



# The Basics of Biopsies

If your doctor thinks you might have cancer, you will probably undergo a procedure known as a biopsy. There are many types of biopsies, but in all types, a doctor will remove a sample of tissue from your body. The tissue sample will then be examined for evidence of cancer.

The idea of a biopsy—let alone cancer—can be frightening. But it may ease your worries to know more about the different types of biopsies and what happens after the procedure.

## Before the biopsy

A biopsy is done at a spot where tissue appears to be growing abnormally. Before the biopsy, your doctor will usually perform other tests (such as scans or blood tests) to see if cancer can be ruled out. If cancer can't be ruled out, a biopsy can determine whether the growth is malignant (cancerous) or benign (non-cancerous).

## Types of biopsies

- **Fine needle aspiration** (also called FNA) is a common type of biopsy that uses a thin needle about the size of an injection needle. The doctor inserts the needle through the skin and into the growth to collect cells for testing. You usually won't need any anesthesia, and results are usually available within hours.
- **Core needle biopsy** uses a larger needle to withdraw a small core of tissue from the growth. The needle is inserted through a small cut made in the skin. A local anesthetic is usually given at the insertion site. Afterward, you may have bruising at and around the site. If the growth is difficult to feel through the skin, the doctor may use ultrasound or another type of imaging to help guide the needle.



**A biopsy can determine whether a growth is cancerous.**

- **Endoscopic biopsy** is done with a thin, flexible tube that has a light or camera on one end. The tube is inserted through a cut in the skin or a natural opening, such as your mouth, and guided to the growth. There, the doctor can collect a cell sample using small scissors, a brush, or a needle attached to the end of the tube. Sometimes a sedative or local anesthetic is used with endoscopic biopsy.
- **Incisional biopsy** is done by making a surgical incision and removing a portion of a growth for testing. This is most commonly done for extremely large masses in soft tissue (such as muscle, fat, and connective tissue). Incisional biopsy usually requires a local or general anesthetic

and should be performed by an experienced surgeon.

- **Excisional biopsy** involves complete removal of a tumor. Excisional biopsies are usually performed for small growths, such as those on the skin. Like incisional biopsy, excisional biopsy usually requires a local or general anesthetic and should be performed by an experienced surgeon.

Your doctor can explain which procedure is best for you and why.

## After the procedure

Tissue collection is just the first part of a biopsy. The second part is done in a laboratory by a pathologist, a doctor who is trained to examine the tissue for any evidence of cancer. The pathologist will place small amounts of your tissue on glass slides, stain them with chemicals, and look at them under a microscope. To a pathologist, cancer cells usually look very different from normal cells.

The pathologist will write a report on the biopsy findings and give it to your doctor. If the growth is cancer, your doctor will discuss treatment options with you.

## Will a biopsy cause cancer to spread?

A biopsy will almost never cause cancer to spread. If you are worried about this possibility, ask your doctor to explain the steps that will be taken to make sure the biopsy is done safely. ●

For more information, talk to your physician, or:

- call askMDAnderson at 1-877-632-6789
- visit [www.mdanderson.org](http://www.mdanderson.org)

**OncoLog, March 2008**

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