

Approach To Nipple Discharge

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Causes

Colour of discharge	Etiology
Red or pink (blood + serum)	Ductal papilloma & Ductal carcinoma
Clear yellow (serous)	Ductal papilloma, Duct ectasia (= periductal mastitis), Cyst & Ductal carcinoma
Green, brown, black (cell debris)	Duct ectasia
Purulent, foul-smelling	Mastitis/abscess
Thin, white fluid (milk)	Galactorrhoea/lactation

History & Examination

- 1. Is the discharge true?
- 2. Is the discharge significant?
- 3. Is the discharge worrisome?
- 4. Is it troubling the patient?
- Local Examination

Investigations

- 1. Discharge for cytology to detect malignant cells
- 2. Mammography/ US of both breasts to detect any underlying malignancy
- 3. Histology of biopsied lesion if found on imaging
- 4. Ductography, ductoscope & biopsy

Management

- If malignancy found, manage malignancy
- Excision for intraductal papilloma (microdochectomy, total ductal excision, hookwire localised excision)
- Antibiotics for mastitis/abscess + incision and drainage for abscess
- Conservative management for most other pathologies unless discharge persists and is troubling patient ☐ microdochectomy of offending duct