

## THERMAL ABLATION OF TRUNCAL VEINS

### Patient Information Sheet

Thermal ablation of truncal veins is a procedure used to treat the great saphenous vein (GSV), short saphenous vein (SSV) or larger varicose veins in the legs. This is a method of closing the large truncal vein by applying heat. The procedure may be performed using either laser (Endo-Venous Laser Therapy also known as EVLT) or radiofrequency (RF) energy. The process of closure is called ablation.



#### **Prior to the procedure**

Once your treating doctor has talked to you about the procedure and has obtained a vein map of your legs, the mutually agreed veins to be treated are identified and marked. Any blood thinning medication will need to be discussed with the treating doctor. We may need to stop the medication or change it. This will need to be performed in conjunction with your specialist or GP.

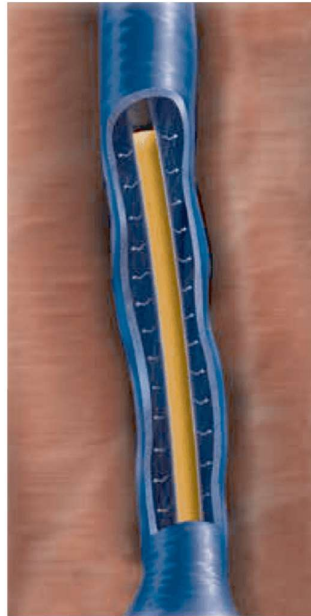
#### **Procedure**

Thermal ablation of the vein is performed under ultrasound guided injections. The patient usually lies on a bed and the skin is cleaned with either an alcohol swab or antiseptic solution. A small puncture is made around the knee (for GSV ablation) or in the calf (for SSV ablation). Local anaesthetic solution is injected around the vein using a pump. A catheter tube is placed in the vein and heat energy is used to close the vein. This procedure does not need a general

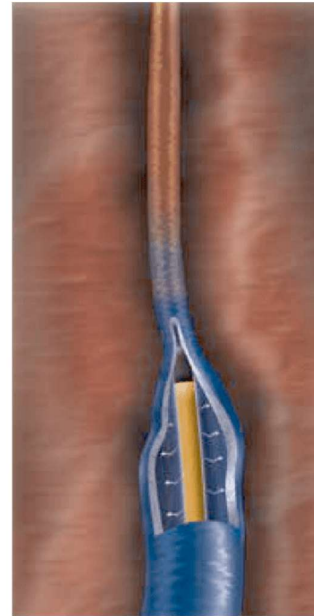
anaesthetic. You will not feel much pain but may feel discomfort or heat. It can be done in the office and it is important that you wear your compression stockings and walk after the procedure.



Small catheter  
inserted into vein



Controlled heat  
collapses vein



Catheter withdrawn,  
closing vein

### **Other procedures that may be performed**

The varicose veins may need to have ultrasound guided sclerotherapy and/or an ambulatory phlebectomy performed. These may be done on the same day or subsequently.

### **Compression stockings**

After the treatment, the patient is asked to wear a grade 2 compression stocking immediately after the injection. This should either have been provided to you or you have brought it along prior to the treatment. The stockings are worn for up to 14 days. It is important to walk around after procedure with the stockings on. For the first week it is important to keep stockings on in day time and night time taking them off to shower. In the second week, the stockings need to be used through the day only.

## **How long does the treatment take to work?**

Generally it takes 6-12 weeks for the veins to disappear and your symptoms to improve.

## **What can go wrong?**

- When injected there will be redness around the injected veins. Over the next few weeks the vein may feel “angry”.
- Bleeding from the puncture site.
- The veins may become cord like.
- They can look bruised and may stain black or brown (up to 10%). This staining can last for many weeks to months.
- Ulceration at the site of injection (< 0.01%).
- There is a risk of an allergic reaction or anaphylaxis with the substances injected. This presents immediately with itching around the area, hives or more serious complications such as difficulty breathing and vomiting. This is thought to occur in approximately 1 in 2 million patients.
- Deep Vein thrombosis (1-3%). You will be asked to return for an ultrasound at 1-2 weeks to confirm the vein has closed and to perform any top up procedures.
- Superficial Vein thrombosis (4%).
- Stroke (<0.01%).
- Migraine and neurological symptoms (<0.01%).