

# Sclerotherapy

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## What to expect when your child has sclerotherapy.

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### What is sclerotherapy?

Sclerotherapy is used to treat malformations in veins or lymphatic vessels. During the procedure, we inject a liquid medicine into the vessel. At first, the medicine causes swelling (inflammation) in the vessel. Then over time it will cause the vessel to shrink. Sometimes the vessel gets enlarged again and the procedure may need to be done again.

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### How is sclerotherapy done?

Sclerotherapy is done using ultrasound guidance. An interventional radiologist will pass a thin tube called a catheter into the vessel. Then they will inject a substance that causes the vein or lymphatic vessel to scar and close. When veins are treated, your child's body will re-route their blood to healthier veins. The affected vessel will form a knot of scar tissue that will be absorbed by your child's body over time.

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### What are the risks of sclerotherapy?

Sclerotherapy is a low-risk procedure. However, complications could include:

- Bleeding
  - Infection
  - Skin blistering, scarring or an open wound (ulceration)
  - Nerve damage
  - Injury to surrounding structures (skin, nerves or organs)
  - Allergic reaction to X-ray dye or sclerosant (the medicine we inject into the vessel)
  - Blood in the urine
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### What should the puncture site look like?

After the procedure, we will apply band-aids, gauze pads, or an ace wrap to the treated area. There may be local swelling or redness at the treated locations.

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### How do I care for the puncture site?

- Your child can have a shower or short bath 1 day (24 hours) after the procedure.
  - Your child should avoid long baths, hot tubs and swimming pools for 2 days (48 hours).
  - Follow the directions given by the interventional radiologist about how to take care of your child's dressing and puncture site.
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#### To Learn More

- Interventional Radiology  
206-987-2089
- Ask your child's healthcare provider
- [seattlechildrens.org](http://seattlechildrens.org)

#### Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.

### Will my child have discomfort?

Your child may have some discomfort at the puncture site. You may give your child Acetaminophen (Tylenol). You can give it every 4 to 6 hours as needed. Check the package for directions, or call your child's primary care provider for the right dose. Use this medicine only if recommended by your healthcare provider. Check with your doctor first before giving any type of medicine to your child.

If your child has lots of discomfort or pain after 24 hours, or needs stronger pain medicine than Tylenol, call Interventional Radiology.

### When can my child return to normal activity?

- Your child should do quiet activities such as reading, watching movies or playing quiet games for the first day after the procedure.
- Usually your child may return to school in 1 to 2 days after the procedure.
- Your child should avoid strenuous activity (such as running, playing sports, swimming, playgrounds or bicycling) and physical education for 5 to 7 days after the procedure.

### When should I call the doctor?

Call Interventional Radiology if your child has any of these symptoms:

- Fever of 101 F or 38.4 C (by mouth or under the arm)
- Drainage, swelling or redness at the puncture site
- Increased limping or pain at the puncture site
- If your child has pain not relieved by Acetaminophen (Tylenol)

**During business hours** - call Interventional Radiology at 206-987-2089 and ask to speak to the interventional radiology nurse.

**After hours** - call the hospital operator at 206- 987-2000 or 866-987-2000 and ask for the on call interventionalist on call.