

PATIENT INFORMATION

Breast Imaging

Wire Localisation

This leaflet explains a wire localisation, including the risks and what to expect.

We understand that you may be anxious about this procedure. This leaflet will hopefully help you prepare by providing you with specific information about this investigation.

Why do I need a wire localisation?

This aids the surgeon in finding the area within your breast which needs to be removed during surgery. On the morning of surgery or sometimes the afternoon before your surgery we will insert a thin flexible wire to locate this area.

The procedure will be performed using ultrasound or x-ray guidance. This depends on how the area is best visualised.

What happens during the localisation?

The procedure may be performed by a Radiologist or Advanced Practice Radiographer. They will explain the procedure to you, why it is needed and any risks. They will ask for your verbal consent.

The clinician will be assisted by radiographers/assistant practitioners/support workers.

If using x-ray guidance, you will be positioned into the x-ray machine by the radiographers and compression applied to hold the breast in place

Once the area of abnormality has been located, your skin will be cleaned with antiseptic fluid and numbed with local anaesthetic. This may sting for a few seconds. The area should be numb but it is normal to feel 'pushing sensations' during the procedure.

The clinician will insert the wire through a small introducer, this is removed when the wire is in the correct position so that the surgeon can see the area to remove at the tip of the wire.

In some cases, more than one wire may need to be inserted. The clinician will inform you of this before beginning.

Sometimes the clinician is not satisfied with the wire position and a second wire needs to be placed.

If using ultrasound guidance, you will be laid on a couch whilst the wire is inserted.

It is very important that you are able to stay still during the procedure, this may take 10-30 minutes.

Will the wire move in my breast?

There is a very small hook at the tip of the wire which you will not feel but should keep the wire in place. The piece of soft wire outside of the skin will be covered with padded dressings to avoid this catching on your arms or clothes.

What are the risks?

There is a small risk of bleeding, bruising and infection but every precaution is taken to avoid these.

Nearby tissue damage is a very small risk. For example, the risk of a collapsed lung is possible but is reported in extremely few instances.

This procedure is generally tolerated very well with only slight discomfort.

What happens after the wire localisation?

A radiographer will take a mammogram to demonstrate the location of the wire to the clinician and surgeon. Once this has been performed and your wound dressed, you will be escorted by a porter to your next appointment or the surgical admissions ward. If you are having the wire localisation the day before surgery you can go home.

What happens after surgery?

The area of breast removed will be sent to the laboratory for analysis.

The results should be available approximately two weeks later, which will be discussed with you at your clinic appointment.

If you have any queries or concerns, please do not hesitate to ask a member of staff. You can also call the Breast Care Nurse on: 01803 655634 or 07825735161 (Monday – Friday, 09:00-16,00).

If you require a translation service or interpreter; please let us know when your appointment is booked.

If you are taking anticoagulant medication please let us know.

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.