

Sclerotherapy

This leaflet explains what sclerotherapy is and what is involved, including the possible risks. This leaflet does not replace informed discussions between you and your doctor, but can act as a starting point for such discussions.

If you have any questions about the procedure please ask the doctor caring for you.

What is sclerotherapy?

Sclerotherapy is a procedure to treat vascular malformations. Vascular malformations are rare, non-cancerous growths of blood vessels. They are present at birth. They tend to grow very slowly but may grow more quickly during puberty and pregnancy.

About half of vascular malformations can cause pain and swelling, and colour changes to the overlying skin. There is no cure for vascular malformations, but sclerotherapy can improve your symptoms.

The procedure involves injecting a liquid or foam, known as the sclerosant, into the vascular malformation to cause it to shrink. Often a course of injections is required. The number of injections will vary depending on the individual.

Ultrasound (a scanning technique used to produce an image of the inside of your body) is used to see where to place the injections. Contrast dye is used to produce an image of the vascular malformation under the X-ray machine.

The procedure is usually performed under a general anaesthetic (medications used to send you to sleep so that you are unaware during the procedure and do not feel pain). Alternatively, you may remain awake during the procedure but be sedated (made to feel slightly drowsy and relaxed).

Why do you need sclerotherapy?

You need sclerotherapy because you have a vascular malformation. Doctors will have reviewed images of the inside of your body from magnetic resonance imaging (MRI) scans and ultrasound scans and decided this is the best treatment for you.

What are the risks?

Sclerotherapy is a safe and effective procedure but as with any medical procedure, there are some potential side effects, as discussed below.

Commonly encountered side effects

- There will usually be pain and swelling following the procedure. The pain should subside over a day or so but the swelling may last up to 14 days. Your doctor may advise you take regular paracetamol and anti-inflammatories like ibuprofen following your procedure to help with the discomfort. You will need to buy the paracetamol or anti-inflammatories and only take it if you experience pain.

Rare side effects

- If the vascular malformation is close to or just under the skin, there is a small risk of skin blistering and possible skin loss. If this were to occur, it usually requires simple bandaging but in some circumstances it may require an operation.
- If the vascular malformation is close to a major nerve, nerve damage may occur. This is usually a temporary situation due to the nerve being 'bruised' after the procedure. However, permanent loss of feeling may occur in some instances. This will be taken into account by the team of doctors before deciding whether this type of treatment is suitable for you.
- There is a chance the vascular malformation may not shrink or may even grow again later, in which case further treatment may be required. This will be decided when you visit the clinic for a follow-up appointment in the months following treatment.
- Occasionally patients may have an allergic reaction to the contrast dye used. These episodes range from mild itching to severe reactions that can affect breathing or blood pressure. Patients undergoing the procedure are carefully monitored during the procedure, so that any allergic reaction can be detected immediately and treated by the doctors.

If you are having a general anaesthetic, please refer to our leaflet **Having an anaesthetic** for more information. If you would like a copy of this leaflet please tell a member of staff caring for you.

Are there any alternatives?

An alternative treatment to sclerotherapy is the surgical removal of the vascular malformation which may be appropriate in certain circumstances. Your doctor feels that your vascular malformation is not suitable for an operation at present and is best treated with sclerotherapy. If you have any questions, please discuss them with your doctor during your consultation.

Giving my consent (permission)

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

If you would like more information about our consent process, please speak to a member of staff caring for you.

How can I prepare?

Before your sclerotherapy, please do the following:

- Please let us know if you are taking any **antiplatelet medicines** (for example, aspirin, clopidogrel) or any **medicines that thin the blood** (for example, warfarin), as these may need to be stopped temporarily before the procedure. Call us for advice as soon as you get your appointment letter. Please refer to the Contact Us box at the end of this leaflet for contact details.
- Please let us know if you are taking **metformin** as it needs to be withheld on the day of the procedure and two days after the procedure. Please call us to discuss as soon as you get your appointment letter.
- Let your doctor know about any medicines you are taking. Take your other medicines as normal, unless your doctor or nurse tells you not to.
- Do not eat or drink anything (except water) for six hours before the procedure. You can drink water up to two hours before the procedure.

What happens on the day of the procedure?

You will usually come to the Interventional Radiology Department on the morning of the procedure. A nurse or doctor will check that your medical condition has not changed since your last visit, and you will be given the opportunity to ask any questions.

If you have any allergies or have previously had a reaction to the contrast dye sometimes used in sclerotherapy, you **must** tell the staff.

One of the doctors will talk to you and check that you understand what is going to happen to you. You will then be required to give your consent for the procedure to go ahead. You will be asked to get undressed and put on a hospital gown. A small cannula (thin tube) will be placed into a vein in your arm through which medication will be given.

What happens during the procedure?

You will be taken into the X-ray operating theatre and lie on your back on the X-ray table. You may have devices attached to your chest and finger to monitor your pulse and you may be given oxygen.

Some patients have 'conscious sedation'. This involves giving you medication through your cannula to help you relax, while local anaesthetic is given to temporarily numb the part of your body upon which the procedure is being performed. You will probably stay awake and communicate with the staff, but may not remember much of the procedure afterwards.

More often a general anaesthetic, which temporarily puts you to sleep during the procedure, is used instead. An anaesthetist will go through the details of this with you prior to the procedure. Our leaflet **Having an anaesthetic** offers more information about this. Please ask a member of staff caring for you if you do not have a copy.

The skin overlying the vascular malformation will be wiped with antiseptic to clean it, then using ultrasound to see inside your body, several small needles will be placed in the vascular malformation. A small amount of contrast dye is sometimes injected to confirm the needles are correctly positioned. The liquid or foam sclerosant is injected into the vascular malformation. The procedure will be completed in less than an hour. Sometimes it is not possible to place a needle in a safe position, and the procedure has to be abandoned.

Will I feel any pain?

If you have a general anaesthetic you will not feel anything during the procedure. If you have conscious sedation, a local anaesthetic injection will be given which can sting for a few minutes. The procedure should then be relatively pain-free. If you feel uncomfortable, please tell the nurse so that you can be given pain relief. You may have a warm sensation when the dye is being injected, but this is not painful and wears off fairly quickly.

After the procedure it is quite normal to feel some discomfort from the wounds but this will reduce over the first few days after your operation.

What happens after the procedure?

You will be taken back to the recovery room where you will rest for a few hours. The nurses will carry out routine observations including your pulse and blood pressure. They will also check your injection site.

We will provide light refreshment, such as tea or coffee, a sandwich and some fruit. If you have any special dietary requirements, you may wish to bring some food and drink with you.

The nurse will tell you when you can get up and move around and when you will be able to go home later that day. You will need a responsible adult to take you home by car or taxi. We do not recommend that you use public transport since you may feel unwell.

You will only need to stay overnight if the pain and swelling is not adequately controlled.

What do I need to do after I go home?

Please do the following when you get home:

- rest for the remainder of the day and possibly for the next day, depending on your recovery
- have someone stay with you overnight
- **do not** drive or do any form of strenuous exercise for 48 hours after the procedure to give the injection site time to heal
- eat and drink normally
- take your usual pain relief, as prescribed or instructed on the packet, if you have any pain
- continue with your normal medication as usual, unless given special instruction. If you take any diabetes medicines containing **metformin**, please do not take them for the next **two days following** sclerotherapy
- you can shower 24 hours after the procedure, or have a bath 48 hours after. The treatment site does not need to be covered.

You can resume your normal activities 48 hours after your procedure.

There will be pain and swelling following the procedure in most cases. The pain should subside over a day or so and the swelling may last up to 14 days. This usually responds to paracetamol and ibuprofen which can be bought from any chemist and taken after the procedure.

If swelling at the procedure site does not resolve after two weeks or the skin ulcerates (breaks down) please contact us for advice.

If you feel you need urgent medical attention or are worried about anything outside of our normal opening hours, please:

- contact your GP
- contact NHS 111 (details on next page)
- go to your nearest emergency department (A&E).

When will I get my follow-up appointment?

You will be phoned with a follow-up appointment with your referring doctor, or a letter will be sent in the post. Your follow-up appointment is usually in six to eight weeks' time.

Contact us

If you have any questions or concerns after you have left hospital, please contact the Interventional Radiology Department at Guy's Hospital on **t:** 020 7188 5525, or St Thomas' Hospital on **t:** 020 7188 5477 (Monday to Friday, 9am-5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit **w:** www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748, Monday to Friday, 9am-5pm

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch.

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS website

Online information and guidance on all aspects of health and healthcare, to help you take control of your health and wellbeing.

w: www.nhs.uk

Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, please get in touch.

t: 0800 731 0319 **e:** members@gstt.nhs.uk **w:** www.guysandstthomas.nhs.uk/membership

Was this leaflet useful?

We want to make sure the information you receive is helpful to you. If you have any comments about this leaflet, we would be happy to hear from you, fill in our simple online form, **w:** www.guysandstthomas.nhs.uk/leaflets, or **e:** patientinformationteam@gstt.nhs.uk

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