



Sclerotherapy is a popular method for eliminating varicose veins and superficial telangiectasias ("spider veins") in which a solution, called a sclerosing agent, is injected into the veins. After each sclerotherapy session, the veins may appear darker at first. Echo sclerotherapy uses an ultrasound to find the veins that are less visible on the surface of the skin, so it can treat the deeper "root" veins.

The majority of persons who have sclerotherapy performed, will be cleared and/or see improvement over time. Unfortunately, however, there is no guarantee that sclerotherapy will be effective in every case. Approximately 10% of patients who undergo sclerotherapy have poor to fair results. A poor result occurs when the veins have not totally disappeared after 12 months.

1. What should I expect during the procedure?

Echo sclerotherapy is conducted in our office without the use of anesthesia. Ultrasound is used to get a better map of the veins below the skin and to find the deeper varicose vein formations. Following this map, the provider will guide a needle into the vein and inject a treat-

ment solution – a foamed sclerosant for larger veins, and a non-foamed solution for smaller vessels – which causes the veins to no longer be able to function. A typical session is relatively quick, lasting 15 to 45 minutes. Patients can receive anywhere from 5 to 20 injections per session.

2. What do I need to do before my procedure?

Please **do**:

- Fill the prescription for **compression stockings**, and **practice putting them on** before the procedure. **Bring them on the day of the procedure.**
- Keep the afternoon or evening free so that legs can be elevated if instructed by your provider.
- You may eat before your procedure.

3. What do I need to do after my treatment?

After the treatment, the leg will be wrapped in compression stockings. Remain active and do not spend too much time in bed during the recovery period since this increases the chance of complications. Patients should **wait 3 days** before resuming running,



aerobic exercise, or biking. **Avoid tanning or sunbathing**, and use sunscreen if you are going to expose your legs to sun.

Wear the compression stockings continuously for three complete days, removing them only to shower. Wear them while sleeping. After three complete days, compression stockings are optional.

Take acetaminophen or 600 mg of ibuprofen every 4-6 hours as needed for pain. If there is any tenderness in the treated vein, apply ice or a warm compress for 15 minutes. You can decide



which one makes the leg feel better.

Schedule a follow up ultrasound examination 3-7 days after the procedure to assess the treated vein and to check for adverse outcomes. Within one week, the target vein should be successfully closed.

An I&D (incision and drainage) could be recommended approximately 2-4 weeks after echo sclerotherapy treatment. This procedure may reduce the risk of permanently staining the overlying skin, and can decrease pain and swelling in the treated veins. Multiple I&D's may be necessary for best results.



The billing for the procedures will be sent to your health insurance company.

4. What will my legs feel like?

The injected areas may be warm to the touch, and can become swollen. As the legs begin to heal, the swelling and the lumps may decrease and flare up at certain times – this is a normal occurrence. There may be mild itching, and temporary tenderness and bruising at the injection site. It is normal to experience some painful areas that feel lumpy or bumpy, which may turn red or dark and bruise-like. This will remain for 3-6 months, but over time the areas will decrease in size and the color will fade.

Temporary brownish discoloration is common. It is caused by a pigment released in the skin from veins in the process of disintegrating. These stains can take up to 12 months to fade, depending on the size of the veins, your skin type and your individual healing ability.

5. What are the possible

complications?

The most common side effects experienced with sclerotherapy treatment includes the following:

- **Itching:** Depending on the type of solution used, there may be mild itching along the vein route. This itching normally lasts 1 to 2 hours but may persist for a day or so.
- **Hyper Pigmentation:** Approximately 10% of patients who undergo sclerotherapy notice discoloration (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 4 to 12 months, or permanently.
- **Sloughing:** Sloughing occurs in less than 1% of the patients who receive sclerotherapy. Sloughing consists of a small ulceration at the injection site that heals slowly over 1 to 2 months. A blister may form, open, and become ulcerated. The scar that follows should return to a normal color.
- **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.

- **Pain:** A few 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. In most cases this pain is usually temporary, lasting up to 7 days.

- **Telangiectatic Matting:** This refers to the development of new tiny blood vessels in the treated vessel. This temporary phenomenon occurs 2 to 4 weeks after the treatment and usually resolves within 4 to 6 months. It occurs in up to 18% of women receiving estrogen therapy and 2% to 4% of all patients.

- **Ankle Swelling:** Ankle swelling may occur after treatment of blood vessels in the foot or ankle. It usually resolves in a few months and is lessened by wearing the prescribed support stockings.

- **Phlebitis:** Phlebitis is a rare complication, seen in approximately 1 out of every 1000 patients treated for varicose veins greater than 3 to 4mm in diameter. The possible dangers of phlebitis include the possibility of a pulmonary embolus (a blood clot to the lungs) and post phlebitis syndrome, in which the blood clot is not carried

out of the legs, resulting in permanent swelling of the legs.

Patients who experience severe adverse reactions should call the office at 920-233-1540.



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(6/2023)



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