Introduction

Abnormal nipple discharge is an important clinical sign, since it is sometimes produced by malignant lesions. The most important factor in improving the survival statistics for breast carcinoma is early detection *(Nishida et al., 1989).* Mammary secretions are studied using cytological examination, traditional mammography, galactography and histological examination of bioptic samples. ***(Ragaglini et al., 1990).***

Non contrast mammography and cytology examination is of limited diagnostic value for abnormal nipple discharge. ***(Nishida et al., 1989).***

Galactography is reported to be a valuable procedure to localize the cause of nipple duct secretions or Haemorrhage ***(Tihansky, et al., 1987).***

Galactography is necessary for the detection of ductal carcinoma in early stage ***(Nishida et al., 1989).*** Galactograpy also offers the major advantage of precisely locating the topographic location of the mammary lesion. It is quick and easy to perform, practically exempt from complications or side effects.

Also, ***Baker et al., 1994*** illustrated the role of galactography as a contrast examination of the mammary ducts performed to identify and localize intra-ductal growth that may be the cause of spontaneous discharge from the nipple. Hence, it is necessary to throw more light on galactography.