



~LEG CARE AFTER SCLEROTHERAPY ~

What is sclerotherapy? Sclerotherapy is the “Gold standard” treatment for eliminating small varicose veins, reticular veins, and spider veins. It is performed by injection of a solution into the abnormal veins (a sclerosant). We use only FDA-approved sclerotherapy solutions (Sotradecol, Polidocanol, & occasionally glycerin). The solution is painless upon injection but creates mild inflammation of the vein wall lining causing it to collapse and be reabsorbed by the body. Blood is re-directed through normal healthier veins in the leg.

Does Sclerotherapy work for everyone? The majority of people receiving sclerotherapy treatments will see 75-85% clearance (not including previous areas of telangiectatic matting). Unfortunately, there is no guarantee that treatment will be this effective in every case. Tiny red veins are sometimes resistant to sclerosants and can often be treated with lasers.

How many treatments will I need? The number of treatments necessary to clear or improve abnormal veins differs from patient to patient, depending on the severity of their veins. One to 12 or more treatments per leg may be needed; the average is between 4-6 per leg. As the treated veins heal, they often look darker before they look better. This is part of the normal healing process.

Do I really need to wear compression hose? YES! YES! YES! Prescription strength compression hose ensure better treatment results and reduce possible side effects such as phlebitis, matting, and trapped blood. The treatments are designed to cause mild injury to the veins. This injury triggers the body to heal the veins closed as long as compression stockings are worn properly. Studies and lots of experience show that the ideal amount of time to wear the stockings is at least 2-3 weeks after each treatment.

Are my activities restricted? You must **walk for 20-30 minutes** several times each day for a week after each sclerotherapy treatment. **No heavy lifting** (greater than 25lbs) or **high impact activities** (running and jumping) for 7 days after each treatment. If this is important to you, please discuss your individual needs with Dr. Richter to design the best plan. If you do begin to exercise within 2 weeks after treatment, you must wear your compression stockings to keep the treated veins closed.

Can Lasers be used to treat my spider veins? Studies show that sclerotherapy is the Gold Standard treatment for spider veins and small varicose veins on the legs. Sclerotherapy is more effective, less painful, and has fewer side effects than skin lasers.

What solution is injected into my veins during sclerotherapy? Sotradecol and Polidocanol are the only two solutions that are FDA approved for vein treatments. They are both used in our practice and are painless upon injection.

~ What to Expect After Sclerotherapy ~

Itching: You may experience itching around treated veins. This usually subsides within 5 - 30 minutes.

Bruising: Like any bruise, this will fade within a few days to a couple of weeks, depending on how quickly your body heals. Arnica gel or cream sold in our office has been shown to reduce bruising and pigmentation.

Hyperpigmentation: Veins usually become darker during the healing process, then the body reabsorbs them. 10% of treated patients develop light brown pigment on the skin over the healed vein. Rarely, pigmentation persists for 4-6 months but may take up to a year to resolve. This can be minimized by avoiding the sun, using Arnica gel, and treating “trapped blood” early.

Inflammation: Very rarely, inflammation of the treated veins (phlebitis) may occur. Phlebitis is manifested by a painful red streak that is warm, swollen, and tender. Please call the office or Dr. Richter on her cell phone immediately if you develop these symptoms. Phlebitis is easily treated with NSAID medication such as **Aleve 220mg (2 pills) twice daily** for 5-7 days or as prescribed by The Doctor (as long as you do not have a history of stomach ulcers or gastritis)

Travel: No Flying or long car rides for 7-10 days after your treatments unless cleared with your Doctor. If you have vein disease, you must wear compression stockings during all travel, including flights and car rides to prevent blood clots.

Avoid sun exposure and excessive heat during the course of sclerotherapy treatments to minimize the chances of hyperpigmentation or “skin tattooing” while your body is reabsorbing the treated veins.

NO hot baths or hot tubs for 14 days after each treatment to avoid re-opening of the treated veins.

Trapped Blood: Trapped blood generally does not occur sooner than 2-3 weeks after sclerotherapy treatment. If you develop a persistent, firm, tender nodule, please notify the office that you may have trapped blood and schedule a 15-minute appointment for the Doctor to drain this. Trapped blood is not a life-threatening emergency; however, it must be treated to alleviate tenderness, facilitate the healing process, and prevent permanent hyper-pigmentation in that area. If you think you have trapped blood, **take a Tylenol 30 minutes before you come to the office for treatment please.**

Skin ulceration: This occurs in fewer than 1% of patients and consists of a small ulceration at the injection site that heals slowly over 1-2 months. If cared for properly, it usually heals leaving only a tiny white or pink mark on the skin. If you develop any sore that does not heal or increases in size, notify the doctor immediately, keep the lesion moist with polysporin ointment and covered with a Band-Aid.

Telangiectatic matting: This refers to the development of new tiny blood vessels around the treated area. This is usually temporary, occurs 2-4 weeks after treatment, and usually resolves within 2-6 months. It occurs in about 2-4% of treated patients but 20% of women receiving estrogen therapy may develop this phenomenon.

If you have any questions or concerns after your treatment, call the office during business hours (941) 907-4202 or call Dr. Richter on his cell phone (812) 236-9939 .