

# Breast Imaging

## San Radiology & Nuclear Medicine



### hookwire localisation patient information

## SO YOU NEED A HOOKWIRE LOCALISATION. YOU MAY LIKE TO KNOW...

Hookwire localisation is performed when there is an abnormality in your breast that cannot be felt but requires surgical removal. To assist this process a fine wire with a small hook on one end is inserted into your breast under imaging guidance. The hooked tip is positioned in the abnormality and remains in this location to enable your surgeon to accurately remove only this area of interest, minimising scarring and breast deformity.

## HOW AND WHERE IS HOOKWIRE LOCALISATION PERFORMED?

It is performed in San Radiology with image guidance on the day of surgery. The choice of imaging is determined by the imaging modality which best shows the abnormality. This may be ultrasound or mammography (2D or 3D tomosynthesis).

The procedure is performed by a radiologist, with the assistance of a radiographer trained in ultrasound or mammography and a nurse.

Initially, imaging is performed to identify the area for localisation. If ultrasound is being used, you will be asked to lie on your back with your arm out to your side. Ultrasound imaging is performed before, during and after the procedure. Occasionally a mammogram will also be required after the ultrasound guided localisation is completed.

If mammography is being used, you will either be lying or sitting on a specially designed high-backed chair. Your breast will be compressed as for a mammogram with a compression plate that has an opening to accommodate the needle. Imaging is performed before, sometimes during and after the procedure.

Once the area to be localised is identified by imaging, the skin is cleaned with cold antiseptic. Local anaesthetic is used to numb the area. You will feel a needle prick and a small sting which lasts up to thirty seconds. A special needle containing the hookwire is then passed through the area to be removed. When the needle is removed the wire remains

in place with the hooked tip in the area of interest. Some of the wire will remain outside your breast and is taped down for comfort and safety. Finally, some pen markings will be placed on the skin.

### Is there anything I need to do to prepare for this procedure?

The radiologist needs all the relevant imaging studies and reports to review prior to performing the procedure. There are no other specific preparation requirements for hookwire localisation.

### How long does the procedure take?

The procedure is usually relatively quick, however the length of time is variable and depends on the imaging procedure used. It usually takes between 30 to 45 minutes.

### What happens after the wire is put in?

After the procedure is complete, you will be transferred to the operating theatres where the surgeon will operate to remove both the area of interest and the wire itself. A diagram, report and images are made available for your surgeon to refer to during this operation.

## WHAT ARE THE RISKS OF HOOKWIRE LOCALISATION?

The procedure is extremely safe and well tolerated with very few risks.

The wire can potentially move. This could compromise the accuracy of the surgical excision, however this is very rare. Even more rare are reports in the medical literature of significant wire migration beyond the breast. Bleeding and infection are also risks but again these are extremely rare. Everything is done to avoid these complications.

## FURTHER INFORMATION

We will go over the entire process with you on the day of your procedure and will be happy to answer any questions. We also obtain your written consent as part of the operation.

If you have concerns before the day or would like more information, please contact San Radiology on **(02) 9480 9850**.

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