

SCLEROTHERAPY

This form is designed to provide you with the information you need to make an informed decision of whether or not to have sclerotherapy performed. If you have questions or do not understand the potential risks, please do not hesitate to ask us.

What is Sclerotherapy?

Sclerotherapy is a popular method for eliminating varicose veins and superficial telangiectasia's ("spider veins") in which a solution called a "sclerosing agent" is injected into the veins.

Does Sclerotherapy work for everyone?

The majority of persons who have sclerotherapy will see good improvement, typically 50-70% improvement after a couple treatments. Unfortunately, there is no guarantee that it will be effective in every case. Approximately ten percent (10%) of veins treated do not disappear after six (6) treatments. In very rare instances, the patient's condition may become worse after sclerotherapy treatment.

How many treatments will I need?

The number of treatments needed to clear or improve the condition differs from patient to patient depending on the extents of varicose and spider veins present. Most patients will have two (2) to three (3) treatments but some will need more.

What are the most common side effects experienced with Sclerotherapy?

1. **Itching:** Depending upon the type of solution used, you may experience mild itching along the vein route. This itching normally lasts one (1) to two (2) hours but may persist for a day or so.
2. **Transient Hyperpigmentation:** Approximately ten percent (10%) of patients who undergo sclerotherapy notice a discoloration of light brown streaks after treatment. In almost every patient, the veins become darker immediately after the procedure. In rare instances, this darkening of the vein may persist for four (4) to twelve (12) months. Typically, 98% of cases with hyperpigmentation resolve after 1 year.
3. **Sloughing:** Sloughing occurs in less than one percent (1%) of the patients who receive sclerotherapy. Sloughing consists of a small ulceration at the injection site, which heals slowly over one to two months. A blister may form, open and become ulcerated. The scar that follows should return to a normal color. This usually represents injection into or near a small artery and is not preventable.
4. **Allergic Reactions:** Very rarely a patient may have an allergic reaction to the sclerosing agent used. The risk of an allergic reaction is greater in patients who have a history of allergies.
5. **Pain:** Some patients may experience moderate to severe pain and some bruising, usually at the site of the injection. The veins may be tender to the touch after treatment and an



uncomfortable sensation may run along the vein route. This pain is usually temporary, in most cases lasting one to at most seven days.

6. **Telangiectatic Matting:** This term refers to the development of tiny new blood vessels in the treated area. This temporary phenomenon occurs two (2) to four (4) weeks after treatment and usually resolves within four (4) to six (6) months. It occurs in up to eighteen percent (18%) of women on estrogen therapy and in two percent (2%) to four percent (4%) of all patients.
7. **Ankle Swelling:** Ankle swelling may occur after treatment of blood vessels in the foot or ankle. It usually resolves in a few days and is lessened by wearing the prescribed support stockings.
8. **Phlebitis:** Phlebitis is a very rare complication seen in approximately one (1) out of every one thousand patients treated for varicose veins greater than three (3) to four (4) millimeters in diameter. The possible dangers of phlebitis include a pulmonary embolus or blood clot, which travels to the lungs and post-phlebitis syndrome, which can result in permanent swelling of the legs.

What are the possible complications if I do not have Sclerotherapy?

In cases of large varicose veins, greater than three (3) to four (4) mm in diameter, spontaneous phlebitis and/or thrombosis may occur with the associated risk of pulmonary emboli. Additionally large skin ulcerations may develop in the ankle region of patients with long-standing varicose veins with underlying venous insufficiency. Rarely, these ulcers may hemorrhage or become cancerous.

Are there other procedures to treat varicose veins and telangiectasia's? What are their side effects?

Because varicose and telangiectatic leg veins are not life-threatening conditions, treatment is not mandatory in every patient. Some patients may get adequate relief of symptoms from wearing graduated support stockings. Ambulatory phlebectomy is a procedure where certain types of veins can be removed through small surgical incisions. The complications of this procedure are similar to sclerotherapy with the addition of small surgical scars.

Vein stripping and/or ligation may also be utilized to treat large varicose veins. This may require a hospital stay and is performed while the patient is under general anesthesia. Risks of vein stripping and/or ligation include permanent nerve paralysis in up to thirty percent (30%) of patients, possible pulmonary emboli, infection, and permanent scarring. General anesthesia has some associated serious risks as well.

What if I experience a problem after receiving sclerotherapy?

If you notice any type of adverse reaction, please call the office immediately.



SCLEROTHERAPY BEFORE & AFTER CARE INSTRUCTIONS

Supplies: (bring these with you on your treatment day)

- Graduated Medical Grade Support Stockings 30-40mmHg (Jobst, Medi, Sigvaris, Venosan, are some common brands) –thigh high, open toed are **REQUIRED** and available online or at CalMed Pharmacy
24031 Marguerite Pkwy #A
Mission Viejo, CA 92692
949-586-1700
- Loose fitting shorts

Before your treatment:

1. Inform your physician if you are taking birth control pills or estrogen or an antibiotic called minocycline.
2. Do not take aspirin, ibuprofen, or nonsteroidal anti-inflammatory drugs (i.e. ibuprofen), for seven (7) days before your treatment.
3. Do not drink alcoholic beverages and do not smoke for 2 days before and 2 days after your treatment as this may slow the healing process.
4. Before your appointment, shower and wash your legs with antibacterial soap. Do not apply any cream or lotion to your legs.
5. Do not shave your legs the day of the appointment to avoid discomfort.
6. Bring loose fitting shorts or a leotard to wear during the treatment.
7. Eat a light meal or snack before your appointment.

After your treatment:

1. Immediately after the treatment, we will put on your support stockings. You will be required to walk 10-30 minutes. Be sure to have comfortable shoes with you.
2. If traveling over 30 minutes to the office, either have someone else drive you so that you may move your legs while traveling, or take a break every 30 minutes to walk around until you are home.
3. You can resume normal activity after the treatment except to avoid standing for long periods, and strenuous activity such as high impact aerobics and weightlifting for 48-72 hours. Walk every day at least an hour – the more the better!
4. Avoid hot baths for 2 weeks.
5. Wear the support stockings as instructed – 24 hours a day for 7 days after the procedure and then during the day for one month. After healing, you may find them helpful to wear during travel or when your legs ache.

Please do not hesitate to call the office if you are having any problems with tenderness, redness or swelling.

