

Foam sclerotherapy

(Varicose vein injections)



Who is this leaflet for?

This leaflet is for people who have varicose veins, which may be treated with foam sclerotherapy. The leaflet explains the procedure. Please read it carefully and ask your surgeon if you have any further questions or concerns. These are general guidelines for your information and may not apply to specific cases.

What is foam sclerotherapy?

A small amount of a special chemical (sclerosant) is mixed with air to make a foam, and then under ultrasound guidance the foam is injected into the veins to be treated. The injections work by making the vein wall stick to itself, thus sealing (closing) it. Following treatment the vein is compressed with bandages. This is an essential part of the therapy.

Injection (sclerosant) therapy has been available for many years, but until recently it was used only for small varicose veins, such as those left behind after surgery. With the recent introduction of foam sclerotherapy to the United Kingdom it is now possible to treat larger veins using this modified technique.

Are there any alternatives?

Support Stockings can often control your symptoms. Alternatively varicose veins may also be treated with heat treatment (VNUS) or by surgery. The size and shape of your varicose veins will determine whether we are able to treat them using foam sclerotherapy.

What are the benefits of foam sclerotherapy?

Foam sclerotherapy uses chemicals that have been used for varicose vein injections for many years, but by mixing the chemical to form a foam, smaller doses can be used to treat your veins. The procedure is performed as an outpatient, and doesn't require an anaesthetic. You can resume normal activity straight away, and usually return to work the following day. It is ideal for treating veins that are either too small, or too twisty, for the other keyhole treatments, and appears to have fewer complications than traditional surgery.

What if I don't have treatment?

Many people never have treatment for their varicose veins. A few may develop problems such as ulcers, phlebitis and bleeding. If you do develop any of these problems, or if you have skin changes associated with your veins, we would advise treatment. However if you don't have any of these complications, your veins will probably only worsen slowly. If they are not troubling you it is perfectly safe to leave them untreated.

How do I prepare for foam sclerotherapy?

Please make sure you have stopped taking the oral contraceptive pill, which could increase the risk of a serious thrombosis (blood clot). Stop this one month before your appointment, but make sure you use an alternative method of contraception during this time. There is little evidence that low dose 'mini-pills' and hormone replacement therapy (HRT) need to be stopped.

What does it involve?

Under ultrasound monitoring, the foam preparation is injected into each vein and your leg is bandaged and placed in a full length stocking for a week. The foam causes inflammation in the vein, which then shrivels up and gradually becomes less visible. Sometimes the inflammation can be uncomfortable for a few weeks, and occasionally the skin may blister and become scarred.

Sometimes only one leg is treated at one visit. You may need repeat injections if both legs are affected, or you have many veins on one leg.

Please do not drive yourself home following your treatment. Arrange for somebody to collect you or take a bus or taxi.

What happens afterwards?

For the first 24 hours rest as much as possible, sitting with your feet elevated (raised) above the level of your hips. Take a few short walks and try to avoid standing still for any length of time. As the injection causes inflammation, you may need to take painkillers for 5-7 days.

After 48 hours, remove the bandage and cotton wool pads and replace the stocking. Wear the stocking day and night for the first week. During the second week you may remove it in bed and when taking a bath or shower. You may drive once the bandages and pads are removed.

The success of the treatment relies upon the pressure that the bandages and stocking apply to the injected area. Wear the stocking until the leg is completely comfortable on standing (usually 3-4 weeks).

Are there any risks or complications?

Following your injections, you may have slight discomfort, hardness or tenderness at the injection sites, which should gradually reduce over the next few weeks. If there is excessive redness, swelling or tenderness, you need to rest more with your leg raised so that your heel is higher than your hip.

Complications occur in about 5-10% of patients and include allergic reactions, temporary visual disturbance, deep vein thrombosis (DVT), headache, and in one case a patient suffered a stroke following foam sclerotherapy, but made a full recovery.

However injections are not a form of 'invisible mending' and while most patients experience no problems, you may experience one or more of the following:

- A persistent hard 'cord' in the line of your vein. This may take some months to settle down.
- Brown staining of your skin along the line of your vein. This occurs in more than a third of patients. This usually fades within 12 months but occasionally is permanent.
- Rarely, ulceration of your skin at the injection site.
- Failure of the injection to seal the vein. You may need multiple visits and injections. In 10-20% of patients complete sealing of the vein is not possible.

Can I fly following treatment?

Although the risk of blood clots is minimal, you are advised not to fly within six weeks of treatment.

Short flights may be possible, but if you have any doubts please discuss with your specialist.

Further information

If you have any questions or need further information, please contact your consultant's secretary on: 01872 252756

Further information on vein disorders and treatments is also available from:

National Institute for Clinical Excellence (NICE)

www.nice.org.uk

'Treating varicose veins with foam injections' NICE interventional procedure guidance 217 (May 2007)

www.circulationfoundation.org.uk/patient.html

If you would like this leaflet in large print, braille, audio version
or in another language, please contact the General Office on
01872 252690

