

Breast Imaging

San Radiology & Nuclear Medicine



breast tissue marker (clip) patient information

SO YOU NEED A BREAST TISSUE MARKER (CLIP) INSERTED. YOU MAY LIKE TO KNOW...

A tissue marker is a very small object that is inserted into the breast either at the time of a biopsy, or to mark a previously diagnosed abnormality. There are a number of different types of markers available and the radiologist uses the marker clip most suitable for your particular requirements. There are different materials used in the various markers that are available and the markers come in a variety of shapes. Different shapes are useful if there are multiple areas to be marked in the same breast.

Why do I need a “tissue marker” or “clip” inserted into my breast?

There are various reasons for marker insertion. When a biopsy is performed, a marker may be inserted if the area of concern is small and could possibly be fully removed during the biopsy. The marker will then be visible if further imaging or procedures are required in the future.

Sometimes a biopsy is performed with ultrasound and a marker is inserted. A mammogram is then performed to check if the abnormality visible on ultrasound can be seen with a mammogram. Alternatively it will show where the ultrasound abnormality is if the mammogram appears normal.

When a marker clip is seen on subsequent mammograms it shows the radiologist where a biopsy has been previously performed and prevents repeated biopsies of the same abnormality.

Finally, some women with a diagnosed cancer are now having chemotherapy before surgery. In this instance, a marker is placed in the cancer or in an abnormal lymph node, as these may respond to the treatment and be too small to locate on imaging at a later date. Should the cancer largely disappear with chemotherapy, the marker will enable us to identify where it was with further imaging when the time comes to remove it surgically.

Marker placement is now very much standard practice when indicated.

Will I feel the marker?

Usually markers are not able to be felt. However, very rarely they may be felt if they are just beneath the skin surface.

Can the marker move?

The marker is designed to attach to the breast tissue to prevent it from moving and usually this works. When they are inserted under mammography there is a small chance they will move when the breast is released from the mammographic unit. This is a recognised complication known as the ‘concertina effect’. The radiologist will review pre and post clip placement imaging and can address this issue if it occurs.

The only other time the marker clip may appear to have moved is when the clip is in a large bruise (haematoma) which is liquid. As this is absorbed and resolves itself, the marker may appear to move.

The marker will not travel to other parts of the body.

Can I have an MRI when I have a marker clip in my breast?

There is no problem with having an MRI of the breast or any other body part with a marker clip. In fact, markers can be inserted at the time a biopsy is performed in the MRI unit if required. The markers are all MRI compatible. You will be provided with the relevant details of your marker clip to give to your MRI technologist should you require other MRI scans.

How does the marker get removed?

There is generally no need to have the marker removed. If the biopsy sample proves to be benign (not cancerous) the clip can simply remain in the breast. If surgery is required to remove the abnormality the marker will also be removed. In some circumstances we may need to localise the abnormality and/or the marker clip with a hookwire prior to surgery.

Will the marker set off metal detectors such as at the airport?

No, the marker is very small, measuring only 3mm to 4mm and is not a problem when it comes to metal detectors.

WHAT ARE THE RISKS OF HAVING A MARKER CLIP INSERTED?

The chances of the marker clip moving have been outlined above.

There is a very small possibility of an allergic reaction when any foreign item is inserted into the body. If you have an allergy to metals such as nickel or titanium, or to polyglycolic acid (PGA) or polyvinyl alcohol (PVA), please make sure you tell San Radiology staff when you arrive for your procedure.

You may develop a small bruise at the site. This typically happens more as a result of the biopsy itself, rather than the marker causing any significant bleeding or bruising.

Infection is a rare complication. At the San, we do everything possible to avoid this complication.

FURTHER INFORMATION

On the day of the procedure we will review the process in full with you, and will be happy to answer any questions you may have. We will obtain your written consent as part of the operation.

Of course, if you have concerns before the day you can contact San Radiology on **(02) 9480 9850**.

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