

Description: Patient Info: sclerotherapy

What is Sclerotherapy?

Sclerotherapy is a method of treating vascular malformations in which a solution, called a sclerosing agent, is injected into the malformation. The injection causes sclerosis (scarring) of the inner lining of the malformed channels following an inflammatory reaction. This process causes a gradual reduction in size over a period of weeks to months. Because of the inflammation, there may be a transient increase in the prominence of the malformation, but this is usually mild, if present at all.

Does Sclerotherapy work for everyone?

Most people will see improvement, although the degree varies from person to person. In general, more than one session is needed, and for particularly large or extensive malformations, numerous treatments may be necessary.

Which medications are used?

Treatment involves injection of sclerosant medication, and there are a few different agents that are used:

Doxycycline—a common antibiotic, used here not for the antibiotic effect but because of the irritative properties which then cause sclerosis

Bleomycin—a cancer chemotherapy drug, also irritating and causing sclerosis

Alcohol—more aggressive, with a higher complication rate but also a potentially greater effect on the malformation

Sodium tetradecyl sulfate—a detergent that causes inflammation and sclerosis

What are the most common side effects?

The most common side effects experienced with sclerotherapy treatment are as follows:

Transient bruising—may occur in treated areas and last from one to several weeks. It may occur in association with tenderness and firmness of the malformation, particularly for venous malformations.

Allergic reaction—very rarely, a person may have an allergic reaction to the sclerosing agent used. The risk of an allergic reaction is greater in patients who have a strong history of other allergies.

Pain—people may experience pain, usually at the site of the injection. This pain is usually temporary, in most cases lasting from 1 to 7 days, with a dull, achy quality as opposed to being a sharp or burning pain. Most patients do not require any treatment apart from over-the-counter pain medications, but at times, stronger prescription medication may be needed.

Ulceration—an ulceration is a small area of skin damage caused by medicine affecting the skin. This is a rare problem, but it can occur with any injection. It will heal up completely but may leave a small scar. In the worst case, if the skin damage were extensive enough, surgical repair and/or skin grafting could become necessary.

Adjacent tissue injury—depending on the location of the malformation, adjacent structures could be injured. Fortunately, this is a rare occurrence due to the use of radiographic guidance during the injections. It is also highly dependent on the location and extent of the malformation. Adjacent normal structures may include muscles, glands, nerves, arteries, or veins. At times, concern regarding normal structures may

limit the extent of the sclerotherapy out of concern for causing more harm than good, but this is uncommon.

Will the malformation be cured?

The malformations that we treat may improve, but we generally do not consider them to be cured. Even with surgical resection, it is not uncommon to have a residual portion of the malformation that appears again over time. Therefore, the while the goal is to decrease the size/symptoms of the malformation as much as possible, the reality is that it will likely be a lifelong issue to one degree or another.