Wide local excision of a breast lump
Your operation explained

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Introduction

This booklet is designed to give you information about having a wide local excision and the care you will receive before, during and after your operation. We hope it will answer some of the questions that you or those who care for you may have at this time. It is not meant to replace the discussion between you and your surgeon, but should help you to understand more about what is discussed.

What is a wide local excision?

Wide local excision is an operation to remove an area in your breast that contains cancer with a small amount of surrounding normal tissue (a margin). This takes between 30 and 60 minutes and is done under general anaesthetic. Following your operation this tissue is analysed in the laboratory. If the surrounding tissue (margin) does not show any cancer cells, your surgeon will not have to do any further surgery. If the surrounding tissue shows cancer cells in it, then another operation will be necessary to remove all the cancer and gain a clear margin. This is called a cavity shave.

Sometimes a wide local excision does not really alter the appearance of the breast. In other cases, patients may notice a reduction in size or dimpling in the shape of the breast. Usually this is not noticeable to others, especially when wearing a bra.

In most cases, an axillary operation may be carried out at the same time as your wide local excision to see if the cancer cells have begun to spread to the lymph nodes (also called glands) in your armpit (axilla). There are different types of axillary operations: axillary node sampling, axillary node clearance and sentinel lymph node biopsy. The most appropriate method will be decided and explained to you by your surgeon.
What are the alternatives to this treatment?
Your surgeon has recommended a wide local excision as the best treatment for you. However a mastectomy (full removal of a breast) is a possible alternative treatment. Your surgeon will be happy to answer any further questions that you have.

What are the risks and complications?
Complications are rare and seldom serious. Pain, bruising and swelling are common but not serious. Mild swelling and bruising may take four to six weeks to settle down completely.

Other risks include:

- **Bleeding from the wound**: You should not be concerned if you find a small amount of blood spotting the dressing, but if more bleeding than this occurs after your discharge, you should contact your breast care nurse or GP immediately.
- **Infection**: If your wound becomes inflamed, red, hot, sore, or oozes pus you should contact your GP or the breast care nurses. In some cases antibiotic treatment may be required.
- **Swelling**: this is normal. Wear a supportive bra that is comfortable but firm. This will help reduce swelling and discomfort.
- **Numbness** in the scar and surrounding skin, itching or pins and needles. This is normal and usually temporary.
- **Pain**: This is natural following an operation and you will be sent home with a supply of painkillers. Take them regularly for the first few days.
- **Thrombosis**: This is a risk with all surgery and occurs when a blood clot forms in a vein, usually in the leg. You will be given blood thinning (anticoagulation) injections and you will be advised to wear support stocking whist in hospital and for two weeks afterwards, to help prevent this.

Remember if the wound becomes very painful, inflamed, swells or oozes please contact you own GP or the breast care nurses.
What will happen before the operation?
Before you admission you will be asked to attend a pre-operative assessment clinic. Here, relevant tests and examinations are done, i.e. physical examination, blood tests, urine test, MRSA screening, and possibly heart monitoring also known as electrocardiogram (ECG). These can take two to three hours.

You will be asked to starve for a period of time before your operation. Usually from 12 midnight the night before. Your surgeon or nurse will clarify this for you.

Please bath or shower on the morning of surgery prior to admission and remove make-up, nail varnish and all jewellery except for a wedding ring.

You may be seen just before the operation by the surgical team and have the side that will be operated on marked. The surgical team will give you an opportunity to ask any further questions.

How will I feel after the operation?
When you wake up you may feel a little drowsy. Some patients can feel a little nauseated, but this passes. You may also feel some soreness and discomfort from your wound. If you do experience pain you will be offered some pain killing medication for this.

When can I return home?
The length of time you will need to stay in hospital will be discussed with you at your clinic appointment and does vary from person to person. Most patients are able to return home on the day of their surgery.

How will I feel over the next few days?
Once you are back at home, you may find that you have a few days feeling low. This is normal. If this does not go away and you
would like to talk further, please ring your breast care nurse who will give you information, advice and support.

You can expect to feel a little sore for a few days. You will be offered pain killers to take home. Take them regularly for a few days. If these are not effective, please tell your GP.

Your wound will be covered with waterproof dressings so you can shower or bath as normal. This dressing can stay on for 7-10 days. The stitches are dissolvable.

It is important to wear a comfortable, supportive and well-fitted bra as soon as possible after you operation. This will give support to your breast and prevent pulling on the wound. Elasticated crop tops are not advised as they offer little or no support.

It is important that you do gentle arm exercise after the operation to encourage a full range of movement. If you feel that it is too painful to move your arm properly then you need to discuss this with the breast care nurse.

If you have also had surgery to the armpit area it is important to continue with the exercises that you have been shown. They will help you get a full range of movement back into your shoulder. You should feel able to do most things as normal, but it is best to avoid heavy lifting and housework at first.

**When can I drive?**

You can drive as soon as you can make an emergency stop without discomfort in the wound. This may be about ten to fourteen days after the operation. You must also be comfortable wearing a seat belt. You should speak to your insurance company about any restrictions following surgery. It is advisable to go out with another driver if possible on the first trip to ensure you feel fully confident.
When can I return to work?

This will depend upon the type of work you do but in general you may return as soon as you wish, generally about two weeks following surgery. The recovery period may be a little longer if you have had your lymph nodes removed and you might consider taking a little extra time off.

What about sex?

You can resume sexual relations when you feel comfortable doing so. Please ask about contraception issues if you have been using the oral contraceptive pill or other hormone based medication (such as HRT). Your breast care nurse or doctor will be happy to discuss this with you if you have any concerns.

What follow up treatment will I have?

This will be discussed at your outpatient appointment when the results from your operation and your treatment plans are finalised. As part of your follow up care it is likely you will be seen in the outpatients department on a yearly basis for five years.

In some cases surgery is all that is necessary.

Other treatments are often advised to reduce the risk of recurrence. These treatments can include radiotherapy, anti-oestrogen tablets, chemotherapy and Herceptin (Trastuzumab). Your breast care nurse may have explained about some of these treatments before your surgery, and can answer any questions you may have about them.

When the surgical results are available and your treatment plan is finalised, you will be seen in the Breast Clinic to discuss any further treatments.
What feelings might I experience?

This period, just after diagnosis, and before surgery, can be very difficult. You may be very anxious and find it hard to come to terms with how you feel physically and emotionally.

Feelings that can occur during this time may include:

• Grief or a sense of loss
• Anger
• Helplessness and a feeling of vulnerability

Support from those close to you is important at this time. Emotional support can bolster your state of mind, particularly when you are still in shock over the diagnosis.

If you can, talk openly about your feelings with those close to you – your spouse, partner, family or friends. It can help to reduce the anxiety.

It can be a worrying time for your partner. He or she may like to be involved in discussions about the operation and how it is likely to affect your relationship afterwards.

You will have met one of the breast care nurses in the Breast Clinic before your admission. It is important that you contact the breast care nurses at any time, who will be very happy to support you. They are there to provide you and your partner with advice, information and support throughout the course of your treatment and follow up. They will see you regularly at your request – don’t hesitate to ask for support if anything is worrying you.

Please contact them on: 0121 371 4499 or 07771 940 368 (Monday to Friday)

Further information is available from the Patrick Room in the Cancer Centre Outpatients. The telephone number is 0121 371 3537 or you can drop in for advice.

You may also find it helpful to join a support group where you can meet and talk with people who have had a similar experience. Your breast care nurse can give you more information on this.
It is important that you make a list of all medicines you are taking and bring it with you to all your follow-up clinic appointments. If you have any questions at all, please ask your doctor or breast care nurse. It may help to write down questions as you think of them so that you have them ready. It may also help to bring someone with you when you attend your outpatient appointments.

**Glossary of medical terms used in this information**

**Anaesthetic:** A drug that causes a loss of feeling or sensation.

**Axilla:** A medical term for the armpit.

**Chemotherapy:** The treatment of cancer with drugs.

**ECG:** Also known as an electrocardiogram is a test which measures the electrical activity of the heart.

**Lymph nodes:** Hundreds of small oval bodies that contain fluid (lymph). These act as a first line of defence against infections. They are also called lymph glands.

**Radiotherapy:** X-ray treatment that uses high energy rays to kill cancer cells.

**Local sources of further information**

**University Hospital Birmingham NHS Foundation Trust**
The Patrick Room, Cancer Centre
Heritage Building (Queen Elizabeth Hospital)
Mindelsohn Way, Edgbaston, Birmingham B15 2TH
Telephone: 0121 371 3537

**Breast Care Nursing Team**
Telephone: 0121 371 4499 or 07771 940 368