

CHARLOTTESVILLE DERMATOLOGY

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Commonly Asked Questions About Sclerotherapy

Q: What is sclerotherapy?

A: Sclerotherapy is a technique used to treat varicose veins by injecting the vein with an agent called a sclerosant. The sclerosant affects the vein lining, causing its destruction, and therefore the area can become almost invisible. Sclerotherapy can be done in the doctor's office, costs less than surgery, does not require stitches, and allows the patient to walk within minutes after the procedure. There is only slight discomfort, and cosmetic results become obvious within a week or two.

Q: How will my doctor determine if I am a good candidate for sclerotherapy?

A: Your doctor will take a complete medical history to decide whether you have any conditions (such as pregnancy, history of thrombophlebitis) that would prevent the use of this technique. Certain tests may be used to determine exactly which veins can be treated successfully with sclerotherapy. The tests are noninvasive and check to see how well blood flows from your leg veins back toward your heart.

Q: How does the doctor perform sclerotherapy? What does it feel like?

A: While the patient stands, the doctor marks the veins to be treated. The patient then lies down, and the doctor cleans the area to be injected with an alcohol wipe. The sclerosing solution will then be injected with a very fine needle into the affected vein. Larger veins require more injections.

Patients' tolerance to pain varies. Some find the procedure painless, whereas others report a tingling or stinging sensation upon injection of the sclerosant. A few patients find the procedure painful, but this is often related to use of a particular sclerosant (there are several).

Q: What causes spider veins?

A: No one is totally sure what causes spider veins. Certain families are predisposed to this condition, particularly female relatives. Certain things make spider veins worse: estrogens, pregnancy, and birth control pills, tight girdles and garter belts, prolonged standing or sitting, and trauma.

Q: Are there certain kinds of spider veins that cannot be treated?

A: Certain types of large varicose veins may not respond readily to sclerotherapy alone. These vessels may require a minor surgical procedure followed later with sclerotherapy. You may be referred to a vascular surgeon for complete or partial treatment of these specific types of large varicose veins. Some of the extremely small vessels may require treatment with a Pulsed Dye Laser.

Q: How long will it take for my veins to be treated?

A: Most treatment sessions last an average of 30 minutes. The number of treatments required will depend on the extent of your varicose veins.

Q: How will I take care of my legs after treatment?

A: Most doctors advise their patients to **wear compression stockings** for a period of time after sclerotherapy to aid its success. Patients are usually told to walk immediately after treatment and to take daily walks for up to 30 minutes afterwards. Usual activity levels can be maintained.

Patients are often advised to avoid certain postures (prolonged sitting, standing, sitting with legs crossed or hanging) for a time after sclerotherapy. The doctor may recommend avoiding vigorous or strenuous activity, certain medications, alcohol, hot tubs and hot showers for a while after sclerotherapy.

Q: Is there any way to prevent spider or varicose veins?

A: The use of support hose may be helpful in prevention of spider veins. Reducing weight and regular exercise may also be helpful.

Q: What are the possible side effects and complications?

A: The most frequent side effects include pigmentation (discoloration of the skin) along the treated vein, new spider vein formation, pain with injection, and temporary burning, reddening and itching after injection.

Ten to thirty percent of patients develop a small freckle-like tan to brown spot around the injected vessel. This usually resolves in 80% of patients within 3-6 months. A few patients will have a persistent freckle for up to a year.

Slight blistering may occur around the injected vessels and resolves within a couple days.

Swelling over the injection site may rarely occur. It is particularly common when patients have jobs in which they stand for long periods of time, or when vessels in the ankles are treated. The swelling is never dangerous but occasionally must be treated with elevation and compression dressings.

Sometimes a clot develops at the injection site (especially if the recommended compression hose are not worn for a proper amount of time). This clot will never cause internal problems, but its removal within 2 weeks of the injection will speed the healing process and decrease the incidence of freckling.

Superficial thrombophlebitis (an irritation of the injected vessel) occurs in less than 1 per 1000 patients. It may have to be treated with anti-inflammatory agents and compression stockings.

A small superficial ulceration of the skin overlying the injected vessel does not usually leave a scar but needs to be seen as soon as possible by your doctor.

Q: What does sclerotherapy cost? Will insurance pay for it?

A: The cost of sclerotherapy is related to the amount of time a physician spends treating the vein, which in turn depends on the extent of the veins. Insurance will only cover sclerotherapy when performed for medical (rather than cosmetic) reasons, for example, when the vein condition is causing significant pain. Prior to initiating treatment, you are required to obtain prior approval from your insurance company.

Please feel free to call our office with any further questions. (434)984-2400