SANFORD Edith Sanford BREAST CENTER

About Breast Biopsy

This is a procedure where a sample of tissue is taken from your breast and sent to a lab. A pathologist (a doctor who works in a lab) looks at the sample to see if the tissue is benign (be-nine), cancerous (malignant – mah-lig-nunt), or atypical (a high risk for cancer). The more you know about your biopsy, the better prepared you will be to make important decisions about it.

If my radiologist says I need a biopsy, does that mean I have cancer?

Many women have at least one abnormal change in their breast tissue in their lifetime that requires a biopsy. Most are harmless changes in the breast. About 8 out of 10 biopsies are benign, meaning there is no cancer present. But, sometimes the change is cancerous. When this is the case, finding and treating it early gives you the best chance for a healthy future. A biopsy can give you peace of mind. It is the only way to tell for sure if the breast condition is cancer or not.

Types of biopsies

The 2 main types of biopsies are core needle biopsy (which is usually done with image guidance by a radiologist) and surgical biopsy (which is done by a surgeon).

	Core Needle	Surgical Biopsy
Description	Tissue samples are removed with a biopsy device. Depending on the device, it may take several samples at one time or may need to be inserted more than once.	A cut is made in the breast to remove all of the area of concern. This is sometimes called a lumpectomy.
Accuracy	Very accurate	Very accurate
Scarring	Minimally invasive with only a small incision needed– no stitches	More invasive, can change: • The look of the breast due to a scar on the skin • The feel of the breast due to scarring inside the breast • Usually requires stitches
Anesthesia	Local anesthesia: Small area of the breast is numbed with a small needle	General anesthesia (asleep) or local anesthesia (medicine to numb the area) with sedation to make you drowsy
Where Done/ Length of Time	Breast Center/ takes 1 to 2 hours	Operating room or same day surgery/ takes several hours
Considerations	Removes enough tissue samples for the pathologist to evaluate, but is not intended to remove all of the targeted area	There could be more risks with general anesthesia and surgery
Recovery	Back to normal activity in 48 hours	Requires time to heal from surgery

Surgical biopsy

Before a surgical biopsy, the surgeon may do a procedure called needle localization. This procedure is usually done by a radiologist in the Breast Center the same day as the surgery. The breast is numbed with local anesthesia. Using ultrasound or x-ray guidance, a wire is placed through a needle to mark the area of the abnormality in the breast. This wire helps guide the surgeon to the area that needs to be removed. The patient is then taken to surgery.

Imaging guidance

There are different types of needle biopsies or needle localizations. The type that is performed depends on how the abnormality is seen. Sanford Health offers several ways for the radiologist to see an image of the inside of your breast.

	Ultrasound	Stereotactic	Tomosynthesis (3D)	MRI
How done	An ultrasound machine is used to locate the tissue to be biopsied.	A computer is used to map the location using mammograms taken from different angles.	The mammogram x-ray machine rotates around you to take images from many angles. The computer displays the images as thin slices.	Magnetic Resonance Imaging (MRI) is a type of scan that uses a large magnet to make images. You will need a contrast injection.
Position	Lying on your back or side	You may: • Lie on your stomach with your breast through a hole in the table • Sit upright • Lie on your side Your breast will be in compression like during a mammogram.	Sitting upright or lying on your stomach Your breast will be in compression, like during a mammogram.	Lying on your stomach, with one breast through a hole in the table Your breast will be lightly compressed.
Amount of radiation	No radiation	Minimal	Minimal	No radiation
How long to allow for test	About 1 to 2 hours	About 1 to 2 hours	About 1 to 2 hours	About 3 hours

Getting my results

- After a pathologist studies the tissue samples, the results are sent to the radiologist who performed your biopsy. Results are also sent to the doctor who ordered your biopsy.
- The radiologist or your doctor will contact you to talk about the results and any necessary follow-up or further actions that the radiologist recommends.

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