



Sclerotherapy

Spider Veins, known medically as telangiectasias, are dilated skin capillaries which develop in most individuals as an inherited tendency, but are also a part of the aging process. Pregnancy, hormones, mechanical trauma, and long periods of standing or sitting contribute to this problem. While they may be red or blue, most people have both types. The Sclerotherapy technique consists of instilling a solution into these tiny capillaries using very small needles. The solution irritates the lining of the capillaries, causing them to collapse. They then cease to carry blood. The body slowly replaces the vessels with invisible, harmless scar tissue.

Several injections may be needed for the specific area of telangiectasis. Pain during injection is usually minimal. Fading of the "spider veins" after each treatment is often a slow process, and a maximum improvement may require weeks to months. Sometimes, freckling or brown pigmentation may develop as the vein disappears. This pigmentation, which is iron (hemoglobin), from the dissolved blood, gradually fades, but a small amount may be permanent. The goal is to produce about 75–80% improvement. Many patients achieve almost complete resolution of these small capillaries after 2–4 treatments. Results of treatment vary considerably from person to person. Perfect results should not be expected in just 1 treatment.

Charges depend on the amount of time spent by the doctor and the amount of medication required. Actual injections are done only by a doctor. Appointments are required in advance. Be sure to specify that you need a Sclerotherapy appointment so that adequate time will be allotted. Payment is required at the time of the procedure.

Frequently Asked Questions

Why do these blood vessels exist?

No one is totally sure, but certain families, particularly the female relatives, can seem predisposed to them. Also, mechanical trauma, such as: falls, blows, and long periods of standing or sitting contribute to this problem. Pregnancy and hormones may also play a role.

Is there any way to prevent them?

Some authorities feel the use of the support hose is helpful, but does not prevent them entirely. Reducing your weight also seems to help. Exercise may also help, but there is some evidence that long distance running may accentuate the development in susceptible individuals, especially around the feet and ankles.

What do you use to treat the vessels?

A concentrated saline solution (sodium chloride), glycerin, or a foam detergent solution. You and your doctor will discuss which Sclerotherapy is right for you.

What are the side effects?

- Itching, stinging, or pain may occur briefly at the injection site during injection
- Muscle cramps may occur during injection and usually subside in 10–15 minutes.
- Hives may result at injection sites and usually resolve in 1 day.
- Bruising. Occasionally, when the vessels are very weak, bruising can result and can last anywhere from 2 weeks to several years. Telangiectatic matting results when tiny new vessels form at sites of injection. This can look like a red 'slapped' area, or like a bruise.
- Blisters may occur when a small amount of solution seeps into the skin. They usually heal quickly, but occasionally pigmentation can persist indefinitely. This pigmentation can usually be easily treated.
- Rarely, a clot may develop at the injection site. These small clots do not cause any internal problems, because the veins treated are superficial, not deep in the leg muscles. Removal within 2 weeks of the injection will speed up the healing process.
- Swelling is unusual but in rare cases can be severe. It is particularly common when patients have jobs that require standing for long periods of time, which causes vessels in the ankles and lower legs to be involved. The swelling is not dangerous, but occasionally must be treated with elevation and compression dressings.
- Superficial thrombophlebitis is an irritation of the vessels closest to the skin. It sometimes must be treated with an anti-inflammatory and bed rest. This probably occurs in less than 1 case per every 1000 cases.
- Scarring has been a very rare occurrence but ulceration at an injection site can occur with resulting scarring.

How soon will the vessels disappear?

Usually, the vessels disappear over a period of 2 weeks–2 months. Recurrences can take place over a period of 1–5 years. This treatment DOES NOT prevent new telangiectasia from developing.

Are there certain kinds of spider veins that can't be treated?

Generally, the larger the vessel, the more difficult it is to eradicate. The blue vessels, which are very small varicose veins, can also be treated. These require frequent injections with tiny amounts of solution plus compression dressings for maximum effect. Some of the extremely small vessels (less than 1/2000 of a millimeter) must be treated with electrodessication (electrocautery) or occasionally with the vascular laser.

Are there certain vessels that tend to recur more commonly?

Yes. They are the kind of vessels which occur in a mat a slapped cheek appearance; very fine radiating vessels. These vessels may require a laser for clearance.

How much do the treatments cost?

The cost if the procedure (Sclerotherapy) is related to the amount of time spent treating the area. It varies greatly from a few to a great deal. The longer the session, the greater the cost. We charge \$250 per 20 minute session. Sclerotherapy is generally considered a cosmetic procedure, and is NOT covered by insurance.

Are there any special instructions after the procedure?

The pressure dressings should be worn overnight. Strenuous physical activity or prolonged periods of standing should be avoided for the first 24 hours, but walking is encouraged. Support hose should be worn during the first 3–7 days after treatment.

How often can I be treated?

We prefer to inject the same area after a few weeks of healing. Different sites can be injected every week.

How many treatments will I need?

This varies with the number of areas that have to be injected as well as the response to each injection. Optimal results usually require 2–4 treatment sessions. The goal is to produce a 70-80% improvement with multiple treatments. Although some people achieve almost complete resolution, 100% clearing does not occur after just 1 treatment, and may not occur even after several treatments. There is no guarantee that your spider veins will improve or disappear. Also, sclerotherapy treatments do not turn off your genetic tendency to continue to grow new blood vessels over the years, so maintenance treatments are usually necessary as new vessels develop.

Are other treatments available?

Electrodessication uses small electric currents applied to the vessel using tiny needles. It is useful for facial vessels, for vessels that do not respond to Sclerotherapy, or for people whose vessels are too small to be treated by Sclerotherapy. The laser is an option for matted vessels or for people who do not tolerate Sclerotherapy.

Sclerotherapy Pre & Post Procedure Instructions

Before Sclerotherapy

- Avoid alcohol and ibuprofen for 48 hours before the treatment.
- Avoid aspirin and products containing aspirin for two weeks before your treatment. If these products were prescribed by your physician, stop using them only if your prescribing physician approves, then resume them 48 hours after your procedure.
- Try to avoid shaving and moisturizers the day before, the day of, and the day after your procedure.
- Bring a comfortable pair of shorts to wear during your treatment. Wear a loose skirt or pants to the office.
- Bring compression hose to wear after your procedure. We recommend Jobst stockings. Thigh high styles can be more comfortable than pantyhose.

After Sclerotherapy

A pressure wrap and gauze are applied immediately after treatment. This wrap will be snug and should remain in place 24–48 hours. After you remove the wrap, put on your compression hose. You should wear the compression hose every day for 3 days if red vessels were treated, and every day for 1 week if blue vessels were treated. If you can tolerate it, leave the compression hose on at night. We recommend Hanes "Alive" Support or Jobst support hosiery.

Between treatments, patients are free to carry on normal activities, but strenuous exercise (i.e. jogging, tennis, etc.) is not recommended for 3–4 days after treatment. Avoid prolonged standing and sitting during the first 48 hours after your procedure. Leg rest and elevation are unnecessary, and in fact, may promote clot formation.

You may resume high impact exercise after 4–5 days as long as you wear your compression stockings.

* Do not hesitate to contact us if you have any questions or concerns.