also check some details with you including certain medications.
- We must seek your consent for any procedure or treatment beforehand. The specialist undertaking the procedure (or professional trained to take consent) will explain the risks, benefits and alternatives where relevant before they ask for your consent. If you are unsure about any aspect of the procedure or treatment proposed please do not hesitate to ask for more information.

How long will I be at the hospital for?

Please expect to be in the hospital for at least 45 minutes.

What will happen during the procedure?

- You will be taken into the X-ray room and asked to sit on a chair. Sometimes the procedure has to be undertaken with you lying down; this depends upon the position of the abnormality within your breast.
- The radiographer will position your breast into the X-ray machine and the breast will be compressed (squashed) so that you are kept still and a clear X-ray can be taken. The compression stays on the breast during the whole procedure, which usually takes around 15 minutes.
- X-rays are taken to target the abnormality within your breast, sometimes your breast may need to be repositioned in the machine to get the abnormality in the best position for the procedure to take place.
- A local anaesthetic will be given by injection through the skin into the breast to numb the area around where the tissue needs to be taken from. The specialist will ensure that the area is numb before proceeding.
- A small cut is made in the skin.

- The vacuum-assisted needle is placed into the breast at the targeted abnormality.
- Once in position, the needle stays in your breast while the abnormality is removed.
- Small amounts of tissue are cut and sucked away using the needle, and this is repeated until the abnormality has gone.
- When the abnormality is being removed you will hear a 'whirring' noise.
- The specialist undertaking the procedure will use the X-rays to monitor the procedure.
- The specialist may insert a breast marker clip following the procedure. If this is required then the specialist will discuss this and give you a separate patient information leaflet.
- You can choose to stop the procedure at any point during the procedure but this may mean that the abnormality is not completely removed.
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What will happen after the procedure?

- The radiographer will press on the area of the breast where the abnormality has been excised (removed) for a couple of minutes to help stop bleeding and minimise bruising.
- The radiographer or specialist will apply a small dressing to the site of the excision, this may or may not include the use of a Steri-Strip (wound closure strips).
- In some cases mammograms (X-rays of the breasts) may be required following the procedure; the specialist will explain this if it is required.
- You will then be able to get dressed.
- Arrangements will be made as to how you will get the results of the biopsy.

What is the aftercare advice?

Most women feel some discomfort and experience bruising to the breast following the procedure. If your breasts feel tender following the examination please take over the counter painkillers, such as paracetamol as per the instructions on the packet. Avoid products containing aspirin.

It is recommended to avoid heavy lifting for 48 hours following the procedure. Lifting small babies, less than one year old is not considered heavy lifting.

The dressing can be removed after 24 hours; you do not need to reapply another dressing. Keep the site clean and dry.

Your bra can be worn (including underwired) as normal following the procedure to provide support to the breast.

Will it be painful?

Some patients experience discomfort or pain when the compression is applied during the procedure and when the local anaesthetic is given. The local anaesthetic used works quickly and the area will go numb.

Some patients experience aching and discomfort of the breast following the procedure, once the local anaesthetic wears off.

Are there any alternatives to an X-ray (stereotactic) guided vacuum-assisted excision?

An alternative to the procedure is to remove the abnormal area surgically, but this involves coming into hospital for the day, a general anaesthetic and will leave a surgical scar. Alternatively you could decide to not have the procedure done at all, however this would mean that a diagnosis may never be made (we may not be able to find out exactly what the abnormality is).

Can I go back to work?

Yes, you can however it is recommended to avoid heavy lifting activities. Carrying small babies, less than a year old is not considered heavy lifting. In our experience discomfort felt post procedure is minor and does not impact on normal routine activities such as driving.

What follow up should I expect?

Your doctor / member of the breast imaging team will discuss how you will get the results of the biopsy with you.

What to do if the appointment is not suitable?

We are happy to change your appointment; however please be aware that certain sessions within the week will not be available due to different clinics being supported by Breast Imaging. You can contact us on **01902 695923**. This is a direct line; you will not need to go through switchboard.

If you are unable to attend your appointment please let us know as soon as possible so that the appointment can be given to another patient.

Whom can I speak to if I want to ask questions before I come for my X-ray (stereotactic) guided vacuum-assisted excision?

The breast care nurses can be contacted on **01902 695144** during office hours of 8.30am and 4pm. There is a 24 hour answer machine on this line and if the breast care nurses are unavailable then please leave your name and telephone number and someone will return your call as soon as possible.

Alternatively if you would like to speak to a radiographer about the examination please call **01902 695923** during office hours of 8.30am and 5pm.

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowałiby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。