Is a handheld mammotome((R)) suitable for the complete removal of benign breast lesions?

Aim: Is complete removal of a benign breast lesion (fibroadenoma as an indicative lesion) with sonographically controlled handheld vacuum biopsy (HHVB) possible and what type of complications are to be expected?

Material and Method: 480 patients with an unclear lesion of the breast were classified using the sonographically guided HHVB (8 and 11 Gauche), retrospectively analysed and followed up. 9 centres were involved. The aim of the follow-up was the sonographic examination of the biopsy area, looking for residuals directly after the procedure as well as in conjunction with the follow-up. Complications were also registered and evaluated. The median time of follow-up was 7 months (3 - 35 months). All biopsies were done as outpatient procedures under local anaesthesia. Included were only patients with a positive histology of fibroadenoma. Results: Of the 480 procedures using HHVB, 421 cases (88%) were totally removed directly after the procedure and 402 cases (84%) in the follow-up as could be seen by the sonogram. In only one case was antibiotic therapy necessary because of infection. There was no case of postoperative bleeding or haematoma which required operative revision of the wound. Conclusion: The HHVB procedure for complete removal of a fibroadenoma with the aid of the sonogram was possible in more than 2/3 of the cases and in 87%
with lesions of 2 cm or less. The procedure can be done on an outpatient basis under local 
aesthesia with a low risk of complications and practically without cosmetic impairment. The method 
could be a good alternative to open tumorectomy when needed.