



Oxford University Hospitals  
NHS Foundation Trust

# Wide Local Excision

Information for patients



The aim of this booklet is to give you some general information about your surgery. If you have any questions or concerns after reading it please speak with your Specialist Nurse or a member of staff at the Day Surgery Unit at the Churchill or Horton Hospital. Telephone numbers are given at the end of this booklet.

## **What is a wide local excision?**

The purpose of this operation is to remove the cancer and the immediate area of surrounding breast tissue. This leaves a scar on the breast.

A wide local excision may be recommended for a number of reasons, for example:

- If the cancer is small in relation to your breast size.
- If the cancer is in a suitable position in your breast.
- If the cancer has developed in only one area of your breast.
- If, after discussion with your Surgeon and Nurse Practitioner, you choose to have a wide local excision.

## **What are the benefits of this operation?**

- The main benefit of surgery is that cancer is removed from your breast.
- Having a wide local excision means that you can keep your breast.

## **What are the risks?**

All operations involve risks. You need to be aware of these so that you can make an informed choice about surgery. Your Surgeon will talk to you in more detail if there are any individual risks that may specifically apply to you.

### **Risks associated with a wide local excision are:**

#### **Further surgery**

It is important that all of the cancer is removed. Sometimes it is necessary to have a second operation to achieve this. This may occasionally lead to a mastectomy, where the whole breast, including the nipple, is removed.

#### **Bleeding**

If there is obvious bleeding from your wound site immediately after surgery, a nurse may simply put an extra dressing in place to help it stop. Very rarely another operation may be needed if the bleeding continues.

#### **Deep vein thrombosis**

This is a blood clot that can form in a vein, usually in the leg. This can happen after any operation and general anaesthetic. The risk of getting a DVT is reduced by wearing special stockings and/or having an anti-clotting injection. We advise you to start moving around soon after you are able to get out of bed following the operation and to stay active on your return home.

#### **Seroma**

Sometimes, after surgery, the wound continues to produce fluid under the scar, which cannot escape. The fluid may collect and cause swelling. This collection of fluid is called a seroma. It is quite a common problem after breast surgery and is not harmful in any way. You will notice that the wound becomes swollen under the scar of your armpit. A seroma can be drained by your Specialist Nurse if it becomes painful, however it is better to allow it to reabsorb naturally when possible.

## **Cosmetic result**

This operation will leave a permanent scar that will fade over time. The scar from this operation will vary in size, depending on the size of the cancer and/or the size of your breast. Depending on the amount of tissue removed, your breast may not be the same size or shape as before. If you have concerns about the size or shape of your breast after surgery, please discuss them with your Specialist Nurse.

## **Infection**

All surgery carries a risk of developing an infection. This is rare but can be treated with antibiotics.

## **Alternative treatments**

Your surgeon will recommend the surgery that is the safest option for you. This may leave you with a choice between having a wide local excision and a mastectomy. Your Surgeon and Specialist Nurse can talk to you about this and help you come to a decision.

You may decide that you can't agree to any kind of breast surgery. In this case your Surgeon and your Specialist Nurse will talk to you about other available treatment options. These could include radiotherapy or other drug treatments. However, you must remember when exploring these options that they may not be considered as safe for you as having breast surgery. If you still find it a hard decision to accept, you may like to consider asking for a second opinion from another specialist.

# Preparing for admission to hospital

## Pre-admission clinic

You will need to come to a pre-admission clinic to ensure that you are as physically fit as possible before your surgery. They will do bloods, blood pressure recordings and other tests if required to ensure your fitness for a general anaesthetic.

Some patients having surgery with sedation and local anaesthetics may also have an assessment.

The pre admission team will advise regarding taking of your normal medications on the day and will give you a written plan of any medications that need to be omitted.

Preparing for admission to hospital can be an anxious time. You will have the opportunity to talk to your Specialist Nurse about your diagnosis and surgery before your operation. Your pre-admission clinic appointment will be sent to you by email/text or post.

## Employment

If you work you will need to let your employer know how much time you need to take off to recover. Normally we advise you to take 2 to 4 weeks off work. If your job is particularly strenuous or tiring you may need longer than this. If you need a medical certificate (fit-note) for your employer, staff can give you one that covers your stay in hospital and the expected recovery time at home.

## Caring responsibilities

If you have responsibility for the care of someone and are anxious about this, it can be helpful to talk with your GP or Specialist Nurse. They may be able to offer suggestions for help both during and after your admission. You will be able to look after yourself when you are discharged home, but you may need help at first if you care for someone else.

## Living alone

If you live alone, you may be concerned about how you will cope after your surgery. Most people are able to manage at home. For example, you will be able to wash, dress, cook and do light household tasks for yourself. It might be advisable to make some arrangements for help with shopping or any heavier tasks for the first week or two.

## **Admission**

You will be admitted to the Day Surgery Unit on the day of your surgery.

## **Before Surgery**

You will not be allowed to eat for 6 hours before the anaesthetic (this includes not chewing gum). You may sip water up to 2 hours before. Occasionally a pre-med to relax you may be given in particular circumstances. The anaesthetist will see you on admission and discuss if this is required.

You will also see your surgical team on the ward soon after admission to answer any last minute questions and confirm your consent.

A nurse will accompany you to and from the operating theatre. The operation usually takes 1 hour. You will also spend up to an hour on the Recovery ward immediately after surgery.

## **After Surgery**

When you return to the Day Surgery Unit a nurse will regularly measure your pulse and blood pressure and will also check your dressings.

The fear of experiencing pain after surgery is understandable. However, severe discomfort is uncommon. The nurse will ask you about your pain and give you the pain relief you need.

You may be worried about experiencing nausea and sickness, but these side-effects are also uncommon. The nurse will ask you whether you are feeling sick and can give you anti-sickness tablets to stop or prevent this from happening.

The wound is closed using dissolvable stitches under the skin with either paper "stitches" (known as Steristrips) or surgical glue on the skin.

The typical stay in hospital is 6 to 8 hours.

The day after your operation, when you are back at home, you will feel more or less independent and able to get out of bed, but you will feel tired. We encourage you to take it easy for a couple of weeks – no hovering or ironing. If you have also had axillary node surgery, you will have been given an information booklet about arm exercises to do as part of your recovery.

Your scar may still be tender when you come to leave hospital. It is important to continue to take regular painkillers until it is more comfortable.

Showering (not bathing) is encouraged after 24 hours post surgery. If you have steristrips over your wound it is fine for you to get them wet. Pat them dry with a clean, soft towel but do not rub the wound.

You may find that the steristrips will gradually fall off before your results phone appointment if any concerns please ring the Breast Nurse Specialists.

If you have surgical glue to the scar this will gradually flake off. In the shower let the water run over and pat dry it is alright to use your normal shower cream or soap avoiding the scar area.

If glue is still present after 2 weeks and the scar has healed please lather the soap over the scar to help it soften.

You should refrain from driving for at least one week if you have not had any additional axillary surgery, or two weeks if you have had axillary surgery, as your insurance provider may not cover you to drive. If involved in an accident you may not be covered by your Insurance.

## Follow-up

You will have a telephone or video appointment with your surgeon around 2 weeks after your surgery. You will get confirmation of this appointment by post/email or text about 1 week before.

### Support

This can be a frightening time, particularly as you may have had few symptoms and this might be your first time in hospital. There are various people who specialise in the diagnosis and treatment of breast cancer who are available to give you support.

A Specialist Nurse is a senior nurse who has carried out additional training to help when a diagnosis of breast cancer is made. You will have been given a contact number of your keyworker and the Breast Nurse Specialist Team. They will be your main point of contact and they pick up messages Monday to Friday 9 to 4pm.

The Specialist Nurse can support you from the time you first come to the breast clinic, through to diagnosis and afterwards if you need any further treatment. She works closely with the breast Surgeon and the other doctors and health care professionals involved in your care.

She will provide:

- Information about your diagnosis and its treatments. She can also give you information about financial and social support.
- Help with practical problems. This includes advice about body shape, clothing, wound care, skin care and pain relief.
- Emotional support.

## How to contact us

### Specialist Nurses

Telephone: 01865 235 773 (Oxford)

Answerphone calls are picked up between the hours of 9am to 4pm. Monday to Friday.

Please be advised we do not work weekends or Bank Holidays.

Any messages left will be responded to on the next working day.

If your call is urgent and in need of medical attention, please call 111.



### **Ashley Surgical Day Unit**

Churchill Hospital Oxford.

Telephone: 01865 225 283

Open 7.30am to 8.00pm. Monday to Saturday.

### **Wytham Ward (Surgical Ward)**

Churchill Hospital Oxford.

Telephone: 01865 235 380

### **Daycase Surgical Unit**

Horton General Hospital Banbury.

Opens 08.00am.

Telephone: 01295 229 239 or 01295 229 767

## **Information and support groups**

### **Maggie's Centre, Oxford**

Maggie's offer free practical, emotional and social support to people with cancer and their families and friends.

Telephone: 01865 751 882

Website: [www.maggies.org/our-centres/maggies-oxford](http://www.maggies.org/our-centres/maggies-oxford)

### **Breast Cancer Now**

Provide free information and one to one emotional support for you, your family and friends.

Telephone: 0808 800 6000

Website: [www.breastcancercare.org.uk](http://www.breastcancercare.org.uk)

### **Macmillan Cancer Support**

Provides information, emotional support and practical advice by telephone or letter for people with any kind of cancer.

Telephone: 0808 808 0000

Website: [www.macmillan.org.uk](http://www.macmillan.org.uk)

## Benefits advice

This advice can be sought from Macmillan Oxford on:

Telephone: 01865 957 828

National number: 0808 808 00 00

Email: [macmillan@citizensadviceoxford.org.uk](mailto:macmillan@citizensadviceoxford.org.uk)

We also have a benefits advisor based at The Maggie's Centre Oxford.

You can contact them through the Maggie's website or phone / drop in to make an appointment.

Contact details already mentioned.

The includes:

- Checking eligibility for benefits.
- Help with applications and forms.
- Grant applications.
- Referrals to specialist advice services for housing, employment and debt advice.
- Information about referral to other sources of support.

## Local Support Groups

### **Oxford Breast Buddy Group**

Website: [www.oxfordbreastbuddygroup.co.uk](http://www.oxfordbreastbuddygroup.co.uk)

### **Maggie's Breast Cancer Networking and Support Group**

Call: 01865 751 882

Email: [oxford@maggies.org](mailto:oxford@maggies.org)

### **Positively Pink Oxford**

Email: [HYPERLIOxford](mailto:HYPERLIOxford) or  
[positivelypinkoxford@gmail.com](mailto:positivelypinkoxford@gmail.com)

Call Jean: 07927 236 961

Website: [www.positivelypinkoxford.org.uk](http://www.positivelypinkoxford.org.uk)

### **Ridgeway Breast Care Support**

Based in Swindon covers Wiltshire, Gloucestershire, and Oxfordshire.

Website: [www.ridgewaybreastcaresupportgroup.org.uk](http://www.ridgewaybreastcaresupportgroup.org.uk)

### **Banbury Breast Cancer Support**

Call Brenda: 01295 250 249 or 07719 455 669

### **Brackley Support Group**

Call Linda: 01869 810 735 or 07708 359 135 have left a message as they were not on my original list when checked the others will let you know.

### **Breast Friends Aylesbury**

Call: 07743 350 833

Email: [info@breastfriends-aylesbury.org.uk](mailto:info@breastfriends-aylesbury.org.uk)

Website: [www.breastfriends-aylesbury.org.uk](http://www.breastfriends-aylesbury.org.uk)

### **Bosom Pals Milton Keynes**

Email: [info@bosompalsmk.co.uk](mailto:info@bosompalsmk.co.uk)

Website: [www.bosompalsmk.co.uk](http://www.bosompalsmk.co.uk)

### **Butterflies-Breast Cancer Support Group, Swindon**

Call Tina: 07941 282 372

Email: [tmpgpp7129@outlook.com](mailto:tmpgpp7129@outlook.com)

## Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Breast Surgery Unit  
June 2024  
Review: June 2027  
Oxford University Hospitals NHS Foundation Trust  
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