

Patient information

Sclerotherapy and Ultrasound Guided Sclerotherapy

Vascular Department

Your Consultant /Doctor has advised you to have Sclerotherapy

The usual reason for sclerotherapy treatment is varicose veins but some patients with abnormal skin veins and birth marks may also be recommended to have this treatment.

Varicose veins may cause complications such as phlebitis (inflammation of a vein), eczema, bleeding, swelling and skin damage including leg ulcers.

Varicose veins are related to family history and being overweight. Your occupation and being on your feet all day are not a cause – but they may make varicose veins more uncomfortable. Pregnancy can be a factor, especially multiple pregnancies.

What is Sclerotherapy and Ultrasound Guided Sclerotherapy?

Sclerotherapy is an injection treatment for visible varicose veins when the main superficial veins are either not affected or have previously been treated by surgery or endovenous surgery (keyhole surgery inside the vein).

It is possible to treat large veins and the main skin veins but other treatments are more effective and give a better result. Sclerotherapy is best reserved for smaller and fewer veins.

The veins are injected with an oily substance that causes inflammation in the walls of the varicose vein. The oil becomes foamy when mixed with air allowing more surface contact with the vein walls and a more efficient treatment. Compression with a medical support stocking makes the vein walls stick together which prevents the varicose vein from filling up with blood. Over time the vein is absorbed back into the body and the vein is no longer visible.

A doctor or specialist practitioner can guide the injections into the right place with ultrasound either at the time of vein surgery or as an outpatient in the clinic area. Most patients will require only one or two treatments but some patients have multiple treatments over a period of several months.



What are the benefits of having Sclerotherapy?

The aim of sclerotherapy is to reduce the size and number of visible skin veins and improve the cosmetic appearance.

Sclerotherapy with or without ultrasound is an outpatient procedure if undertaken alone. Adding sclerotherapy to your operation for veins can save you additional appointments. The recovery time is minimal and most patients can return to work after a day or two.

What are the risks?

Common risks (greater than 1 in 10) include bruising around the treated vein. The bruising may be persistent and stain the skin a light brown colour.

Sclerotherapy is not always successful and may have to be repeated. Varicose veins can recur as time goes by.

Occasional risks (between 1 in 10 and 1 in 100) include thrombophlebitis (blood clot) in the treated vein. This may cause some pain, redness and a tender lump under the skin. Phlebitis can take quite a few weeks or even months to settle down.

You can reduce the risk of phlebitis by wearing your compression stocking properly and resting with the leg up rather than walking too much.

The injection site may develop a painful ulcer if the foam leaks out of the vein; this may result in a visible scar. Temporary chest tightness and a dry cough may occur at the time of the injection.

Rare risks (less than 1 in 100) include visual disturbances such as flashing lights or dimming of the vision, migraine and very rarely heart attack, transient ischaemic attack (TIA) and stroke.

Very rarely (less than 1 in 1000) patients have been reported to have seizures. Deep vein thrombosis (blood clot in a vein) and pulmonary embolism (blood clot in the lung) occur in less than 1 in 1000.

Are there any alternatives available?

Varicose veins can be compressed with medical support stockings. This is a very effective way of resolving symptoms of pain and aching in the legs from varicose veins.

Surgical removal of varicose veins by varicose vein avulsions is very effective (keyhole removal of visible varicose veins) but involves a general anaesthetic.

What happens if I decide not to have treatment?

The varicose veins will still be visible and there is a small risk of phlebitis and staining of the legs. Varicose veins tend to get slowly worse over time.



What sort of anaesthetic will be given to me?

No anaesthetic is required for sclerotherapy alone unless you are having vein surgery at the same time.

The day of your procedure

- No preparation is required on your part. You should wear clothes such as pants or trousers suitable for medical support stockings.
- You should avoid any creams or tanning products prior to your treatment.
- The doctor or nurse will measure your leg for the correct stocking size before undertaking the injections.

What should I expect after my treatment?

 You will be fitted with a tight full length class two medical support stocking before leaving the clinic.

Going Home

You will be allowed home on the day of your procedure.

Stockings

- You should wear your compression stocking on the injected leg(s) for two weeks, continuously day and night for the first week.
- The stocking can be removed at seven days (usually by yourself) to remove the
 dressings. Thereafter you will be able to remove the stocking yourself for bathing or
 showering the stockings should be reapplied until the two week period is finished.
- A spare stocking will be given so that the initial one can be washed (hand wash, leave to air dry, do not tumble dry).

Pain relief and medication

You should not require any regular medication. Simple tablet pain relief with Naproxen, Ibuprofen or Paracetamol will be enough if you have any discomfort.

Your wound

The injection sites will be covered with small dressings and a compressive pad.

Getting back to normal

You will normally be allowed to walk immediately. At home you should try to have a bit of rest with your feet up for the first week and then see how you are.

A few patients with very large veins will be instructed to rest their legs a lot to avoid phlebitis. You should avoid heavy exercise for two weeks.



Driving

You will be safe to drive when you can move your leg freely to allow an emergency stop. This will normally be at about one week but if in doubt, check with your doctor.

Returning to work

Depending on your job, you will be able to resume immediately. If in doubt, please ask your doctor.

Further Appointments

A follow up appointment in the vascular clinic of your local hospital will be arranged for six weeks after the treatment.

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

LiVES Contact Numbers

During your contact with us, it is important that you are happy with your care and treatment. Please speak to a member of staff and/or the ward/department Sister/Charge Nurse if you have any questions or concerns.

Vascular Ward Ward 3 Aintree University Hospital Tel: 0151 529 2028/2262

Vascular Nurses:

Aintree via switchboard Tel: 0151 525 5980 Bleep 5609/5594 or extensions 4691/4692

Royal Liverpool Hospital via switchboard Tel: 0151 706 2000 Bleep 4212 or extension 4675 Text phone number: 18001 0151 706 2000 Bleep 4212



Southport via switchboard

Tel: 01704 705124

Whiston Hospital 0151 290 4508/ 430 4199

Secretaries:

Aintree University Hospital

Tel: 0151 706 3691/3523/3524/3481/3457/11813

0151 529 4950/4953

Southport/Ormskirk Tel: 01704 704665

Whiston Hospital

St. Helens and Knowsley NHS Trust

Tel: 0151 430 1499

NHS 111 Tel: 111

Circulation Foundation:

www.circulationfoundation.org.uk/vasculardisease/

Smoking cessation:

Liverpool Tel: 0800 061 4212/ 0151 374 2535

Sefton Tel: 0300 100 1000 West Lancashire Tel: 0800 328 6297

Liverpool Vascular and Endovascular Service Aintree University Hospital Lower Lane Liverpool L9 7AL

Tel: 0151 525 5980

vascsecs@liverpoolft.nhs.uk

Participating Hospitals in LiVES are:

- Liverpool University Hospitals NHS Foundation Trust
- Southport District General Hospital
- Ormskirk District General Hospital
- Whiston and St Helens Hospitals



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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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زانیاریی پیّو مندیدار به و نهخوشانه ی له لایه ن تراسته و ه پهسهند کراون، ئهگهر داوا بکریّت له فوّر ماته کانی تردا بریتی له زمانه کانی تر ، ئیزی رید (هاسان خویندنه وه)، چاپی گهوره، شریتی دمنگ، هیّلی موون و ئهلیّکترونیکی ههیه.

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