



Procedure Information

Sclerotherapy Injection

Introduction

Sclerotherapy is an intervention to treat varicose veins. It involves an injection of a sclerosing agent directly into the vein. The solution irritates the lining of the blood vessel, inducing inflammation with subsequent endofibrosis. The vessel then turns into scar tissue and fades from view.

Outcomes

The procedure eliminates varicose veins and “spider veins”.

Procedures

1. The procedure can be performed with or without anaesthesia.
2. The sclerosing solution is injected through a very fine needle directly into the vein. Mild discomfort and cramping may occur for 1 to 2 minutes during the procedure.

Possible Risks and Complications

1. Mild effects, such as itch
2. Redness at the injection site
3. Bruising around the injection site
4. Larger veins become lumpy and hard
5. Transient hyperpigmentation
6. Neovascularization

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all procedures are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising.

Pre-procedure Preparations

1. The procedures and possible complications will be explained by the doctor and a consent form must be signed prior to the procedure.
2. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform the doctor if you are taking medications that affect blood coagulation, such as Aspirin, Plavix, Warfarin, Xarelto or Pradaxa, nonsteroidal anti-inflammatory drugs (NSAIDs) such as Ibuprofen, Naproxen and Chinese medicine.
3. Applying lotion to the affected leg should be avoided.
4. You are not eligible if you are pregnant, breastfeeding, have a chronic illness or are bedridden.

Post-procedure Instructions (if under general anaesthesia)

General

1. After general anaesthesia, you may:
 - experience discomfort in the throat after tracheal intubation.
 - experience side effects of anaesthesia including feeling tired, drowsy, nausea or vomiting.

Inform the nurse if symptoms persist or worsen.

- feel dizzy after general anaesthesia. Please call for nurse assistance when getting out of bed to prevent a fall accident.

Diet

A normal diet may be resumed as instructed after recovery from anaesthesia.

Advice on Discharge

1. Medical grade support hosiery should be worn to compress the treated vessels.
2. Prescribed pain medication can be taken as needed.
3. The following should be avoided for at least 48 hours:
 - Aspirin, Ibuprofen or other anti-inflammatory medications
 - Hot baths
 - Hot compresses
 - Whirlpools or saunas
 - Direct exposure to sunlight
4. Showering is allowed. The injection site may be washed with a mild soap and tepid water.
5. Any aerobic activity should be avoided for 2 days after the procedure.
6. Immediately consult your doctor or return to the hospital for professional attention in the event of severe wound pain associated with redness and swelling, inflammation within 5 inches of the groin, a sudden onset of a swollen leg, formation of small ulcers at the injection site, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
7. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification