

Sclerotherapy - Information for patients

This leaflet aims to answer some of the questions you may have about having sclerotherapy. It explains the risks and the benefits of the procedure and what you can expect when you come to hospital.

If you have any questions or concerns, please do not hesitate to speak to the staff caring for you.

What is sclerotherapy?

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

Most vascular malformations cause no problems, however, some cause pain and swelling, overlying skin discolouration or a combination. Although there is no cure for vascular malformations, sclerotherapy can improve your symptoms and their appearance. Surgery is sometimes used, but even then malformations tend to grow back in time.

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

Why do you need sclerotherapy?

The multidisciplinary team looking after you will have decided after reviewing the imaging and meeting with you that this is the best treatment for you. You will have the opportunity to discuss the procedure and other options with the doctor beforehand and decide whether you would like to proceed.

What are the possible risks of having an angioplasty?

Sclerotherapy is a safe and effective procedure, but as with any medical procedure there are some risks and complications that can occur. The Radiologist will explain these to you before the procedure. Below is a list of some possible risks:

- There will 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
- If the malformation is close to, or just under the skin, there is a small risk of skin blistering and rarely skin loss. If this occurs, simple bandaging may be required but rarely an operation is necessary
- If a vascular malformation is close to a major nerve, it very rarely can cause nerve damage. This is usually temporary; however, although extremely rare it can be permanent loss. This will be taken into account by the multidisciplinary team of doctors before deciding whether this treatment is suitable for you

Contrast

Sclerotherapy may use x-ray dye (contrast), and very rarely, a reaction may occur. If you have ever had a test that uses x-ray dye and you have had a reaction to it, you should tell the doctor or nurse before you have your sclerotherapy. A reaction may take the form of a rash or itching and very rarely, a more severe allergic reaction can occur. The team are trained to deal with this and have measures in place to deal with this safely should this occur.

If you have had a previous reaction, please let us know, and we can put measures in place to minimise risk from another reaction.

Radiation – Benefit versus Risk

Sclerotherapy uses X-ray radiation. The radiation dose that you get from sclerotherapy is small and the associated risks are low. Clinical staff consider both the risks and benefits when deciding what examination is appropriate for you. The benefits of having the sclerotherapy outweigh any risk. Clinical staff are responsible for making sure that the dose you receive is kept as low as necessary to aid your diagnosis or treatment.

Pregnancy

If you are in the early stages of pregnancy, there is a very small risk of x-rays harming your unborn child. If you think you could be pregnant, or you are trying to get pregnant, please tell us before your appointment. Individuals aged 10-55 will be asked to confirm their pregnancy status by the radiographer before the procedure and sign a form.

Are there any alternatives?

Your referrer has decided that sclerotherapy would be the most useful procedure in your case. The examination will help your referrer to assess you more fully and plan any further treatment that might be necessary. If you would like more information about alternative imaging tests, please speak to the doctor or health care professional managing your care.

Consent

We want you to be involved in all the decisions about your care and treatment. If you choose to go ahead, you will be asked to sign a consent form. This confirms that you agree to have the procedure and understand everything involved. Students/trainees may be present during the examination but only with your verbal consent.

Please remember that you can ask the Interventional Radiologist any questions you have at any time before, during or after your scan.

Pre-assessment

An appointment with one of our pre-assessment nurses may be required prior to your procedure. They will carry out a pre-assessment health check and explain the procedure and answer any questions you may have.

At your pre-assessment visit you will be asked questions about your general health and some questions which are important for us to know so that we can prepare for your procedure and give you advice before attending. You may also have some blood samples taken.

It is important to let know if you have any of the following:

• Severe allergies?
• Have you had a previous adverse reaction to x-ray dye before?
• Asthma, which is poorly controlled?
• Renal impairment (poor kidney function)?
• Diabetes, which is treated with Metformin therapy?
• Are taking any anti-coagulants (blood thinners)?

Please attend the appropriate department as stated on your appointment letter (usually Day of Surgery).

You will be asked to change into a hospital gown and a small cannula (thin tube) will be inserted in your arm. You will be brought to the Interventional suite in your bed, where you will be met by a team of nurses, a Radiographer and an Interventional Radiologist. The procedure will be explained to you by the Radiologist and you will be asked to sign a consent form. The Royal Victoria Hospital is a teaching hospital and as such university students may be in attendance, with your permission.

What happens during the procedure?

You will be helped to transfer onto the X-ray table and monitors attached to record heart rate and blood pressure. The procedure will most likely be carried out under local anaesthetic as an adult (possibly with a light sedative) and general anaesthetic as a child.

If sedation is required, you will have time to recover afterwards and will need to have someone to accompany you home, and stay with you for 24 hours.

The skin overlying the vascular malformation will be wiped with antiseptic to clean it, then using ultrasound guidance a small needle will be placed into the vascular malformation. A small amount of X-ray dye is sometimes injected to confirm the needle is correctly positioned and to calculate the correct volume of sclerosing agent to inject. The liquid or foam sclerosing agent is injected and the procedure is finished. 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?

Following injection of the sclerosing agent, there will be some pain and swelling due to inflammation. This is the desired effect. It may last up to 10-14 days but paracetamol and anti-inflammatory medication will have been prescribed to help reduce this.

What happens after the procedure?

Once the procedure is completed you will return to the Day of Surgery Ward / Unit for nursing staff to monitor you post procedure and to check the treatment site. You can usually eat and drink normally, unless told not to. You will generally go home later that day.

What to do when you get home

- Rest for the remainder of the day and do not drive or do strenuous exercise for 48 hours to give injection site time to heal
- Have someone stay with you overnight
- Eat and drink normally
- Continue with your normal medication as usual, unless given special instructions
- You can shower 24hours after the procedure or bath 48hours after. The treatment site does not need to be covered
- You can resume normal activities 48hours after you procedure
- If swelling at the procedure site does not resolve after two weeks or the skin ulcerates please contact us for advice

Results

You may be able to discuss your procedure with the performing interventional radiologist once it is complete. The performing interventional radiologist will formally report on your procedure, and it will be attached to the images on our Radiology Information System (RIS). A copy of the report will be sent by Radiology to the referring clinician. Any follow up will be arranged by the referring clinician.

Image sharing

Your images will be electronically stored on the hospital picture archiving system. This data can be accessed throughout the Belfast Health and Social Care Trust and other doctors and health care professionals who are directly involved in your care. The ability to share images and radiological reports will improve the safety and quality of your care by ensuring that the right information is available in the right place at the right time.

In order to improve the medical services we provide we may also use your data as anonymously as possible for internal audit and medical education. If you would prefer that your data is not used for these purposes, please inform a member of staff when you attend for your examination.

If your data is to be used for research, then a separate consent process will be used. You will be asked for your consent, should this be the case.

Contact us

If you have any queries, we will be happy to answer any questions before or after your procedure and you can contact us on the number given on your appointment letter.

For procedures performed at the Royal Victoria Hospital, please email InterventionRadRVH@belfasttrust.hscni.net Tel: 02896156661 Interventional Radiology Secretary RVH

For procedures at the Belfast City Hospital, please email InterventionRadBCH@belfasttrust.hscni.net Tel: 02895041165 Interventional Radiology Secretary BCH

Feedback

We hope you found the information in this leaflet helpful. If it did not tell you what you needed to know or you would like to provide any feedback on your experience please let us know so that we can make any necessary improvements.

You can provide feedback on your experience:

Telephone: (028) 9504 8000 (Monday-Friday: 9am-4pm)

Textphone: 18001 028 950 48000

By email: compliments@belfasttrust.hscni.net

By email: complaints@belfasttrust.hscni.net

By completing an online form: <http://www.belfasttrust.hscni.net/contact/FeedbackForm.htm>

Care Opinion



We invite you to share your experience by clicking the following link:
<https://www.careopinion.org.uk/>

or by scanning the following QR code on your smartphone or tablet:



Language and accessible support services

Deaf/Hard of Hearing

If a Sign Language interpreter is required, please either telephone **028 9615 8900** via the Sign Video remote interpreting service (<https://signvideo.co.uk/deaf-community/>) or email us at MPHAdminFOH@belfasttrust.hscni.net and we will arrange one for your appointment. Please have your H&C number ready when calling or include it in your email. This can be found at the top right corner of any Health and Social Care letters you may have received.

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If you are unable to hear on the phone and need to contact us with regards to your appointment you can email us at MPHAdminFOH@belfasttrust.hscni.net.

Do you need this information in another format or language?

The Trust has access to interpreting and translation services. If you need this information in another language or format, including Braille, large print, CD, audio tape please contact the telephone number **028 9615 8900** or e-mail address MPHAdminFOH@belfasttrust.hscni.net, and we will do our best to meet your needs.

Polish - Czy potrzebujesz tych informacji w innym formacie lub języku?

Fundusz ma dostęp do usług w zakresie tłumaczeń ustnych i pisemnych. Jeśli potrzebujesz tych informacji w innym języku lub formacie, w tym w piśmie Braille'a, dużym druku, na płycie CD, kasecie magnetofonowej, skontaktuj się z nami pod numerem telefonu lub adresem e-mail **028 9615 8900 / MPHAdminFOH@belfasttrust.hscni.net**, a my dołożymy wszelkich starań, aby spełnić Twoje potrzeby.

Arabic - هل تحتاج هذه المعلومات بصيغة أو بلغة أخرى؟

تستطيع الجمعية توفير خدمات الترجمة الفورية والتحريرية. إذا احتجت هذه المعلومات بلغة أو بصيغة أخرى، بما فيها صيغة برايل Braille أو صيغة بالأحرف الكبيرة، أو في سي دي CD أو في شريط مسموع، يُرجى الاتصال برقم التليفون أو عبر البريد الإلكتروني **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900**، وسوف نبذل قصارى جهدنا في تلبية احتياجاتك.

Lithuanian - Ar jums reikia šios informacijos kitu formatu ar kalba?

Tarnyba gali suteikti vertimo žodžiui ir raštu paslaugas. Jei reikia šios informacijos kita kalba ar formatu, įskaitant Brailio raštą, didelį šriftą, kompaktinį diską, garso įrašą, skambinkite telefonu arba susisiekite el. paštu **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900** ir mes padarysime viską, kad patenkintume jūsų poreikius.

Romanian - Aveți nevoie de aceste informații într-un alt format sau altă limbă?

Trustul are acces la servicii de interpretariat și traducere. Dacă aveți nevoie de aceste informații într-o altă limbă sau într-un alt format, inclusiv Braille, tipărire cu caractere de mari dimensiuni, CD, înregistrare audio, atunci vă rugăm să ne contactați la numărul de telefon sau la adresa de e-mail **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900**, iar noi vom face tot posibilul pentru satisfacerea necesităților dumneavoastră.

Tetum - Ita presiza atu informasaun ida ne'e iha formatu ka lian seluk ka lae?

Fidusiáriu ida ne'e iha asesu ba servisu durubasa no tradusaun. Se Ita presiza informasaun ida ne'e iha lian ka formatu seluk, inklui letra Braille, letra boot, CD, kasete audio, entaun favór telefone númeru ka enderesu e-mail **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900**, no ami sei halo esforsu tomak atu kumpre Ita-nia nesesidade sira.