

Groote Schuur Hospital Breast Clinic Guidelines

Management of Fibroadenomas

Clinical features of a TYPICAL FA

- <3cm
- well defined, smooth
- mobile

Management of a *TYPICAL* Fibroadenoma under 3 cm

| Clinical context | Investigations | Management | Follow up | Indication for surgery |
|------------------|--|--------------------|--------------------------|------------------------|
| < 20 yr old | Nil | Reassure | None | Not recommended |
| 20-25 yr old | Ultrasound and/or Cytology | Reassure | Annual for 2 yrs | Patient request |
| 25 - 30 yr old | Cytology +- histology Ultrasound | Offer excision | Annual | Most patients |
| > 30 yr old | cytology histology mammogram +- US | Recommend excision | 6 monthly if not excised | All patients |

Indications for Surgery in any age group:

- Giant fibroadenoma (> 5cm in size)
- Atypical clinical presentation: fixed, irregular, skin changes, lymphadenopathy, rapid growth
- Suspicious biopsy or ultrasound result

PLEASE NOTE:

1. Teenagers with typical giant fibroadenomas may proceed to excision without biopsy
2. Cytology and histology results must conclusively state: *fibroadenoma* or *benign fibroepithelial lesion* before recommending follow up only
3. Please give patients fibroadenoma patient information leaflet at visit
4. Teenagers with FA 3 – 5 cm should follow up visit 6 – 12m. Ultrasound if increases in size.