

## **Varicose Vein Injections**

This information is intended as a general guide only. Please ask if you have any questions relating to this information.

### **Injection therapy for Varicose Veins**

Veins with poorly- or non-functioning valves enlarge and then become varicose veins. They can have a bluish colour and bulge on the leg surface. Symptoms may include heaviness, aching, throbbing, itching and cramps or tiredness in the legs. Some patients may have skin discoloration, inflammation or ulcers on the skin.

### **How are Varicose Veins treated?**

Varicose veins that are not causing any problems do not need to be treated. In addition many of the symptoms that people attribute to varicose veins such as heaviness, ache, cramp and swelling are also very common in patients without varicose veins and there is no certainty that treatment will help. Varicose veins can be treated with stockings, surgery, laser, injection sclerotherapy or a combination of these treatments. A Vascular Surgeon will advise you about which treatments are available and with you make a decision about the treatment you wish to have. Very large varicose veins may need surgery, but a number of patients can be treated with a procedure called compression sclerotherapy. The doctor uses an ultrasound as a guide to see a picture of the vein so that the procedure is watched. A very fine needle is used to put a foam solution into the veins to block them. Several veins can be treated at the same time. Tight compression stockings are applied and then worn for a couple of weeks after the procedure and you will be required to go for a brisk walk for 15 minutes immediately afterwards and then twice daily. Some local redness may occur, but should fade over a few weeks. This treatment will often have to be repeated until a fair result is made.

### **How successful is sclerotherapy?**

After several treatments, most patients can expect an 80% improvement. The fading process is gradual and not often perfect. The sclerosant that is injected is called Sodium Tetradecyl Sulphate (STS) and can be used as a liquid or mixed with air to form a foam. STS has been used as a liquid to inject veins since the 1940s and as a foam since the 1990s.

### **Will treated veins recur?**

It is common after any form of treatment for varicose veins for them to recur. The recurrence rate after injection is higher than after surgery but the injection is easier to perform, does not require anaesthesia or hospital admission and requires no time off work. If the veins recur they can be treated by further injections. To help prevent recurrence, we recommend wearing support stockings when standing for a long time.

### **Before each appointment**

Do not apply moisturiser, suntan lotion or any creams to your legs on the day of your appointment.

### **Side effects to sclerotherapy**

During the treatment you may feel a burning sensation – this usually settles quickly once the stocking is applied and you go for a walk.

You may feel some discomfort after your treatment. You may take pain tablets 4-6 hourly. If there is significant pain or discomfort, remove and re-apply the stocking

Bruises at the injection site usually disappear within a few weeks.

**Rarely** painful ulcers may form immediately following or within a few weeks of the treatment. Please inform the clinic if these occur. These ulcers will heal and leave a small scar.

The injected veins may become hard and lumpy with redness over them. If this occurs treatment with paracetamol and an anti-inflammatory drug such as ibuprofen helps. The redness is almost never due to infection but is simply an inflammation as the vein closes. The redness then fades to a brown stain. Both the lumps and the skin staining then fade over a period of time.

It is difficult to predict how long the brown staining and lumps will stay. It is important to protect the brown staining from the sun as it is believed that this may make it permanent. In most people the staining has faded to a hardly noticeable area by 4 months. However, it may take up to two years for the final appearance and approximately 5% of patients will have permanent staining. Even if the staining is permanent, most patients prefer the staining to their original vein.

Fine red blood vessels (thread veins) may develop over the area where the larger veins were. This "matting" usually fades with time but may be permanent. It is unusual for this to be very noticeable and if it fails to settle may be treated with injection into the small veins. If you have thread veins already you are more likely to develop these. If you have thread veins then injecting the larger veins may improve their appearance but this is not predictable.

Numbness due to bruising of the nerves supplying skin occurs much less frequently than after surgery but may rarely occur. If so it may take 6-12 months to settle.

Allergic reactions to the sclerosant are rare.

Patients with migraine may experience an attack immediately after the treatment and are advised to bring their usual medication with them. They should also consider whether they need to have someone to accompany them in the event of an attack.

There are a number of rare and alarming complications which only last for a short time; these include visual disturbance, chest tightness, and confusion. It must be stressed these are unusual and not long lasting.

Vein injection has now been used in thousands of patients around the world and a number of serious complications have been reported – these include clotting in the deep veins (DVT), pulmonary embolus, heart attack and stroke. These however are very rare.

**Please note:**

If you are flying internationally or have major surgery planned for within 6 weeks of your treatment, it is very important that you notify your doctor before the procedure.