Biopsy basics

A biopsy removes cells or tissue from the breast to be viewed under a microscope for signs of cancer. You may need a biopsy, if you have:

• A breast lump or other breast change
• An abnormal finding on your mammogram

There are two main types of biopsies: needle and surgical. The kind you will have depends on the type and location of the lump. Your doctor will decide which type of biopsy you need.

During a biopsy, a local anesthetic (medicine that blocks pain in the area) is used, but you still may be a little sore. You may want to bring a friend or family member for support and to drive you home.

If you need a biopsy, don’t panic. Most breast biopsies do not show breast cancer. It will take a few days to get the results.

Needle biopsy

A needle biopsy is often done first because it is fast, simple and accurate. If your doctor cannot feel the lump, special equipment is used to guide the needle to the area.

Fine needle aspiration (also known as FNA or fine needle biopsy) — A thin needle is used to remove cells from the breast lump. It can be done in a doctor’s office and only takes a few minutes.

Core needle biopsy — A hollow needle is used to remove a small amount of tissue from the breast. It can be used on both breast lumps and suspicious areas that can be seen on a mammogram or other tests.

For lumps that cannot be felt, images from a mammogram, breast ultrasound or breast MRI will help the doctor guide the needle to the area of concern. It provides more information about the tumor than FNA. This type of needle biopsy is done with local anesthetic in an outpatient setting.

Surgical biopsy

If the area of concern can’t be reached with a needle biopsy, a surgical biopsy may be done.

A surgical biopsy is the most accurate way to diagnose breast cancer and get complete information about the tumor. It is done in a hospital or clinic setting with local anesthesia and sedation (meaning you will be asleep). The prep time and procedure take about one hour. Most women go home the same day.
<table>
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<tr>
<th>Types of biopsy</th>
<th>Advantages</th>
<th>Disadvantages</th>
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| Needle biopsy   | • Simple procedure — if lump can be felt, may be done in a doctor’s office  
• Mammogram or ultrasound guidance may be used  
• Quicker than surgical biopsy | • Less accurate than surgical biopsy  
• May not give full information about the tumor  
• May still need surgery  
• If needle misses the tumor, the biopsy will show cancer is not present when in fact it is (false negative result) which could delay diagnosis (not common)  
• Fine needle only: requires cytopathologist to review the results  
• Fine needle only: cannot distinguish non-invasive from invasive cancer |
| Surgical biopsy | • Most accurate biopsy method  
• Can give full information about the tumor  
• False negatives are rare  
• May be the only breast surgery needed to remove the tumor | • Surgery (done in a hospital)  
• Takes time to heal from surgery  
• Greater chance for infection and bruising than with needle biopsy  
• Can change the look and feel of the breast |

### Questions to ask your doctor

You should talk openly and honestly with your doctor to make sure all of your questions are answered. To help you get started, Susan G. Komen® has a series of *Questions to Ask the Doctor* on many breast cancer topics including Biopsy. Some questions include:

- What type of biopsy will I have? Why?
- How much of the lump will be removed?
- How long will the biopsy take? Can I go home the same day?
- Are there any aftereffects of the biopsy? If so, what are they?
- How soon will I know the results of the biopsy?
- When will I get a copy of the pathology report?
- If I have cancer, who will talk with me about my treatment options?

These questions will help your doctor understand and address your concerns. You can download and print any of these questions to take to your next appointment at www.komen.org/questions.

### Resources

Susan G. Komen®
1-877 GO KOMEN (1-877-465-6636)
www.komen.org

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*(The above list of resources is only a suggested resource and is not a complete listing of breast cancer materials or information. The information contained herein is not meant to be used for self-diagnosis or to replace the services of a medical professional. Komen does not endorse, recommend or make any warranties or representations regarding the accuracy, completeness, timeliness, quality or non-infringement of any of the materials, products or information provided by the organizations referenced herein.)*

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