



# **The GHA Breast Clinic Service**

## What to expect at your breast clinic appointment



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This booklet is for anyone who has been referred to the breast clinic by his or her GP or following routine breast screening. Although we refer to 'women' throughout the booklet, much of the information will also be relevant to the men who have been referred to the breast clinic. The vast majority of people who attend a breast clinic will not have breast cancer. However, it is still important to attend your appointment so you receive a full assessment. Most people will receive an appointment for clinic to be seen within 2 weeks if your GP has flagged the referral as urgent.

## What to expect at the breast clinic?

Your breast clinic appointment may take several hours so that all your necessary tests may be carried out on the same day; this is called a 'one-stop clinic'.

During your appointment, you will meet several members of the breast team:

### **Breast Consultants**

Miss Macano  
Mr Salman

### **Breast care Nurses**

Christine Gill  
Pamela Estella

### **Radiology**

Dr Marcela Zagurova  
Mammographers

You can usually take a partner, friend or relative with you for company and support.

Some people prefer to go on their own.

During your assessment by the doctor or nurse, you will be asked questions, specifically about:

- any family history of breast cancer
- any medicines you're taking, including hormone replacement therapy (HRT) or the contraceptive pill
- any previous breast surgery, including breast implants
- any pregnancies

The next stage is a breast examination, the doctor or nurse will need to check both your breasts when you are sitting, and again when you are lying down. As part of the examination, it is normal to examine the lymph nodes (also called glands) under your arm (axilla). After your breast examination, you may have one or more of the following tests:

## Tests

### Mammogram

A mammogram is a breast x-ray. A mammographer (an expert in taking breast x-rays) will ask you to undress to the waist and stand in front of the mammogram machine. If you are pregnant or think you may be pregnant, tell the mammographer. Your breasts are positioned one at a time on the x-ray machine, then compressed down firmly on the surface by a clear plate. At least two pictures of each breast will be taken, one from top to bottom and then a second from side to side to include the part of your breast that extends into your armpit. You may find it uncomfortable but it only takes a few seconds and the compression does not harm the breasts. If you wish, you can take some simple painkillers from home just before the procedure eg. Paracetamol or Ibuprofen. Mammograms are not commonly used in women under 40. Younger women's breast tissue can be dense, which can make the x-ray image less clear and any changes harder to identify. Some people worry about the amount of radiation used in mammograms. However, they deliver a very low dose of radiation (you would receive a similar amount flying from London to Australia and back). Mammograms are used to screen for breast cancer every two years in Gibraltar. Mammograms are used in patients with breast implants.

### Contrast enhanced spectral mammography

(CESM): this uses a special dye to 'highlight' areas within the breast in more detail than a standard mammogram. This specialist test provides a great deal of information and is at times an alternative to an MRI.

### Tomosynthesis

Digital breast tomosynthesis (DBT) is another, more detailed type of mammogram used in the GHA. DBT makes 3D images using x-rays. The breasts are positioned in the same way as when having a mammogram. The x-ray arm rotates and curves around the breast, taking multiple x-ray pictures at different angles. The information is then transferred to a computer where it makes the pictures into 3D images (3D mammogram). This can make it easier to see any overlapping breast tissue more clearly.

## Ultrasound scan

An ultrasound scan uses sound waves to produce an image of the breast tissue. An ultrasound scan is painless. It takes a few minutes, usually you will have to undress to the waist and lie on a couch with your arm above your head. To ensure a clear image of the breast, some gel will be applied over the area of the breast first. The person doing the scan will move a handheld scanning probe over the breast to look at the underlying tissue including the area under your arm (axilla).

## Biopsy

This is the removal of a small amount of breast tissue to enable microscopic examination. There are different types of biopsies:

Core biopsy uses a hollow needle to get a sample of breast tissue. After examination under a microscope, it will show detailed information. If necessary, it is possible to take several tissue samples at the same time.

Fine needle aspiration (FNA) uses a fine needle to remove fluid from the breast, normally found in cysts.

For some biopsy procedures, in order to alleviate pain and discomfort, a local anaesthetic is injected into the area prior to the procedure; a small cut is made in the skin so that samples of tissue can be taken with the biopsy needle. If the area of concern is visible only on a mammogram you may have a stereotactic core biopsy.

Stereotactic Core Biopsy uses a needle device connected to a mammogram machine, which is linked to a computer. This helps locate the exact position of the area to be biopsied. Images of the breast from two different angles help to guide the needle to the precise location. It may feel a little uncomfortable, as the mammogram plates will compress the breast, at the same time as the biopsy.

Additionally on some occasions, a repeat ultrasound or mammogram will be necessary before the biopsy in order to pinpoint the area of breast tissue to be taken as a sample, particularly when the area of concern is very small and not palpable.

If you are taking aspirin or any anticoagulants (blood-thinning tablets), let the doctor know before having a core biopsy or an FNA. Having a core biopsy or an FNA does not necessarily mean you have breast cancer. Most anti-coagulants do not need to be stopped before the biopsy.

Whichever way the biopsy is done, a small dressing or plaster will usually be applied and you'll be asked to keep this on for a day or so afterwards. Once the local anaesthetic wears off, your breast may be bruised and tender for the next few days or weeks. The sample is sent to the laboratory where it is looked at under a microscope. You can expect some discomfort after this procedure and we recommend that you take painkillers if necessary afterwards or/and beforehand, if you wish. It can take up to two weeks before the report is ready. The breast team will contact you as soon as they have received the report and discussed the results at their breast multidisciplinary meeting.

### Vacuum assisted biopsy

If a previous biopsy has not given a definite result and more breast tissue is needed to make a diagnosis, or if the area of concern is difficult to target, you may be offered a vacuum assisted biopsy. This procedure takes a little longer than a core biopsy and uses a mammogram and/ or ultrasound for guidance. After an injection of local anaesthetic, a small incision is made into the skin, which allows the insertion of a hollow probe connected to a vacuum device. Using a mammogram or ultrasound as a guide, breast tissue is aspirated through the probe by the vacuum into a collecting chamber. Several samples of tissue are collected without removing the probe. Sometimes this procedure is an alternative to surgery to remove a whole area of breast tissue (called a vacuum assisted excision biopsy). You may experience bruising and some discomfort, we recommend you take painkillers if required.

### Inserting a metal marker

Often a small metal clip (or marker) is inserted in the area of the biopsy. This is so that the area is identifiable if a further biopsy or surgery is necessary. If there is no need for another procedure, the placed clip can remain in the breast. The marker clip is usually made of titanium (the same metal used for joint replacement surgery). It will not set off alarms at airports. Clips are now suitable for having an MRI, but if the marker clip is in place and you need to have an MRI scan in the future, let your doctor or radiographer know.

Having a breast examination, followed by breast imaging and tissue removal is a Triple Assessment. This may be necessary to make a definite diagnosis.



## Getting your results

The staff in the breast clinic will know that you want results as soon as possible and your specialist may be able to tell you what they think the outcome might be. However, the results of all the investigations you have had are necessary before you can receive the complete information. Biopsy results normally take around 2 weeks.

People often wonder why it can take this long.

Some test results may be available at the time for e.g. your ultrasound result will be available to you at the time of your scan and will be given to you by the consultant Radiologist; you may also receive a letter to let you know the results. If you have a biopsy, you will receive a phone call with results or we may offer you an appointment to come back to the clinic to discuss your results. Please be aware you may have to wait up to 2 weeks for your results as it takes time to analyse the samples.

After the examination of the tissue samples in the laboratory, the results are discussed by a team of healthcare professionals, alongside the results of any other investigations you had.

This happens in a weekly meeting, and you will normally only get the results after this meeting has happened. This meeting is a multi-disciplinary team meeting or MDM.

For most women, a breast assessment will show normal breast changes or a benign breast condition. In most cases, we will not need to see you again in the breast clinic. Benign breast conditions are common and there are many different types. In certain cases follow-up of breast changes will be by imaging, usually an ultrasound or mammogram.

If your diagnosis is normal breast changes or a benign breast condition, it is still important to be breast aware and go back to your GP if you notice any other new changes in your breasts, regardless of how soon these occur after you get your results. Breast awareness means getting to know how your breasts look and feel so you know what is normal for you. If you notice any changes that are unusual for you, see your GP as soon as you can. In Gibraltar, women between 40 and 70 can choose to have mammograms every two years as part of the GHA breast-screening

programme. If you are over the age of 70 you will not routinely receive appointments to attend for mammograms, but you can still attend every two years by booking in at the radiology reception at St. Bernard's Hospital.

### **Will biopsy results come back faster if I have cancer?**

No. How long you have to wait does not reflect what the result will be. The speed at which it has been done only reflects the time it takes to process the biopsy sample.

Some people say waiting for results is the most worrying part of the whole process, whatever the outcome is.

It is very common to worry about the possibility of cancer. However, it is important to remember that until you have your results, these are thoughts and not facts.

We all cope differently in times of stress. Some people cope by keeping busy or distracting themselves. Others use calming breathing exercises or mindfulness and relaxation.

What is not helpful is to start looking for information online about breast cancer.

Googling breast cancer is often what drives people's anxiety. Remember that any information you find online at this point will not be specific to your situation.

It is a much better idea to look for information on managing worry or anxiety while you are waiting for your results.

It may be a good idea to have someone with you when you go to your appointment to get your results. That way you can be sure there is someone there for support, should you need it. They may also think of questions that had not occurred to you and remember things you may forget. It may be useful to take a notepad and pen to write down any information you want to remember later.

If you have questions, concern or are anxious about your results and



would like to talk to someone, you can call the breast care nurses on 20002248.

Breast screening can pick up cancer before there are any symptoms. It is important to continue to be breast aware between your screening mammograms. If you are worried about any breast symptoms, do not wait for your next screening mammogram – see your GP.

If you cannot attend your clinic appointment or are concerned that you have not heard from the Breast clinic within a few days please contact the Breast Care Nurses on Tel 200 02248 or [breastcarenurses@gha.gi](mailto:breastcarenurses@gha.gi)

## Being breast aware

What changes should I look and feel for?

Everyone's breasts look and feel different. Some people have lumpy breasts, one breast larger than the other or breasts that are different shapes. Some have one or both nipples pulled in (inverted), which can be there from birth or happen when the breasts are developing.

When you check your breasts, try to be aware of any changes that are different for you. These could be:

A change in size or shape

A lump or area that feels thicker than the rest of the breast

Redness or a rash on the skin and/or around the nipple

A change in skin texture such as puckering or dimpling (like the skin of an orange)

Liquid that comes from the nipple without squeezing

Your nipple has become pulled in or looks different, for example a change in its position or shape

A swelling in your armpit or around your collarbone

Pain in your breast or your armpit that's there all or almost all of the time.

## Contacts

### GHA:

Breast Care Nurses - Tel 200 07248

Open access to breast care services - [breastcarenurses@gha.gi](mailto:breastcarenurses@gha.gi)

Radiology enquiries - Tel 200 72266 Ext 2285

### Support Groups in Gibraltar:

Breast Cancer Support Gibraltar - Tel 58008944  
[www.breastcancergib.org](http://www.breastcancergib.org)

Cancer Relief Centre - Tel 200 42312

Bosom Buddies - Tel 56449000

Cancer Research UK Gibraltar Branch -  
[cancerresearchgib@gibtelecom.net](mailto:cancerresearchgib@gibtelecom.net)

### Reference:

Breast Cancer Now - The research and care charity  
[www.breastcancernow.org](http://www.breastcancernow.org)

