

Case Study

Removal of Atypical Ductal Hyperplasia with a Novel Soft-tissue Excision Device

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Introduction

This case study reports early surgical experience with the recently introduced Phantom Flexible Loop Electrosurgical Electrode (Rubicor Medical, Redwood City, CA).

Background

Subject: Female, Age 57
Patient presented with indeterminate microcalcifications on routine mammogram. A percutaneous biopsy with stereotactic guidance was performed.

Core Biopsy Diagnosis: Atypical Ductal Hyperplasia; Left Breast
Cavity Size on Ultrasound: 2.0 x 1.0 x 0.9 cm (Figure 1)

Phantom Procedure

Percutaneous Incision: 8 mm; 3:00 to the nipple
Secondary Incision (removal): Secondary incision to facilitate removal of excised specimen was 3 cm in length directly over tumor. Surgical cavity post-procedure after specimen retrieval is seen in Figure 2. Closure of retro-areolar incision post procedure is represented in Figure 3.

Extraction Method: Babcock forceps
Orientation Method: Davidson marking system

Pathology and Outcome

Specimen Size: 4.4 x 2.3 x 2.2 cm (Figure 4); top of biopsy cavity seen centrally located in specimen

Pathology Assessment: Fibrocystic changes, evidence of previous biopsy, no residual epithelial atypia present.

Procedure Time: 12 minutes from device insertion to cavity closure

Cosmetic Outcome: Surgeon assessment: excellent cosmesis on percutaneous and surgical incisions.

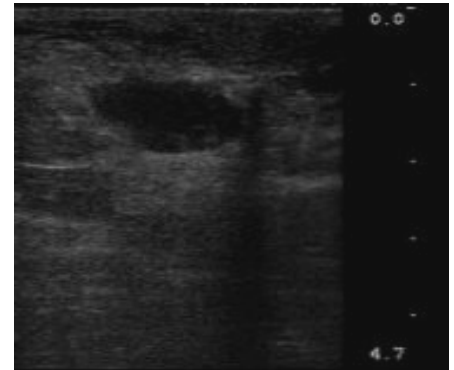


Figure 1: Ultrasound image biopsy cavity



Figure 2: Cavity post specimen excision



Figure 3: Specimen removal incision



Figure 4: Excised specimen

