



Vacuum assisted excision (VAE) of the breast

This leaflet tells you what to expect during a vacuum assisted excision of your breast(s).

What is VAE of the breast?

A vacuum assisted excision (VAE) is the way in which we either take a larger sample of breast tissue in order to analyse more breast tissue, or to remove non-cancerous (benign) lumps in the breast.

It is very similar to the previous biopsy you had, where we took a smaller sample of breast tissue. The VAE uses a special instrument with a vacuum and cutting motion which enables more tissue to be removed. A VAE is what is called a minimally invasive procedure, that doesn't need admission to hospital or a general anaesthetic.

A VAE can be done using either ultrasound or x-ray guidance. The ultrasound or mammogram machine is used to locate the area that needs to be removed, and visualises the needle taking the sample.

What are the benefits – why should I have this procedure?

After your previous biopsy, the breast team decided:

- They need a larger sample of breast tissue to gain more information in order to find an accurate diagnosis, or,
- To remove non-cancerous (benign) lumps.

What are the risks?

The consultant radiologist/radiographer or clinical nurse specialist will discuss the benefits and risks with you prior to undertaking the procedure. These are the main things to expect or to look out for afterwards:

Pain: The local anaesthetic you will receive to numb the area will wear off after a couple of hours and your breast may feel sore and uncomfortable.

Bleeding: A small amount of bleeding may occur at the excision site. We will make sure the bleeding has stopped before you leave the appointment. If bleeding occurs once you leave hospital, apply firm pressure with a dressing or tissue over the original dressing for 10 minutes and the bleeding should stop. If the bleeding continues, please contact the Breast Screening Clinical Nurse Specialists on 0118 322 8563, your GP or NHS direct on 111 (24 hours a day, 7 days a week) for advice. However, in the unlikely event that the bleeding is severe, we suggest you go to your nearest emergency department (A&E).

Bruising: The amount of bruising after this procedure varies widely. Any bruising around the excision area can take one or two weeks to clear up. Bruising inside the breast can make your

breast feel lumpy, or it may make an existing lump feel bigger than it did before. This is normal after this procedure and will settle as the bruising settles.

Infection: An infection at the excision site is rare but possible. Please follow the aftercare instructions to reduce the risk. If there are any sign of an infection: high temperature, pus, reddening skin, swelling or feeling hot to touch, please contact the Breast Screening Clinical Nurse Specialists on 0118 322 8563 or your GP or NHS on 111 (24 hours a day, 7 days a week) for advice.

Repeat procedure: In some cases, a VAE may need to be repeated if the sample that is taken is inadequate. If this is the case, a nurse or doctor will discuss this with you.

Pneumothorax: A pneumothorax (punctured lung) is an extremely rare complication of an ultrasound/mammogram guided VAE. Using ultrasound/mammogram during the excision to guide the needle to the abnormality enables the needle to be seen throughout the procedure, minimising the risk that the lung will be punctured.

How can I prepare for the procedure?

- Please eat and drink normally before the procedure.
- If you are on any blood thinning medication, please contact the Breast Screening Clinical Nurse Specialists on 0118 322 8563 or 0118 322 8282 to leave a message for the admin team before your appointment.
- If you are allergic to any medication particularly local anaesthetic, or any metal or nickel, please contact us as above.
- Please tell us if there is any possibility that you may be pregnant.

On the day of your appointment please do not wear deodorant, powder, lotion or perfume on your breasts and your underarm areas, as these products may show up on the mammogram films.

What happens during the procedure?

- We will ask your consent for any procedure or treatment beforehand. The consultant radiologist/radiographer undertaking the procedure or our clinical nurse specialist will explain the risks, benefits and alternatives where relevant, before they ask for your consent. If you are unsure about any aspect of the proposed procedure or treatment, please do not hesitate to ask for more information.
- The procedure takes place in the mammography/ultrasound room and you will be asked to remove the clothing from the top half of your body, including your bra. Because of this, it is easier to wear a skirt or trousers instead of a dress for your appointment.
- You will be asked to lie down or sit up on the couch. For the ultrasound guided procedure, the specialist will put some gel onto your skin and will use the ultrasound probe to find the abnormality to be biopsied. For the mammogram guided procedure, your breast will be compressed throughout the examination and low-dose X-rays are used.
- A local anaesthetic injection with adrenaline will be given to numb the area to be excised. This works very quickly. You can expect to feel some sensations during the procedure but this should be pull/pushing/vibration sensations and not a sharp pain. The specialist will make sure that the area is numb before proceeding.

- A small cut is made in the skin and then the specialist will use the ultrasound/mammogram to guide the needle that takes the sample of tissue into the abnormality. The needle stays in the breast during the sampling and you will hear some noises, but most patients report that this does not cause them any particular discomfort.
- The specialist may stop once or twice to x-ray the sample during the procedure. When the excision is finished, a tiny marker clip is inserted to mark the location (we will give you more information about the marker on the day of procedure). You will not feel this. The sample will then be sent to the pathology lab for testing.
- You can choose to stop the procedure at any point during the procedure, including after you have signed the consent form, but this may mean we will not have enough tissue for a diagnosis.

What happens after the procedure?

Firm pressure is applied to the breast for 10 minutes immediately after the compression is lifted (mammogram). This will help to minimise the risk of developing internal bruising in the breast (haematoma).

A paper stitch (steri-strip) and a sterile dressing is placed over the small cut. A mammogram will be performed to check the position of the marker clip. After this a pressure bandage will also be applied on top of the sterile dressing.

Once you are dressed, you will be asked to stay for about 30 minutes until we are sure that you feel comfortable enough to leave the department. We will monitor your blood pressure during this time.

Due to the adrenaline in the local anaesthetic injection, **we recommend that you do not drive for the rest of the day, and that you have a friend or relative to accompany you home.** We also recommend that if you are working, you arrange time off work on the day of the procedure.

How long will I be at the hospital for?

You will be in our department for 1-2 hours. When you arrive, we will need to go through the consent form with you. The equipment also needs to be set up. You may be here for 30-45 minutes before the procedure starts. The VAE itself only takes a short time, but the positioning and putting pressure on afterwards takes time.

Results

Once the vacuum-assisted excision has been done, we will let the breast team know. When the results have been processed by the Pathology Department, the breast team will ring you to organise an appointment to discuss the results.

Are there any alternatives to having a VAE?

The usual alternative is a surgical excision procedure, which requires a general anaesthetic. Occasionally, if the vacuum excision is not possible for technical reasons, you may require a surgical excision but this will be discussed with you.

Aftercare instructions

The dressing

The pressure bandage needs to stay on for 24 hours, kept dry to minimize haematoma. The dressing should be left on for 48 hours and kept clean and dry. You should remove it after 48 hours. If the dressing causes any skin irritation, please remove it immediately and replace it with another suitable dressing, e.g. large plaster.

Pain relief

Most women feel some discomfort and experience bruising to the breast following the procedure. If your breasts feel tender following the examination please take over the counter painkillers, such as paracetamol, following the dosage instructions on the packet. Avoid products containing aspirin.

Exercise

It is recommended to rest on the day of the excision and avoid any heavy lifting or other heavy jobs. Also avoid swimming or sport for the 48 hours after the excision.

Bra

Underwired bras can be worn as normal following the excision procedure to provide support to the breast. Or, you may find it more comfortable to wear a soft non-wired bra or sports bra.

More information

If you have any concerns or worries related to this procedure, please contact the Breast Screening Clinical Nurse Specialists on 0118 322 8563 or email westberksbsu@nhs.net. Out of normal working hours, please contact your GP or NHS 111.

For more information about breast screening visit <https://www.royalberkshire.nhs.uk/services-and-departments/radiology/breast-screening>

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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