ULTRASOUND-GUIDED MAGNETIC CLIP PLACEMENT

WHAT IS A BREAST HOOK WIRE LOCALIZATION?

If an abnormality that cannot be easily felt needs to be surgically removed, surgeons need a marker to guide to the correct area of breast tissue. Magnetic clip placement involves insertion of a specially designed radiopaque and magnetic marker within the breast, precisely at the site of the suspicious lump.

A specialist radiologist positions the magnetic clip accurately using mammographic guidance, allowing the surgeon to locate it intraoperatively with a dedicated detection device. Wire localization is performed after administration of local anesthesia to numb the entry site of the guide.

WHY WOULD MY DOCTOR REFER ME TO HAVE THIS?

The use of a magnetic clip marks the area so that the surgeon knows exactly where to locate the suspicious lump before the start of surgery, making the entire surgical procedure quicker and more precise.

HOW DO I PREPARE FOR A BREAST HOOKWIRE LOCALISATION?

The advantage of a magnetic clip over a surgical wire is that it can be placed up to six months before surgery without risk of displacement from the area of interest.

No special preparation is required for magnetic clip placement. You should bring any recent imaging studies—including mammograms, breast ultrasounds, or breast MRI scans—to the procedure site so that they can be reviewed by the radiologist prior to the procedure.

WHAT HAPPENS DURING A BREAST HOOKWIRE LOCALISATION?

The radiologist will choose the method of imaging guidance for the magnetic clip localisation (i.e. mammography or ultrasound), usually depending on which type of imaging originally found the abnormality, and which type of imaging shows the area more clearly.

ULTRASOUND IMAGING GUIDANCE

You will lie comfortably on an examination couch and the radiologist will find the abnormality using images taken with the ultrasound probe. The breast is washed with antiseptic, and the radiologist will place a very fine needle into the breast with local anaesthetic to numb the area where the hookwire is to be inserted.

The radiologist will then insert a fine needle into the tissue that is to be removed. The position of the needle is checked using the ultrasound images. A final mammogram is carried out to show the surgeon where the tip of the wire lies in relation to the abnormality that is to be removed (a mammogram provides a better visual image for the surgeon of where the tip of the wire lies than ultrasound).

AFTER THE PROCEDURE

After the procedure, you may leave the center without any restrictions and schedule your surgical excision with your surgeon.

ULTRASOUND-GUIDED MAGNETIC CLIP PLACEMENT

HOW LONG DOES AN ULTRASOUND GUIDED BREAST HOOKWIRE LOCALISATION TAKE?

Ultrasound guided hookwire localisation takes approximately 30 minutes.

WHAT ARE THE RISKS OF A BREAST HOOKWIRE LOCALISATION?

Hookwire localisation is a simple procedure and most women have no problems.

- One problem that can occur is that some women may be allergic to local anaesthetic, although this is rare.

WHAT ARE THE BENEFITS OF A BREAST HOOKWIRE LOCALISATION?

Hookwire localisation assists a surgeon remove even the smallest amount of abnormal tissue identified on ultrasounds. This results in minimal postoperative changes and a shorter surgical time, thereby reducing the duration of general anesthesia.

WHO DOES THE BREAST HOOKWIRE LOCALISATION?

The team carrying out the hookwire localisation procedure will usually be a nurse, a radiographer and a radiologist (the specialist doctor who reads the images and carries out the hookwire localisation).