



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: customercare@salisbury.nhs.uk

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: www.salisbury.nhs.uk/FriendsFamily or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

Author: Ruth Boyes
Role: Vascular Practitioner
Date written: January 2006
Revised: April 2017
Next revision due: April 2020
Version: 3.1
Code: PI0131

Endovenous Treatment (1 of 4)

Please read this leaflet along with advice given to you by your doctor or nurse.

If you take blood thinning medication (warfarin, clopidogrel, rivaroxaban, dabigatran, apixaban or any another blood thinning medication) you will need to contact us at least a week before your procedure. (If you take aspirin, you can carry on taking this and have your procedure as planned).

What is EVT?

EVT is a new technique to treat varicose veins under local anaesthetic.

What will happen to me when I arrive?

Please report to the Rheumatology and Vascular reception desk.

A member of staff will call you when ready and take you into a consulting room. The procedure will be explained fully and we will try to answer any questions. If there is something you are not clear about please ask us.

If you feel you have been waiting a long time to be called please bring it to the attention of a staff member. They will find out the reason for the delay. We cannot always predict how long each person's procedure will take and this may delay the following patients. Please be prepared to wait.

If you are particularly anxious please bring someone to wait with you and tell the staff, who can clarify any concerns you may have. You will be told if you are having laser or heat treatment.

The procedure

You are taken into the ultrasound room and asked to change into a gown. You are asked to lie down on the couch and the vein which is to be treated will be marked with a pen, using an ultrasound scanner.

There will usually be a sonographer, practitioner and a helper in the room. This is a sterile procedure and the practitioner will explain clearly what they want you to do.

Once your vein has been marked and your leg draped and cleaned, a fine needle will be placed into your leg by the practitioner. This may cause initial discomfort. The practitioner will then insert a flexible tube (also called a catheter) into your vein. Once this is in place, local anaesthetic is injected around the vein to numb the area. Then a laser-fibre is passed through the catheter to the top of the vein. The laser produces energy as

Vascular & Diabetes Unit
Tel: 01722 429210

the catheter is slowly drawn back. The vein is heated in order to seal it and this will close the faulty vein and prevent blood flow through it. This usually results in an improvement of the lower leg veins, although it may take several months to have it's full effect on bigger lower limb veins.

The treated area should stay numb for the duration of the procedure and for up to 12 hours afterwards. We recommend you take painkillers regularly, such as paracetamol or Ibuprofen during the evening of the procedure and for several days afterwards.

Both trained practitioners and surgeons perform this procedure in Salisbury but a consultant surgeon will be available in the department at all times.

Is the loss of a vein a problem?

There are many other veins in the leg and after treatment, blood will be carried back to the heart as it should be. The vein to be treated is not working as it should, so you will not miss it.

What are the possible complications of EVT?

EVT is a relatively new procedure and few complications have been reported; However:

- you are likely to be bruised after this procedure
- less than 1% of people notice some permanent 'bruised' or brownish discolouration
- you may also experience inflammation in the area treated
- there is a small risk of temporary numbness in the lower leg, and a very tiny risk of prolonged altered skin sensation
- a small number of patients experience a lot of pain. This usually eases with time
- there is a 1 in 800 risk of deep vein thrombosis (DVT)
- about 5% of patients will have varicose veins again within 5 years.

Am I at risk from the laser or heat treatment?

You will be given a special pair of glasses to wear to protect your eyes. This is a precaution for the unlikely event of accidental firing of laser energy outside of your vein.

What are the benefits of this treatment?

The benefits of this procedure over conventional surgical treatment of varicose veins is that you will not need a general anaesthetic. The recovery time is therefore less. The risk of infection is reduced as there is only one tiny cut to the skin.

Research information states that there is an initial success rate of 95-100% and a long term success rate of 90-97%.

What is the alternative to this treatment?

The traditional treatment of the varicose veins is surgical ligation (tying off) and stripping. This involves an incision in the groin and can only be performed with a general anaesthetic.

For some patients this may be the only possible route, if their veins are not suitable for EVT.

When can I go home?

You can go home once you feel fit to walk. This is about 45 minutes after the procedure. The total duration of your stay in hospital is likely to be two to three hours. You should arrange for a friend or family member to pick you up and drive you home. You will not be able to drive yourself

When can I drive?

As soon as you are confident to stamp your foot on the brake pedal to do an emergency stop you may drive. The time scale for this varies from patient to patient (next day to two weeks).

Is there anything I should do after the treatment?

The level of pain is VERY variable from patient to patient, from no pain at all, to in very rare cases, severe pain needing medication. We recommend that you take paracetamol or ibuprofen regularly after the procedure to prevent pain developing and carry on with this treatment for a few days or until any pain disappears.

We will give you a support stocking for your leg, which you need to keep on day and night initially. After a few days you can wash your stocking at bedtime and put it straight on again in the morning. This will help reduce the pain and improve the success rate of the procedure. When your wound is dry, you can remove the stocking to have a bath or shower. After two weeks the stocking can be removed or you can continue to wear it to cope with ongoing swelling or pain if you feel you need to.

To reduce the risk of suffering from a deep vein thrombosis (DVT) you should avoid standing and keep as active as possible. Walking is particularly helpful. If there is a dressing over the catheter site it can be taken off after 24-48 hours.

When resting raise the leg above hip level.

Going back to work

If your work involves prolonged standing you will need to take at least one week off work. Many patients are able to go back to work the next day.

Is there any follow up?

You will receive an appointment for a follow up assessment with a scan (approx 6-8 weeks after the procedure).

What if there is a problem?

We cannot always tell you everything that might happen after the procedure but if you have any queries about your treatment, you can contact a member of staff on 01722 429210 during office hours. If a member of staff is unable to take your call, please leave your name, number and some brief information and someone will get back to you as soon as possible. If you have a problem out-of-hours and you feel it can not wait until the following day please

ring your out-of-hours GP.

Further advice

You can get further advice on this procedure from the National Institute for Clinical Excellence (NICE) on the internet using the following address: www.nice.org.uk/IPG052 **guidance**.

Or you can telephone them on 08701555455 quoting the reference number NO499 and they will send you their leaflet.