

Vacuum-Assisted Core Biopsy (VAB)

Information and advice for patients

Breast Unit

What is a vacuum-assisted core biopsy?

A vacuum-assisted core biopsy (VAB) involves taking a small sample of breast tissue from an area within your breast. Your doctor may have suggested a VAB after taking an x-ray or having an ultrasound scan, to let us make further checks.

A VAB takes slightly larger samples of tissue than a standard core biopsy (although the samples taken are still quite small). This will allow us to gain more accurate information about your breast tissue and determine whether the tissue is benign or requires surgical treatment.

What are the benefits?

The benefit of this procedure is that it will let us check your breast tissue in greater detail for anything suspicious.

What are the risks?

Common risks include bleeding, bruising and a small scar.

What are the risks of not having the biopsy?

The risk of not having a biopsy is that you could be leaving a cancer undetected, which could have otherwise been detected and treated or removed.

Are there any alternatives to this biopsy?

Alternative procedures to a VAB include an operation to sample the breast tissue or a standard core biopsy. Your doctor will discuss these options in more detail with you.

Preparing for the biopsy

We may ask you to stop taking some medications before the test or come in for a blood test. This is to check that your blood is clotting properly and to minimise the risks of bleeding. We will contact you for this.

During the biopsy

When you arrive at the Breast Unit, you will meet with the consultant who will perform your procedure. He/she will explain the procedure and any risks and give you the chance to ask any questions. Once you are happy with this, the consultant will then proceed with the biopsy.

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The procedure takes place in one of the mammography rooms and usually takes 30-45 minutes. Most of this time is spent on preparation and making sure the needle will be in the correct place.

The investigation is similar to a mammogram in that your breast is compressed and will remain compressed throughout the biopsy. This is what happens:

1. Local anaesthetic will be injected into your breast to numb the area. This may sting a little for the first few seconds.
2. A tiny incision (cut) will be made in your skin, and the biopsy needle will be passed through it.
3. The biopsy needle is placed in the correct position using an x-ray to check the needle position. The biopsy will then start.
4. Tiny samples of tissue will be taken using a suction/vacuum device attached to the needle (the needle will stay in place throughout). You will feel a pushing/pressure sensation but it will not be sharp or painful.
5. After the tissue is taken, a clip may be left in the breast to mark the site in case a further biopsy or surgical procedure is needed at a later stage. This will have been discussed with you prior to the procedure.
6. A dressing and paper stitch will be placed on your breast to reduce any bruising (This must be kept on for a minimum of 24 hours).

The biopsy will be performed at a single site within the breast unless you have been informed otherwise prior to the procedure.

The tissue sample will be sent to the Pathology Department (laboratory)

After the biopsy

We will ask you to stay with us in the Breast Unit for 15 minutes after the procedure so we can make sure that there is no further bleeding from the biopsy site.

You should keep the dressing and paper stitch on for a minimum of 24 hours.

After the procedure you may resume normal activities as soon as you feel able to, although you should avoid strenuous physical activities in the first 24 hours.

You may develop significant bruising around the biopsy site and/or feel a lump there over the next day or so, this is normal and will resolve on its own.

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Patients also experience different amounts of discomfort after the procedure. Once the anaesthetic has “worn off” your breast may feel uncomfortable. You can take paracetamol for this.

Follow-up and results

Your biopsy results will be discussed at a weekly meeting with our doctors and will usually be available to you one week after the core biopsy.

You will be sent or given a clinic appointment to discuss your results with a Breast Surgeon.

Symptoms to report

If your breast swells significantly or you become short of breath, you should contact the Breast Unit.

If you start bleeding after leaving the department and it is continuous, you should contact your GP or NHS Direct on 111. In the unlikely event that the bleeding is severe then you should go to your local Emergency Department (ED).

Please do not take Aspirin as this may increase bruising (unless you are already taking Aspirin as part of your prescribed medication, then please continue with your usual daily dose as prescribed).

Contact details

We hope this leaflet has helped to explain the procedure. If you have any further queries then please contact our Breast Care Nurses (Monday – Friday between the hours of 9am-5pm) or your GP.

City Breast Unit

Birmingham Treatment Centre

City Hospital

Dudley Road

Birmingham

B18 7QH

Tel: 0121 507 4976

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Breast Unit

Walsall Breast Unit

Walsall Manor Hospital

Moat Road

Walsall

WS2 9PS

Tel: 01922 721 172 ext 7108 or 6404

Further information

For more information about our hospitals and services please see our websites www.swbh.nhs.uk and www.swbhengage.com, follow us on Twitter @SWBHnhs and like us on Facebook www.facebook.com/SWBHnhs.

Sources used for the information in this leaflet

- NHS Breast Screening Programme, 'Clinical guidelines for breast cancer screening assessment', June 2010
- NHS Breast Screening Programme, 'Guidelines for non-operative diagnostic procedures and reporting in breast cancer screening', 2001
- Vascular and Interventional Radiology, 'Accuracy and complication rates of US-guided vacuum assisted core breast biopsy', June 2000

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5495 or email: swb-tr.swbh-gm-patient-information@nhs.net



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