

Patient information leaflet

Stereotactic vacuum assisted biopsy or excision (VAB/VAE) of a breast lesion.

Radiology department

Introduction

We hope this guide will answer your questions about your stereotactic vacuum assisted biopsy or excision (VAB/VAE) of a breast lesion. Please contact the team if you require further information via the details at the end of this leaflet.

What is a VAB/VAE?

It is a procedure where mammogram x-ray equipment is used to help locate an area in the breast and a biopsy (tissue sample) is taken from the breast using a special needle attached to a vacuum device.

Why do I need a VAB/VAE?

Your recent mammogram has shown an area of abnormality in the breast, usually an area of microcalcifications (tiny calcium/chalky deposits) or tissue distortion that cannot be felt or seen with ultrasound that needs to be investigated further. This procedure will help to make a diagnosis.

In some cases, more tissue is required following a previous vacuum biopsy, and a more extensive procedure is performed either to help make a diagnosis, or sometimes to remove the area. This is called a vacuum-assisted excision (VAE), and is done instead of an operation, giving a smaller scar.

Will I need an Injection?

An injection of local anaesthesia is given prior to the biopsy into the affected breast.

What are the associated risks?

Significant complications from VAB/VAE are uncommon. However, as with any procedure, there are some risks associated with it. These include:

Bruising (haematoma) in the breast following the procedure: The amount of bruising after this procedure varies widely. We try to minimise bruising by the use of suction during the procedure and also by placing firm pressure on the breast immediately after the biopsy. This bruising may take several weeks to disappear.

Infection of the wound site: The wound will be covered with a sterile dressing after the procedure and we will advise how to look after the area and what to do if infection is suspected.

Pain: Local anaesthesia is used for the procedure but the wound site can become painful after the anaesthesia wears off later in the day. Taking paracetamol after the procedure should help minimise this.

Change in breast shape: as we are removing a small area of tissue in the breast, there may be a dent/distortion in the breast at the site. This usually resolves as the body fills the space, but can leave a permanent indentation.

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X-ray radiation: All x-ray procedures involve exposure to radiation in varying amounts. The dose you get from a mammogram is very low and your doctor has determined that the benefits of having the examination outweigh potential risks.

The radiographer is present throughout your test making sure that the dose is kept as low as reasonably possible and the duration and level of x-rays are kept to a minimum.

Pregnancy: If you are pregnant, think you may be pregnant, or are breastfeeding, please inform the department **before** your appointment date, as we may need to postpone the scan or give special instructions with regard to breastfeeding.

Preparing for your procedure

You can eat and drink normally before and after the procedure.

On the day of your appointment, please do not wear deodorant, powder, lotion or perfume on your breasts and underarm areas as these products may show up on the mammogram images.

Bring with you a comfortable fitting bra to wear after the procedure.

Please leave any jewellery or valuables at home.

Please contact the booking team before your appointment if:

- you are or think you may be pregnant
- If you are taking blood thinning medication
- If you have problems standing or need a hoist to transfer
- If you require an interpreter – please inform us as soon as you receive your appointment letter, and we will arrange an interpreter for you.

If you are unsure or have questions about your preparation, contact your doctor or the Breast Screening department for advice.

Medication

Please let us know if you are taking any ‘blood-thinning’ medicines, either antiplatelet medicines (for example aspirin or clopidogrel) or anti-coagulant medicines (for example warfarin or rivaroxaban), by calling the breast care nurses on 01279 827301 for advice as soon as you get your appointment, as these may need to be stopped temporarily before the procedure.

If you are allergic to any medicines but particularly to local anaesthetic, please contact us as soon as possible after receiving your appointment letter.

Getting to us

When attending St. Margaret’s Hospital (The Plain, Epping, Essex, CM16 6TN), follow the signage to the breast screening department which is located in Birchwood House. Please let the receptionists know that you have arrived for your appointment.

When should I arrive?

Please arrive in the breast screening department at your given appointment time. A notification through text or letter should have been sent to you to confirm this appointment.

Can someone stay with me in hospital?

If possible, please bring a friend or relative to accompany you home. This may also be useful if you do not understand English very well or if you have any special needs. However, please note that they will not be allowed into the examination room.

Children are not allowed in the waiting area unattended. Our staff are not permitted to supervise children, so please ensure child care arrangements are in place to avoid your tests being rescheduled.

The day of the procedure

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

The procedure

The procedure takes place in the mammography room and you will be awake for the entire test, which normally lasts about 45 minutes. A specially trained radiologist / radiographer will perform it.

You will be asked to undress to the waist. A radiographer will position you in the mammogram machine either sitting or lying down on a couch, depending on the location of the abnormality in the breast.

Mammogram images will be taken to check that the correct area has been located and local anaesthetic will then be injected to numb the specific part of the breast. This stings for a few seconds initially, but the rest of the procedure should be painless.

Once the area is numb, a needle will be inserted into the breast through a small cut in the skin. In most cases it is inserted only once into the breast, unless we have told you that we would like to sample two areas. Whilst in the breast, the needle will take multiple small samples using a vacuum biopsy system, which makes a noise like a sewing machine.

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 can be used.

When enough samples have been taken, a tiny gel/metal marker clip will be introduced into the breast to mark the area where the samples were taken from. This should be a painless procedure. The marker is harmless (it will stay in the breast and cause no discomfort) and is necessary because it marks the area of concern and can be easily seen on mammogram films. The marker clip will not be picked up on airport security detectors.

At the end of the procedure, we will apply firm pressure to the breast for a few minutes. This will help to minimise the risk of developing bruising in the breast (haematoma). Paper stitches (steristrips) and a sterile dressing will be placed over the small cut in the skin and, on some occasions, a pressure bandage will also be applied.

Once you are dressed, we will ask you to stay in the department for about 30 minutes to make sure that you feel comfortable enough to go home. We can make you a hot drink so please ask us if you would like one.

After the procedure

You should take it easy and rest as much as possible for the remaining part of the day.

Please avoid any strenuous activities, such as heavy lifting, running or going to the gym for the following two days, but you can start your usual day-to-day activities.

If your work is physical, we advise that you only carry out light duties the following day.

Some women find it more comfortable to wear a bra following the procedure. If you don't normally wear a bra, please bring a soft, non-wired bra (such as a sports bra) with you to wear after the procedure and for the following few days. If possible, please arrange time off

work on the day of the procedure. You should expect to be in our department for about two hours.

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 these may cause extra bruising in the breast. If particularly uncomfortable placing an icepack on the breast (but not directly on the skin) for 10 minute intervals may be of help.

If you have a large pressure dressing, this can be removed after 24 hours. The waterproof dressing should be left in place for two to three days, by which time the wound should have closed. The paper stitches underneath can be removed after a further two days.

Do not worry if you develop bruising around the biopsy site or feel a lump over the next few days, this is quite normal and will go down on its own.

Pain and discomfort usually subsides after one week. If you are experiencing pain for longer than one week or are concerned, then please contact the breast care nurses on the number at the end of the leaflet.

You will be left with a permanent tiny scar on the skin (about the size of a freckle) 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 straight after the biopsy. If the bleeding continues after this time, please continue to apply pressure to the area and contact the breast care nurses on the number below, your GP, or go to your local A&E department if out of-hours.

Can I drive after my procedure?

You may drive after your procedure unless specifically advised otherwise.

How soon can I return to work?

It is advisable you can return to work the following day after your scan, however if your work is physical, we advise that you only carry out light duties the following day.

When will I get my results?

You will not know the results of your examination immediately. The tissue sample taken at the biopsy is sent to the laboratory for testing. This can take up to two weeks and we will send you an appointment to discuss the results

Contacting the team

If you have any further questions about your procedure or an existing appointment, please contact the breast unit (**Monday to Friday, 8am to 5pm**) on **01279 827046**

If you have any queries **outside of working hours (after 5pm and on weekends)** please leave a message.

If you have any concerns on your return home, please contact the breast care nurses on **01279 827301** for advice.

Your feedback matters

If you would like to give feedback on your care, please contact our patient experience team on paht.pals@nhs.net or 01279 827211.

Please contact the communications team on paht.communications@nhs.net if you would like this leaflet in another language or format.