

Microdochectomy

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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What is a microdochectomy?

Milk ducts are small tubes in the breast that connect the breast tissue to the nipple. Fluid travels along the ducts and is discharged from the nipple.

A microdochectomy is a procedure to remove one or more of the milk ducts from your breast. It is usually performed to diagnose and treat a problem that causes a continued leak of fluid from a nipple.

Total duct excision is removal of a disc of duct tissue from behind the nipple. It is also performed to diagnose and treat a problem that causes a continued leak of fluid from the nipple.

What are the benefits of surgery?

Your nipple should not leak any more.

If you do have pre-cancerous cells, your doctor will be able to recommend the best treatment for you as soon as possible.

Are there any alternatives to surgery?

A microdochectomy has been suggested as the best way to diagnose and treat your problem.

What does the operation involve?

The operation is usually performed under a general anaesthetic and takes about 30 minutes.

Your surgeon will make a cut on the line of the areola (the darker area around your nipple). If you are having a microdochectomy, they will remove the duct and any growth from underneath your nipple. If you are having a total duct excision, your surgeon will remove a disc of duct tissue from behind the nipple.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you might need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

What complications can happen?

Some complications can be serious and can even cause death.

General complications of any operation

- Bleeding
- Infection of the surgical site (wound)
- Allergic reaction to the equipment, materials or medication
- Venous thromboembolism
- Chest infection

Specific complications of this operation

- Continued lumpiness under your wound
- Continued pain under the scar
- Continued leak of clear or bloody fluid from your nipple
- Loss or change of nipple sensation and/or reaction to cold or touch
- Change in nipple shape
- Reduced ability to breastfeed
- Damage to the blood supply to the nipple

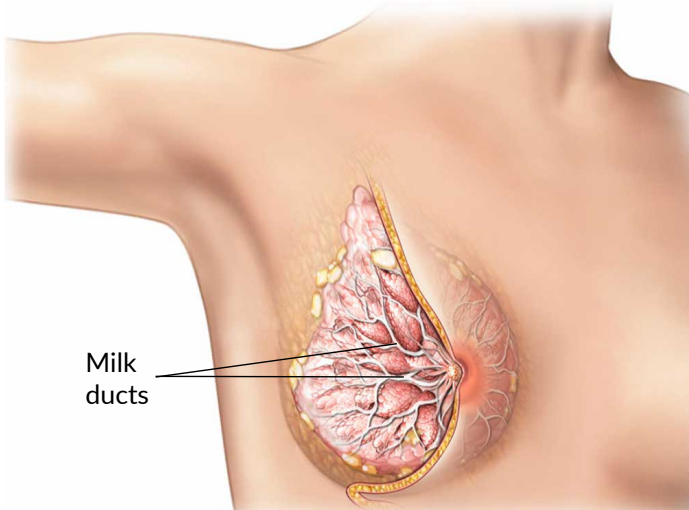
Consequences of this procedure

- Pain
- Scarring of your skin, which may be unsightly

How soon will I recover?

You should be able to go home the same day.

You should be able to return to work after 3 to 7 days.



Cross-section of a right breast

You should be able to return to normal activities after 5 to 10 days.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

The healthcare team will arrange for you to come back to the clinic within 3 weeks. The duct, and any tissue that your surgeon removed, will have been examined under a microscope. Your surgeon will tell you the results, check your wound, and discuss with you any treatment or follow-up you need.

Summary

A microdochectomy or total duct excision involves removing a milk duct (or disc of milk ducts) from your breast. The procedure will stop a continued nipple discharge and help find out what is causing the discharge.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

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Acknowledgements

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Illustrator

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