

Patient information

Treatment of Mammary Duct Fistula

Breast Services

What is a mammary duct fistula?

This is an opening on your skin which goes into the inside of your breast to your milk ducts. It is usually near your areola (the coloured part around your nipple).

Why have I got a mammary duct fistula?

This may develop after having periductal mastitis (inflammation/irritation of milk duct). It may also happen after a breast abscess has been drained or after some inflammation near your areola where a lump discharges by itself; or after a biopsy of an area of periductal mastitis. This condition is most often related to smoking.

How is the mammary duct fistula treated?

This usually needs an operation so that the doctor can open the fistula area, which can be left open to heal by itself.

Alternatively, the doctor may remove the fistula area completely. You may also need antibiotics after the operation.

What are the benefits to having this treatment?

Having this operation should help this area of your breast to heal. It will mean you may no longer have any abscesses or open areas that will discharge pus. However it is a difficult condition to treat and may occur again after surgical treatment.

Smoking

This condition is usually associated with smoking and is unlikely to get better (even with an operation) unless you stop smoking. If you stop smoking this will greatly increase the chance of effective treatment.

Are there any risks or complications having the operation?

- The wound may take a while to heal, it may take several weeks.
- If an area of your breast tissue has been removed near the coloured area around your nipple (areola), there may be some loss of nipple sensation or your nipple shape may change (become deformed).

- After any operation, there is a risk of infection. Your doctor and nurse will try to make sure this does not happen and may ask you to take antibiotics to help with this.
- You may also have some bruising or swelling near the nipple (haematoma)
- In some women, it may not be possible to breastfeed after this operation.

Are there any alternative treatments available?

- Antibiotics and dressings, if your doctor thinks this will help
- We would recommend that you stop smoking.

What will happen if I don't have any treatment?

- Your condition may become worse.

What sort of anaesthetic will I be given?

Your doctor will probably ask you to have a general anaesthetic. General anaesthesia is drug-induced unconsciousness. It is always provided by an anaesthetist, who is a doctor with specialist training.

Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but usually short-lived; they include nausea, confusion and pain. Complications are rare, but can cause lasting injury; they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur. It is important to tell the anaesthetist if you have wobbly teeth, caps, crowns or veneers.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

You will be given an opportunity to discuss anaesthetic options and risks with an anaesthetist before your surgery.

If you are worried about any of these risks, please speak to your Consultant or a member of their team.

Getting ready for your operation

- We recommend that you stop smoking.
- You will speak to someone over the phone and you may be asked to come to a pre-operative clinic, usually one to two weeks before your operation. Here you may have blood tests, a chest X-ray, and sometimes a heart trace (ECG). You will be screened for MRSA (Methicillin resistant Staphylococcus aureus, an important skin bacterium).
- The staff will ask routine questions about your health, the medication you take at the moment and any allergies you may have.

- Your admission letter will tell you what time to stop eating and drinking before having your operation.
- Most patients are admitted on the day of their operation if they have already attended the Anaesthetic Assessment Clinic.
- You may be asked to confirm you understand the benefits of the operation and that there may be some complications (part A of consent).

The day of your operation

- You will usually come into hospital on the day of your operation.
- You will be able to discuss the operation with your surgeon.
- You will be asked to sign a consent form to say that you understand the procedure, and what the operation involves.
- Please leave all cash and valuables at home. If you need to bring valuables into hospital, these can be sent to General Office for safe keeping. General Office is open between 8.30- 4.30 Monday to Friday. Therefore if you are discharged outside these times we will not be able to return your property until General Office is open. The Trust does not accept responsibility for items not handed in for safe keeping.
- Please bring any medication you take into hospital with you.
- Please bring toiletries, nightwear and towels.
- You will be asked to remove all jewellery- plain band rings can be worn, but they will be taped.
- Please leave all body piercing at home. False nails and nail polish will also need to be removed if worn
- If you take regular medication. You will be told to take this if necessary.
- You will be asked to put on a gown and disposable underwear.
- A bracelet with your personal details will be attached to your wrist.
- You may be prescribed some medication to take before your operation by the anaesthetist. A member of the nursing staff will give this to you.
- A nurse and porters will take you to the operating theatre.
- Your dentures, glasses and hearing aid can stay with you on your journey to the operating theatre.
- When you arrive at theatre, the ward nurse will leave you, and you will be asked to put on a disposable hat. You will be taken into the anaesthetic room and a member of theatre staff will check your details with you and you will be given your general anaesthetic

What shall I expect after my operation?

- You will be in the operating theatre for about 30 to 40 minutes. A dressing will cover your wound. (If you have stitches, they will dissolve and not need removing).
- Your pulse and blood pressure, breathing and wound will be checked regularly by a nurse. It is important that if you feel any pain you must tell the nursing staff, who can give you painkillers to help
- The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people sick. If you feel sick we advise you not to drink until this feeling has passed. The nursing staff can offer you an injection to help this sick feeling go away.

The first time you get out of bed, please make sure you ask a nurse to be with you. This is in case you feel dizzy.

As soon as the anaesthetic has fully worn off, you will be encouraged to sit out of bed. Later you may walk about.

Going Home

You may be able to go home the evening after your operation. If you are not able to do so, you will usually go home one to two days after your operation.

If you go home the same day as your operation and you have had a general anaesthetic and/or sedation, **you must have a friend or relative to take you home and have a responsible adult to stay with you for 24 hours.**

For the next 24 hours **you must not**

- Travel alone
- Drive any vehicle e.g. car, scooter or ride a motorcycle or bicycle
- Operate machinery (including domestic appliances such as a kettle).
- Climb ladders.
- Make important decisions, sign any business or legal documents.
- Drink alcohol.
- Return to work within 12 hours of treatment. Your general health and any medicines you are taking may increase the time you need off work.

You **should**

- Take it easy for the rest of the day, avoid strenuous activity.
- Take your medications as usual.
- Let someone else care for anyone you usually look after, such as children or elderly, disabled or sick relative

Discharge Information

Pain relief and medication

The nursing staff will advise you about painkillers before you leave the hospital. Please tell the nurses what painkilling tablets you have at home.

You may also need antibiotics, which your hospital doctor will prescribe for you. Please complete this course of treatment.

Your wound

Please discuss with your ward nurse. If you need a District Nurse to check your wound or change your dressings, the ward will arrange this for you.

Further appointments

Before you leave hospital you will be given an appointment to come back to clinic for a check up. There you will see the doctor who will check your wound and check whether you need any further treatments

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

Breast Care Nurses

Tel: 0151 706 2927

Text phone number: 18001 0151 706 2927

Breast Nurse Practitioners

Tel: 0151 706 2931

Text phone number: 18001 0151 706 2931

Your family doctor (GP) or Practice Nurse

Breast Cancer Care

Tel: 0808 800 6000

www.breastcancercare.org.uk

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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