

PERCUTANEOUS FNA(FINE NEEDLE ASPIRATION)/ CORE BIOPSY OF BREAST LESION

Information for patients

Introduction

- Fine needle aspiration (FNA) and core biopsy are medical procedures performed to identify the nature of masses or microcalcifications in the breasts. During FNA, a very fine needle is inserted into the abnormal area in the breast under mammographic or sonographic imaging guidance to aspirate tissue sample for cytological analysis.
- For core biopsy, a small cut will be made in the skin and a special biopsy needle is used to obtain tissue for histological analysis.
- This procedure will be performed by radiologists with special training in interventional breast imaging. The procedure will generally be performed in the Department of Radiology under ultrasound or stereotactic X-ray guidance.

Procedure

- Old films & reports are important for your doctor to make reference. It is important to bring them back.
- If you are taking aspirin or any other anti-coagulants, please ask your doctor's advice to stop these drugs before proceeding.
- The procedure will be performed under aseptic technique with or without local anaesthetic on outpatient basis.
- Under which modality the lesion will be biopsied or the choice of the needle used depends on the nature, size and shape of the lesion.
- Duration of the procedure varies, depending on the complexity of the condition. It may take only 15 minutes, though for the more complicated cases the duration may be over 90 minutes.
- Do not expect to get the result of the core biopsy / FNA before you leave, as it may take a few days to do all the necessary tests on the specimen.

Potential Complications

- Minor bruising around biopsy site: common.
- Big blood clot formation: uncommon.
- Big blood clot requiring surgical drainage: 0.1%.
- Infection requiring drainage and/or antibiotic treatment: 0.1%.
- Scar formation: uncommon for FNA. For core biopsy, the size of the scar may vary.
- Possible tumour seeding: reported but very rare. 0.005% for FNA.
- Pneumothorax (under ultrasound guidance): 0.01%.
- Unfortunately not all core biopsies/FNAs are successful. They are subject to sampling error. The tissue samples obtained may be inadequate for diagnosis. For some pathological diagnoses, excision biopsy is the appropriate next step of management. In such circumstances, the core biopsy / FNA may have to be repeated or excision biopsy may have to be performed.

- Despite these potential complications, percutaneous breast core biopsy / FNA is usually very safe and is designed to save you from having excision biopsy which is more invasive. A positive diagnosis can help you to get the appropriate treatment. Common complications are minor and severe complications are very rare.

Aftercare

- For FNA, a small dressing may be applied and can be discarded within one day. Many patients can resume their normal life and work on the same day of the FNA procedure.
- For core needle biopsy, the incision wound will be bandaged by steri-strip. Please keep the wound dry and clean for 2-3 days and the bandage can be discarded afterwards. Strenuous exercise should be avoided for 24 hours. Otherwise normal activity can be resumed.
- If you suspect a large hematoma or infection of your wound, please contact the corresponding breast center or consult a doctor immediately.

Disclaimer

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