

Vacuum Assisted Excision (VAE) of the Breast

This leaflet provides you with information about a vacuum assisted breast excision, including the risks and what to expect. It should help you to prepare for one by providing you with details about this procedure.

Why do I need a VAE and what does it involve?

As you know, your recent breast biopsy did not show any cancer cells. This was discussed at the breast team meeting where it was agreed to offer you a VAE as well. This will ensure that all parts of the lesion (abnormal area), have been sampled thoroughly.

The VAE will be performed under ultrasound or x-ray guidance, depending on how well the lesion was seen at your first biopsy. The appropriate method will be discussed with you before the procedure.

The VAE removes small samples of tissue from your breast. These will be taken from the same lesion in your breast which would have been seen on your mammogram or ultrasound, and then biopsied. The samples are examined by a pathologist who should have enough tissue to make a final diagnosis.

What are the benefits of VAE?

- Allow wider sampling of your breast lesion to make sure there is nothing suspicious
- Less invasive than surgical removal
- Less scarring than surgical removal
- Usually tolerated better than surgical removal because local anaestheticis used instead of general anaesthetic
- An outpatient procedure usually takes about an hour compared with admission for a day needed for surgical removal under general anaesthetic.

What are the risks?

COMMON

• **Internal bruising** (haematoma) in the breast and bleeding at the wound site can occur. This usually gets better without any additional treatment. Please inform us if you are taking anticoagulant (blood thinning) medication because bruising will be more likely to

- occur. Occasionally you may need to adjust this medication before the procedure but this will be discussed with you when the VAE is booked.
- Pain The local anaesthetic will wear off after a few hours and you may feel some soreness. A mild painkiller, such as paracetamol may be taken.

RARE

- Infection is very unusual but may require antibiotics. We use sterile equipment to
 minimise this risk and will provide you with appropriate aftercare guidance. If the skin
 around the wound becomes reddened and sore, please make an appointment to see
 your GP.
- Skin changes rarely the procedure may cause a small tear in the skin separate to the
 entry point of the biopsy needle. If this occurs, steri-strip plasters will be used to repair
 the tear or, in some cases a small suture (stitch) will be needed. This may result in a
 slightly larger scar. Occasionally the contour of the breast may appear slightly different
 after the biopsy with possible pulling in of the tissue.
- **Severe internal bruising (haematoma)** internal bleeding may cause your breast to swell and occasionally admittance into hospital and surgery is required to manage it.
- Allergic reactions can be caused by local anaesthetic but are very rare.
- Failure to obtain a sample occasionally not enough tissue is obtained. This may be
 due to the size of the lesion, intolerance to the procedure, challenging location of the
 lesion in the breast or equipment failure.

What happens during the VAE?

Before your appointment, your surgeon will have asked you for your written consent (or "econsent"). The procedure will be performed by a suitably qualified Doctor or Radiographer who will be assisted by radiographers or support workers. They will explain the procedure to you in more detail and again confirm that you are happy to proceed.

If using x-ray guidance, either you will be sitting up or lying down on your side and positioned in the machine by the radiographer. Compression will be applied to hold the breast in place, like when you have a mammogram.

Once the area of abnormality has been located, your skin will be cleaned with antiseptic fluid. Local anaesthetic will be used to numb the area which may sting for a few seconds.

The sampling needle will be inserted into your breast; this is attached to a medical vacuum which uses gentle suction to allow sampling of the breast tissue. You will hear the machine working as samples are taken. It is very important that you remain still during the procedure which may take up to 45 minutes.



During the procedure you should not feel anything sharp or painful although it is not unusual to feel 'pushing sensations'. Please let us know if you are finding it painful and we will give you more local anaesthetic.

If using ultrasound guidance, you will be lying on a couch in the ultrasound room. The procedure is the same as described above but without the need for positioning in the x-ray machine.

Can I bring a relative or a friend with me?

Yes, please feel free to bring a friend or relative with you whilst you wait. They may come into the ultrasound room if you would like them to join you and they are happy to do so. However, they will not be allowed into the room for the actual procedure if performed under x-ray guidance.

What is a marker clip?

Often it is necessary to mark where the biopsy is taken. This is done by inserting a tiny metal clip into the lesion after the biopsy. A mammogram will be taken following the marker insertion to view its location within the breast.

In the unlikely event that further surgery is needed, the clip may be used to locate the area. The clip would then be removed.

If no further action is required, the clip will remain in place in your breast where it will indicate on future mammograms that the area has been fully investigated. You will not be able to feel the marker and it does not cause side effects or problems with MRI scanners or airport/metal detectors.

What happens after the procedure?

Firm pressure is applied to the breast to reduce bruising. Steri-strip plasters are used to close the very small cut in your skin and a dressing is applied. This should stay on for approximately 72 hours. During this time, please avoid strenuous activity, such as lifting, heavy housework or sports. It may help to wear a soft sports bra for 24- 48 hours afterwards. After the procedure you should receive another leaflet about care of the small wound and dressing.

How will I get the result of the VAE?

Before you leave the clinic you will be given a date for an appointment at which you will get the results of the excision biopsy. It is usually within one or two weeks.

Please note that very occasionally not enough tissue is sampled, or an uncertain result is found, and further surgery may be necessary – this will be discussed with you at the results appointment.

Who should I contact if I have any more questions or concerns?

If you have any queries please do not hesitate to contact a member of the breast unit radiographer team on: 01225 825885

Available: Monday to Friday 9am – 5pm (excluding bank holidays)

Royal United Hospitals Bath NHS Foundation Trust Combe Park, Bath, BA1 3NG

01225 428331 | www.ruh.nhs.uk

If you would like this leaflet in email form, large print, braille or another language, please contact the Patient Support and Complaints team on 01225 825656.

Date of publication: September 2024 | Ref: RUH BRU/034 © Royal United Hospitals Bath NHS Foundation Trust

