

Ultrasound guided vacuum assisted biopsy (VAB) of the breast

This leaflet outlines what to expect during an ultrasound guided vacuum assisted breast biopsy. If you have any questions about the procedure, please speak to your breast screening specialist nurse.

What is ultrasound guided VAB of the breast?

An ultrasound guided VAB uses ultrasound equipment to help locate an area of concern in the breast. As the result of your previous biopsy not being satisfactory, a VAB biopsy is taken to obtain a bigger tissue sample from the breast for further investigation in the laboratory to obtain a definitive answer.

Also VAB can be used in some areas that may be difficult to diagnose and where a biopsy would otherwise be removed under a general anaesthetic.

What are the benefits?

- No admission to hospital
- No general anaesthetic
- Smaller incision
- The risks and recovery from a general anaesthetic will be shorter as VAB only requires a local anaesthetic.

What are the risks?

Please note complications from this procedure are rare. However, the risks include:

- Internal bruising (haematoma) in the breast following the procedure. We try and minimise internal bruising by placing firm pressure on the breast immediately after the biopsy and apply a pressure bandage.
- Bleeding from the wound site. Rarely, the biopsy site can start to bleed after you have left the unit. We will give you instructions on what to do if this happens later in this leaflet.
- Infection of the wound site. The wound will be covered with a sterile dressing after the procedure and we will advise you how to look after the area to minimise the risk of infection.

How can I prepare for the procedure?

- You can eat and drink normally before and after the procedure.
- Medication – Please let us know if you are taking any antiplatelet medicines (for example, Aspirin, Clopidogrel) or any medicines that thin your blood (for example, Warfarin) as we may need to perform an INR test beforehand (this determines how long it takes your blood to clot).
- Please tell us all medications that you are taking.
- Please tell us if there is any possibility that you may be pregnant.

- If you are allergic to any medication, particularly local anaesthetic, please contact us as soon as possible for further information.
- Relatives and escorts –A friend or relative must accompany you home; please note, they will not be allowed into the examination room.
- Driving – We recommend that you do not drive for the rest of the day. We also recommend that you do not use public transport after your procedure.
- If possible, please arrange time off work on the day of the procedure.
- You will be in our department for approximately one and a half hours.

What happens during the procedure?

- The procedure takes place in the ultrasound room and you will be awake for the entire test, which normally lasts approximately 30 minutes. The procedure will be performed by a specially trained radiologist/advanced practitioner.
- You will be asked to undress to the waist. A radiographer will position you next to the ultrasound machine, lying down on a couch depending on the location of the area of abnormality in the breast.
- Ultrasound images will be taken to check the correct area has been located and local anaesthetic will then be used to numb the specific part of the breast.
- Once the area is numb, a needle will be advanced into the breast and several tissue samples will be taken using a vacuum biopsy system. A needle will make a small cut in the skin and in most cases is inserted only once into the breast. A vacuum is then used to remove the breast tissue sample.
- The needle we use to take the biopsy tissue makes a small whirring noise and suction but most patients report that this does not cause them any particular discomfort.
- The sample will then be sent to the pathology lab for testing.

Will I feel any pain?

The local anaesthetic may cause stinging before it numbs the breast but this should only last for a few seconds. You may feel some pressure on the breast during the procedure but should not feel any pain. If you do feel pain tell the radiologist/radiographer and more local anaesthetic will be introduced to the breast.

What happens after the procedure?

Immediately after the procedure, we will apply firm pressure to the breast for 10 minutes. This will help to minimise the risk of developing internal bruising in the breast (haematoma). A paper stitch (steristrip) and a sterile dressing will be placed over the small cut in the skin and a pressure bandage will also be applied. Once you are dressed we will move you to another area within the department where you will stay for about 30 minutes until we are sure you feel comfortable enough to leave the department.

What do I need to do after I go home?

We recommend that for the rest of the day you rest as much as possible. For two days following the procedure, strenuous activities such as heavy lifting, running or going to the gym should be avoided but normal day to day activities can be resumed. If your work is physical then we advise you to carry out light duties the following day. The anaesthetic will wear off after two to three hours. If you then find your breast uncomfortable or painful, take a mild painkiller such as paracetamol or ibuprofen. Avoid taking aspirin, as this may cause extra bruising to develop in the breast.

You will be left with a tiny scar on the skin at the site of the biopsy. Rarely, the biopsy site can start to bleed after you have gone home. If this happens, apply pressure to the breast over the biopsy site for 15 minutes in the same way as was done after the biopsy. If the bleeding continues after this, please continue to apply pressure to the area and contact your GP or local hospital emergency department.

When will I receive my results?

The results are not available immediately after the procedure. The tissue samples collected will be sent to the lab for analysis. We will make you an appointment to discuss your results in a week to 10 days.

Will I have to give consent?

It is important that you understand what will happen during the procedure and how it might help you. You have the right to change your mind at any time before the procedure is undertaken, including after you have signed the form. The decision is yours, but we only recommend that you have a breast biopsy when it is essential to confirm the diagnosis of the problem.

More information

If there are any problems or queries please contact Carolyn Denham, Breast Screening Clinical Nurse Specialist on 0118 322 8563. Out of normal working hours, please contact your GP.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

C Denham, Breast Screening CNS, June 2022

Next review due: June 2024