

**Introduction**

Breast lumps are common symptoms in premenopausal women. Most breast lumps are benign, but excision may be necessary to give definitive histological diagnosis and for symptom control.

**The Operation**

1. General or local anaesthesia.
2. Incision made on the skin of breast. Exact site of lesion is determined by palpation, ultrasound or stereotactic localization.
3. Preoperative localization may be done in Radiology Department, by a skin marker/ guidewire / isotope injection. These will be removed together with the specimen during the operation.
4. Abnormal breast tissue removed, ultrasound or mammogram may be performed to confirm accurate removal of the lesion.
5. Incision closed.

**Preoperative preparation**

1. Admit 1 day before or on same day of this “elective” operation.
2. Anaesthetic assessment. **Inform your doctors** about drug allergy, regular medications or other medical conditions.
3. Keep fast for 6 to 8 hours before operation.
4. Patient may need to go to X-Ray Dept. for preop imaging and localization with the injection of isotope / guidewire.
5. Empty bladder and change to operation clothes before transfer to operating room.
6. Pre-medication, antibiotic prophylaxis and intravenous line may be required.

**Postoperative Instruction**

- A. **General**
1. Mild throat discomfort or pain because of intubation.
  2. Mild discomfort or pain over the operation site. Inform nurse or doctor if pain severe.
  3. Nausea or vomiting are common; inform nurses if symptoms severe.
  4. Inform nurses if more analgesics are required.
  5. Can mobilize and get out of bed 6 hours after operation, usually go home on the following day.
- B. **Wound care**
1. In the first day after operation, patients can have shower with caution (keep wound dressing dry)
  2. Stitches or skin clips (if present) will be taken off around 10-14 days.
- C. **Diet**
- Resume diet, usually 4 hours after anaesthesia, and when taking sips of water well.

**Common Risks and Complications** (not all possible complications are listed)

- A. **Anesthesia related**
1. Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism, etc.
  2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
  3. Allergic reaction and shock.
  4. Toxicity of local anaesthetic injected around the site of operation may result in serious complication although rare.
- B. **Procedure related**
1. Wound pain / Wound infection.
  2. Bleeding (may require re-operation to evacuate the blood clot).
  3. Hypertrophic scar and keloid formation (may result in unsightly scar).
  4. Radioisotope carries a small amount of radioactivity. Potential harm to the human body is minimal except in pregnant women and in rare cases of hypersensitivity leading to anaphylaxis. Most of the radioactivities will be removed with the specimen and residual activities left inside the body is minimal after the operation.
  5. The index lesion may be incompletely excised.
  6. The index lesion cannot be accurately localized and the procedure fails to remove the lesion.

**Things to take note after discharge**

1. Contact your doctor or a nearby Casualty if you find increasing discharge, pain or redness around the wound.
2. Take analgesics prescribed by your doctor if required.
3. Resume daily activity gradually (according to individual situation)
4. Remember the dates of taking off stitches/clips in the hospital clinic, and follow-up at the clinic of your doctor.

**Further management**

Further surgical operation may be scheduled after the pathology of specimen is available.

**Recurrences**

Breast lump is a common occurrence and recurrence is not infrequent. New breast lumps may appear in either breast.

**Remarks**

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

**Reference**

Hospital Authority: “Breast Lump Excision” (2020)  
Smart Patient: [http://www.eka.org.hk/pilic/public/surgery\\_pilic/surgery\\_breastlumpexcision\\_0200\\_eng.pdf](http://www.eka.org.hk/pilic/public/surgery_pilic/surgery_breastlumpexcision_0200_eng.pdf) (06-07-2023).