

Having a diagnostic intra-abdominal biopsy

This factsheet explains why you need to have a biopsy and what to expect. If you have any questions, please ask.

What is a biopsy?

A biopsy is a procedure where a sample (or samples) of tissue is taken from an area needing further investigation.

The area is numbed with a lidocaine injection (local anaesthetic). Using guidance from either an ultrasound or CT scan, a small cut is made in the skin and a special biopsy needle is inserted to obtain a sample of the tissue. The sample is then sent to the laboratory for further tests. We will keep you as comfortable as possible during the biopsy; it should not be painful.

Why do I need a biopsy?

Previous tests or examinations will have shown an area of abnormal tissue in your body. It is not always possible to tell the exact cause of the abnormality from a scan. The simplest and most accurate way of finding out is to remove a tiny piece of the affected tissue for a pathologist to examine.

Who has made the decision?

The consultant in charge of your case, and the doctor carrying out the biopsy will have discussed your situation and feel this is the best option for you.

Where will it be done?

The biopsy will be carried out in the Imaging department.

How do I prepare?

There is no special preparation but you may require routine blood tests prior to the procedure. We will need to check what medication you are taking to see if this affects how and when the biopsy is performed. Please tell us about any medicines you take, prescribed or not prescribed.

If you are taking any anti-coagulation medications (medications which thin your blood) you may need to stop these for a period of time prior to the procedure. Please let us know if you are allergic to tapes, plasters or any drugs before the procedure.



What happens during the procedure?

A doctor or nurse will ask you to remove any clothing covering the area to be biopsied and will give you a hospital gown. The doctor will take the biopsy and a nurse will assist. The procedure can take 15 to 30 minutes to complete.

We will ask you to lie in a position that allows the biopsy to be taken safely. If certain types of movement or position are difficult, please tell the staff.

The area to be investigated will be numbed with local anaesthetic, using a fine needle. You may feel a stinging sensation as the local anaesthetic is given but this wears off quickly.

Once the area is numb, the doctor will make a small cut in your skin and insert the biopsy needle to take several samples of tissue. They will be guided either using an ultrasound probe or using CT images. The biopsy needle makes a loud clicking sound as it takes a sample. We will check with you throughout the procedure that you remain pain free. Most people feel only pressure but no pain.

After the samples have been taken, the nurse will apply pressure to the area before securing a dressing. We will need to keep you in hospital for 2–6 hours for observation.

Are there any complications or risks?

- Allergic reactions are rare due to the type of anaesthetic we use. However, you may experience skin redness, rash or hives.
- Mild pain is common, severe pain is rare.
- There is low risk that having the biopsy could cause damage to the bowel. If this should happen, in the majority of cases no action is required, but very rarely an operation may be needed.
- Bruising and haematoma are both low risk.
- Bleeding is a low risk.
- If the procedure is performed under CT guidance, we will expose you to ionising radiation when we carry out this examination. We are all exposed to ionising radiation from naturally occurring sources such as cosmic rays, certain types of soil and rocks and even food we eat. Ionising radiation can cause cell damage that in turn, after many years, may turn cancerous. The radiation associated with your exam will therefore carry a small risk which is less than 0.1%. This risk will be far outweighed by the benefits of having this exposure. We will also tailor the amount of radiation we use to you.

Are there any extra procedures which may become necessary during the procedure?

- Rarely a blood transfusion may be required, if there has been significant bleeding
- In exceptionally rare occasions, an emergency operation may be required due to a complication of the biopsy.

What happens afterwards?

You should keep the dressing on and the area dry for 24 hours. You may then take it off in the bath or shower and wash with water. It can then be left with no dressing on. Occasionally it is necessary



to use a more substantial pressure dressing. If this is the case, we will give you extra instructions at the time.

Most people feel fine to travel home following the procedure and can return to their normal routine. However we recommend that you avoid strenuous exercise for 24 hours to give the wound time to heal.

After the procedure you may experience some tenderness and bruising in the biopsied area. This is normal. To help with the tenderness, you may take regular paracetamol as instructed on the box. If this does not help to control your pain, please contact the Sarcoma Clinical Nurse Specialists. The bruising should get better within a week.

When can I expect my result?

The result of the biopsy can take between 10–14 working days, or sometimes longer. We will arrange an appointment to give you the result. Occasionally, if the results are not clear (usually this is for technical reasons) we may have to repeat the biopsy.

Contact details

If you develop any increasing pain, abdominal bloating, start to feel unwell or have any concerns, please contact us.

Sarcoma Key Workers/ Clinical Nurse Specialists: 020 7811 8208

Alternatively, please call:

The Royal Marsden Macmillan Hotline: 020 8915 6899

Available 24 hours a day, 7 days a week

