



Aintree University Hospital
NHS Foundation Trust

Breast Unit
Elective Care Centre
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Removal of a Breast Lump

What is removal of a breast lump?

Removal of a breast lump is taking out only the lump; it is **not** removing all of the breast.

Why do I need to have the breast lump removed?

If you have been seen in clinic, you may have this lump removed because:

- You want to have the lump taken out
- The lump has changed, or started to grow in size
- The lump is a little large and your doctor thinks it should be taken out
- The doctor says you should have the lump removed to be certain of the diagnosis (find out exactly what the lump is).

After the lump has been removed your doctor will be able to tell you if you need any other treatment or tests when you return for your check up.

What are the possible risks with removing a breast lump?

- You will have a scar on your breast where the doctor has to cut the breast to take out the lump. The scar is permanent, but usually the scar will fade in time.
- The doctor will usually use a dissolving stitch.

- However, some people heal better than others. Sometimes the scar may thicken or look wider with time.
- As with any operation, removing a breast lump carries a risk of infection. Your doctor and staff looking after you will try to make sure this does not happen.

Your doctor may ask you to take antibiotics if this is necessary.

- Sometimes after an operation there may be some bruising; bleeding or collection of fluid under the scar.

If there is any swelling or bruising please ask your doctor or nurse to check this area for you.

- After a breast lump has been removed there may be a small dent or change in the breast. If the lump is small, this is less likely to be noticed.

Are there any alternatives to this procedure?

Having been given this leaflet you will already have had a discussion with the doctor regarding the reasons for a breast biopsy.

If you wish to consider alternative procedures or feel that the reasons for this procedure are not clear, please ask to see the doctor again.

What will happen if I don't have the operation?

This depends upon the reason for your surgery.

- If the breast lump is growing – it may continue to do so if it is not removed.
- If the lump needs to be removed to make a certain diagnosis this may not be known.

What sort of anaesthetic will I need?

You will have a general anaesthetic which means that you are asleep for the operation.

A general anaesthetic is drug-induced unconsciousness. It is always given by an anaesthetist, who is a doctor with special training.

Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but are usually short lived. They include nausea, confusion and pain.

Complications are rare, but can cause lasting injury; they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

You will be given an opportunity to discuss anaesthetic options and risks with an anaesthetist before your surgery.

If you are worried about any of these risks, please speak to your consultant or a member of their team.

Getting ready for your operation

- You will usually be seen in the pre-operative clinic, usually one to two weeks before your operation.
- You will be weighed and measured and possibly have an ECG (a heart tracing).
- The staff will ask routine questions about your health, the medication you take at the moment and any allergies you may have.
- Your admission letter will tell you what time to stop eating and drinking before your operation.
- Most patients are admitted on the day of their operation if they have already attended the pre-operative clinic.

Please bring a non-wired support bra to wear after your operation

The day of your operation

- You will usually come into hospital on the day of your operation.
- You will be asked to sign a consent form to say that you understand the procedure, and what the operation involves. Again, you will be able to discuss the operation with your surgeon.

What should I expect after my operation?

When you return to the ward you may have a drain coming from your wound site. This is a tube attached to a small bag to drain fluid. This drain is to help prevent bruising, and will help your wound heal quicker.

A nurse will check your pulse, blood pressure, breathing rate and wound regularly. It is important that if you feel any

pain you must tell the nursing staff, who can give you painkillers to help.

The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people sick.

If you feel sick we advise you not to drink until this feeling has passed. The nursing staff may offer an injection to help this sick feeling go away.

The first time you get out of bed, please make sure you have a nurse with you. This is in case you feel dizzy.

As soon as the anaesthetic has fully worn off, you will be encouraged to sit out of bed. Later you may walk around.

Going home

If you feel well you will usually be able to go home the same day as the operation.

If you have had a general anaesthetic or sedation, **you must have a friend or relative to take you home and have a responsible adult to stay with you for 24 hours.**

For next 24 hours **you must not:**

- Travel alone
- Drive a car or ride a bicycle
- Operate machinery (including domestic appliances such as a kettle)
- Climb ladders
- Make important decisions, sign any business or legal documents
- Drink alcohol
- Return to work within 12 hours of treatment. Your general health and any medicines you are taking may increase the time you need off work.

You should:

- Take it easy for the rest of the day, avoid strenuous activity

- Take your medications as usual
- **Let someone else care for anyone you usually look after, such as children or elderly or sick relatives.**

Discharge Information

Pain relief and medication

The nursing staff will advise you about painkillers before you leave the hospital. Please tell the nurses which painkilling tablets you have at home.

Your wound

If you need a District Nurse your ward nurse will arrange this for you. Please discuss this with your ward nurse before you leave the ward.

Your bra

You will be advised to wear a non-wired support bra day and night after your operation for around two weeks.

Further appointments

An appointment for about two or three weeks time to come back to clinic for a check up will be sent to you.

There you will see the doctor who will tell you what had been removed; and whether you need any further treatment.

Further information

Please feel welcome to ring the Breast Care Nurses who will answer any of your questions and give any further explanation if required.

Breast Care Nurses

Tel: 0151 529 4082 (24 hour answer phone)
The Breast Care Nurses aim to return your telephone call the same day or the following day.

Acknowledgements:

This leaflet is based upon the Royal Liverpool and Broadgreen University Hospitals NHS Trust patient information booklet 'Removal of a Breast Lump'.

The Royal Liverpool and Broadgreen University Hospitals NHS Trust has kindly given their permission for us to use their material.



If you require a special edition of this leaflet

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0151 529 4969

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