



Breast Core Biopsy

*Authors: Dr Michelle Bennett**

*A/Prof Liz Wylie**

What is a breast core biopsy?

A breast core biopsy is where a special needle (or probe) is inserted into the breast to take a small sample of breast tissue from an area of concern so that it can be sent to a laboratory for testing. It is done using local anaesthetic to numb the breast in the area that is being biopsied. An abnormality may have been identified on a scan or X-ray image or may have been felt as a lump.

If the abnormality in the breast can not be felt as a lump, the radiologist or other specialist doctor performing the biopsy will insert the needle (or probe) using guidance from **ultrasound** or **mammogram** images or pictures. This ensures the tissue sample is taken from the area where the abnormality has been identified.

How do I prepare for a breast core biopsy?

Generally no preparation is needed. You should bring any recent breast imaging (mammograms and/or ultrasounds) and reports for the doctor performing the procedure to review before doing the biopsy.

Do not wear talcum powder or deodorant on the day of the biopsy as these can mimic or imitate calcium spots in the breast which makes it harder for the radiologist to identify the abnormality that requires biopsy. You might consider the clothes you wear on the day so you only need to remove clothes from the upper part of your body.

What happens during a breast core biopsy?

The skin of the breast is washed with antiseptic and then a very fine needle is used to give local anaesthetic to numb the breast in the area for biopsy. The local anaesthetic stings for only a few seconds when it is being given, and after this the area will be numb.

A small nick or cut is made in the skin and the biopsy needle is gently inserted into the breast. Several samples are taken. When each sample is taken there is a clicking noise, and you may have a feeling of pressure in the breast where the sample is taken. The biopsy procedure may sometimes feel uncomfortable but is not usually painful because of the local anaesthetic that has been given.

After the samples have been taken, the biopsy area will be pressed on firmly for a few minutes to reduce bruising and bleeding, and then covered with a dressing.

Are there any after effects of a breast core biopsy?

The area that has been biopsied may feel a little tender for several days and there is usually some bruising. If the biopsy area is painful you can take paracetamol. Aspirin is not recommended because it thins the blood and can increase bruising or bleeding at the biopsy site. You should avoid vigorous physical exercise or heavy lifting for 24 hours after the procedure as this may make the bruising worse.

The small nick or cut that was made for the biopsy usually heals over in a few days and you will have a tiny scar less than 5mm in size that will be barely visible once healed.

How long does a breast core biopsy take?

The time taken for the procedure varies according to how the biopsy is done. For example, an ultrasound guided core biopsy may take only 20 minutes. A mammographic guided core biopsy (also called a "stereotactic") may take up to an hour.

What are the risks of a breast core biopsy?

You will usually have some bruising at the biopsy site and sometimes this may take several weeks to disappear.

There is a very small risk of infection. In the very unlikely event that the biopsy site becomes infected, a course of antibiotics may be required from your doctor.

Contact your doctor if you experience excessive swelling, bleeding, have fluid draining from the wound, redness or heat in the breast after the biopsy.

Doing a biopsy of tissue, especially if it is located deep within the breast, carries a slight risk that the needle (or probe) will pass through the chest wall, allowing air around the lung that could collapse a lung. This complication is a rare occurrence and is called a pneumothorax.

What are the benefits of a breast core biopsy?

If there is an area of concern in your breast, the core biopsy will be used to take samples of this area so that a pathologist (a specialist doctor trained in diagnosing biopsies) can examine it and make a diagnosis. It is a way of getting accurate information without needing an operation to surgically remove the tissue for testing.

Who does the breast core biopsy?

A breast core biopsy is usually performed by an experienced specialist doctor such as a radiologist, breast surgeon, breast physician or pathologist. If the area of concern cannot be felt as a lump then the core biopsy is done using ultrasound or mammography to guide the biopsy needle into the correct position.

Where is a breast core biopsy done?

This will depend on the specialist doctor doing the test. Most core biopsies of the breast are done by a radiologist using ultrasound or mammographic guidance and so are done in a hospital radiology department, breast clinic or private radiology practice.

When can I expect the results of my breast core biopsy?

The samples are sent to a pathologist and are examined under a microscope. The pathologist provides a detailed report which is sent to the doctor who has requested your core biopsy (this could be your family doctor, a breast surgeon or a breast physician). Usually your doctor will already have made arrangements to discuss the results with you. The pathology results are usually available and sent to your doctor within a few days.

Further information about breast core biopsy:

Sometimes the area of concern in the breast is very tiny, particularly in the case of calcifications (deposits of calcium in the breast tissue) that show as white spots on the mammogram. In this situation, there is a very small chance that the tissue taken for biopsy may not contain the calcifications, even when the biopsy is done by someone very experienced. If this happens, a repeat biopsy may be recommended.

Useful websites about breast core biopsy:

Virtual Cancer Centre

www.myvmc.com/investigations/core-biopsy/

**The author has no conflict of interest with this topic.*

Page last modified on 11/10/2017.

Related articles

RANZCR® is not aware that any person intends to act or rely upon the opinions, advices or information contained in this publication or of the manner in which it might be possible to do so. It issues no invitation to any person to act or rely upon such opinions, advices or information or any of them and it accepts no responsibility for any of them.

RANZCR® intends by this statement to exclude liability for any such opinions, advices or information. The content of this publication is not intended as a substitute for medical advice. It is designed to support, not replace, the relationship that exists between a patient and his/her doctor. Some of the tests and procedures included in this publication may not be available at all radiology providers.

RANZCR® recommends that any specific questions regarding any procedure be discussed with a person's family doctor or medical specialist. Whilst every effort is made to ensure the accuracy of the information contained in this publication, RANZCR®, its Board, officers and employees assume no responsibility for its content, use, or interpretation. Each person should rely on their own inquires before making decisions that touch their own interests.