Midlands Family Medicine



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Education

Needle Biopsy of the Breast

What is a needle biopsy of the breast?

A needle biopsy of the breast is a way to remove cells or a sample of tissue from a lump or tumor for testing. There are 2 types of needle biopsy: fine needle aspiration and core biopsy.

- When a fine needle aspiration is done, a needle is inserted through your skin into the lump or area of concern to remove a sample of cells. The cells are placed on a slide and examined by the pathologist.
- For a core biopsy, a larger needle is used to remove a tubelike sample of tissue, about the size of a pencil lead, for the pathologist to examine.

Your health care provider may do either of these procedures in the office setting. Or the biopsy may be done at a clinic or hospital by another specialist.

When is it used?

Your health care provider will probably do a breast biopsy if:

- You have a lump in your breast that can be felt and your provider thinks it could be cancer.
- You have an ultrasound scan that shows a possible tumor.
- Your mammogram shows an abnormal area.
- One of your nipples has an abnormality, such as crusting, sores, dimpling of the skin, or bleeding.

Examples of other ways to test a lump or other abnormal tissue are:

- excisional biopsy (having surgery to cut out the entire lump), also called a lumpectomy
- incisional biopsy (cutting out part of the lump).

You can also choose not to have a biopsy, recognizing the risks of not knowing if a lump is cancer. You should ask your health care provider about these choices.

How do I prepare for a needle biopsy?

Ask your provider if you need to avoid taking aspirin, ibuprofen, or naproxen for a week before the procedure.

Ask your health care provider when and how you will learn about the results.

What happens during the procedure?

The biopsy can be done in your health care provider's office.

Your provider will give you a local anesthetic. The anesthetic numbs just the area where the needle will be inserted. It should keep you from feeling pain during the biopsy.

If your provider cannot feel the lump but it can be seen with x-rays or CT (computed tomography), your provider may arrange for a radiologist to do the needle biopsy. In this case, the procedure will be done in the radiology department or mammography center using x-rays (such as a mammogram), CT, or ultrasound scanning to find the exact location of the tumor. This will make the test more accurate.

A needle will be inserted into your breast to take 3 or 4 samples of the tissue. Your provider will remove the needle and send the samples to the lab for testing. You may have a small bandage placed over the site where the needle punctured your skin.

What happens after the procedure?

You can go home the same day. You may have some swelling or bruising in the area of the biopsy.

In about 2 days, the lab will complete its testing on the lump and your health care provider will know whether the lump is benign or cancerous.

Ask your provider what other steps you should take and when you need to come back for a checkup.

What are the benefits of this procedure?

This biopsy will help your health care provider know more about the lump. He or she can then recommend further treatment if necessary.

What are the risks associated with this procedure?

- The local anesthetic may not numb the area quite enough and you may feel some minor discomfort. Also, in rare cases, you may have an allergic reaction to the drug used in this type of anesthesia.
- A very small scar will form at the puncture site.
- You may have infection and bleeding at the site of the puncture; however, this risk is uncommon.

You should ask your health care provider how these risks apply to you.

When should I call my health care provider?

Call your provider right away if:

- You have a fever of 100°F (37.8°C) or higher.
- You have a lot of redness, pain, or drainage from the puncture site.

Call during office hours if:

- You have questions about the procedure or its result.
- You want to make another appointment.

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