



Woodbridge Dermatology & Laser Centre

www.woodbridgedermatology.ca

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SCLEROTHERAPY

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

What is Sclerotherapy?

Sclerotherapy is a popular method of eliminating varicose veins and superficial telangiectasias ("spider veins") in which a solution, called a *sclerosing agent*, is injected into the veins. The solution irritates the lining of the vein, causing local inflammation and eventually, your own immune system helps to dissolve the vein after 3-4 weeks. It takes time for the results to be noticeable. After each injection, a small cotton ball is taped to the skin to prevent bleeding. At the end of a session, there may be 30-40 cotton balls and tape on your leg(s). Then a tensor band will be applied to your leg(s) to be worn for the rest of the day. If you have a large number of veins, one leg at a time will be treated.

Does Sclerotherapy work for everyone?

The majority of persons who have Sclerotherapy performed will be cleared of their veins or at least see good improvement. 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. ("Poor results" means that the veins have not totally disappeared after the recommended number of 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 extent of varicose and spider veins present. 3-8 or more treatments may be needed; the average is four to six. Individual veins usually require one to three treatments. New veins will form in time and repeat treatments will be needed.

What are the most common side effects?

The most common side effects experienced with Sclerotherapy treatment are:

Itching: Depending on the type of solution used, you may experience mild itching along the vein route. This itching normally lasts 1 to 2 days.

Transient Hyperpigmentation: Approximately 30% 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 4 to 12 months. One percent (1%) of patients experience persistent pigmentation. Avoid sun exposure after sclerotherapy.

Sloughing: Sloughing occurs in less than 3% of patients who receive Sclerotherapy. This rarely occurs when sclerodex (sugar and salt) solution is used. This solution is the most commonly used agent here in this office. Sloughing consists of a small ulceration at the injection site that heals slowly. A blister may form, open, and become ulcerated. The scar that follows should return to a normal color.

Allergic Reaction: 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. Some patients can be allergic to the tape used.

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. This pain is usually temporary, in most cases lasting 1 to, at most, 7 days.

Thrombus: Uncommon occurrence but can be readily treated with drainage. Symptoms: ropey, painful area along the course of the treated vein.

Granulomas (rare): Can be treated with Kenalog injections. Symptoms: painful, firm area around a treated vein.

What are the other side effects?

Other side effects include a burning sensation during injection of some solutions, *neovascularization* (the development-usually temporary of new tiny blood vessels), transient phlebotic type reactions (swelling of the vein might cause the ankles of swell), temporary superficial blebs or wheals (similar to hives), and very rarely, wound infection, poor healing, or scarring.

Phlebitis is a very rare complication, seen in approximately 1 of every 1000 patients treated for varicose veins greater than 3 to 4 mm in diameter. The dangers of phlebitis include the possibility of 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.

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

In cases of large varicose veins (greater than 3 to 4 mm in diameter), spontaneous Phlebitis and/or Thrombosis may occur with the associated risk of possible 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 types of procedures to treat varicose veins and telangiectasias? What are their side effects?

Vein stripping and/or ligation may also be used to treat large varicose veins. This generally is an out patient procedure. Endovenous laser treatments for large veins can also be an option. Laser treatment for smaller veins is an option, especially for cases of neovascularization.

After Care:

Avoid flying in a plane for 1 month after treatment, unless support stockings are worn.

Do not moisturize legs on the day of treatment.

Do not tan for at least one month after a treatment.

Tensors will be applied after each session, to be worn for the rest of the day. Take off before bed.

Support stockings: 20-30 mm Hg – prescription will help to improve response to therapy and can help limit reoccurrence of veins and to be worn for at least 1 week after each treatment.

Walking is encouraged after treatment. Avoid high impact aerobics, running or weight lifting for 3-5 days after each session.

Avoid hot baths or hot tubs for 3 days after each session. (showers can be taken).

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**PATIENT'S INFORMED CONSENT FORM FOR
SCLEROTHERAPY**

By my initials, I acknowledge that I have received a copy of the Sclerotherapy informed consent form. _____ (initials).

By signing below, I acknowledge that I have read the foregoing informed consent form and that the doctor has adequately informed me of the risks of Sclerotherapy treatment, alternative methods of treatment, and the risks of not treating my condition, and I hereby consent to Sclerotherapy treatment performed by Dr. Gail Nield.

I understand that if I miss an appointment without notifying Dr. Nield's office prior to the procedure date, I agree to pay for the cost of the treatment.

I agree to photographs being taken to evaluate treatment effectiveness, for medical education, training, professional publication or sales purposes. No photographs revealing my identity will be used without my written consent. If my identity is not revealed, these photographs may be used and displayed publicly without my permission.

Patient's Name: _____

Patient's signature: _____ **Date:** _____