



Ovarian/Pelvic

vein

Embolization

Important Information for Your Procedure

What is ovarian vein embolization?

Ovarian vein embolization is a minimally invasive treatment for pelvic congestion syndrome, a painful condition resulting from the presence of enlarged or varicose veins in the pelvis. Under imaging guidance a catheter is used to close off the faulty veins so they can no longer enlarge with blood and therefore, reduce symptoms associated with these veins. Success rates of 85% or higher have been reported in improving or eliminating symptoms and women treated with embolization.

How should I prepare?

- Do not use aspirin or aspirin containing products, and NSAIDS (Motrin, naproxen etc) for 5 days prior to the procedure
- If you are a diabetic. Discontinue metformin medications 24 hours prior to the procedure and/or take half of normal long-term insulin dose when fasting for the procedure.
- Hydrate with clear, non-caffeinated fluids such as water, sports drinks or unsweetened tea starting 24 hours prior to the procedure
- Do not eat or drink anything starting 8 hours prior to the procedure
- You should report to provider on medications including herbal supplements as well as allergies to medications, metals or x-ray dye
- Wear comfortable cloths the day of the procedure, leave jewelry or are valuable possessions at home. You'll be asked to change into a hospital gown upon arrival for your procedure
- Inform your provider our nurse if there is any chance you may be pregnant

How is the procedure performed?

- Image-guided, minimally invasive procedure such as embolization for pelvic congestion syndrome are performed by specially trained interventional radiologist in a specialized operating or procedure room containing video x-ray (fluoroscopy) equipment.
- Prior to the procedure a nurse or technologist will insert an IV catheter into the hand or arm withdrawal routine blood work
- The area of your body where the embolization catheter (a long, thin hollow plastic tube) is to be inserted will be sterilized and covered with surgical drapes. Typical locations include the groin, neck or arm.
- A contrast material was then injected through the procedure catheters and a series of x-rays are taken to locate the exact site of vessel abnormality. Medications and/or embolic materials are then passed through the catheter into the target vessels.
- At the end of the procedure, the catheter will be removed and pressure will be

applied to prevent any bleeding. The opening of the skin is then covered with a bandage, no sutures or required.

Will I be put to sleep (under anesthesia) during the procedure?

- IV sedation will be given throughout the procedure. This is a form of conscious sedation where you will be sleepy and relaxed with the ability to breathe on your own. Most patients have little or no memory of the procedure.

How long will the procedure take?

- Typically the procedure will take from 1-2 hours.
- You will be observed an additional 4-6 hours following the procedures. In some situations overnight observation may be required.

Is the procedure painful?

- Typically there is little discomfort associated with the procedure.
- You may experience a brief pinching or stinging sensation when lidocaine is administered prior to inserting the procedure catheter.
- Some patients experience temporary warm sensation when x-ray dye is administered.
- Most patients will experience some side effects from 3-7 days following the procedure. These may include abdominal/pelvic aching or pressure, nausea, decreased appetite or low-grade fevers (less than 101 ° F). Most symptoms can be controlled by oral medications. In rare situations patient be kept in hospital observation 24-48 hours for IV pain medications.

What are the risks of having this procedure?

- There is a very slight risk of allergic reaction to medications or contrast materials that are injected.
- Any procedure that involves placement of a catheter inside a blood vessel carry circuit risks. These risks include damage the blood vessel, bruising or bleeding at the puncture site, and infection.
- With placement of any medical device such as embolization coil for material, there is a risk that the agent or material can move or lodge in the wrong place. This is a very low risk with modern delivery methods and imaging technologies.



Post Ovarian/Pelvic Vein Embolization

Diet: There are no dietary restrictions following ovarian vein embolization.

Medications:

- Continue your routine home medications
- Metformin containing medication should be held for 48 hours after receiving IV contrast.
- You may experience discomfort after the procedure anti-inflammatory medications recommended for 72 hours following the procedure. Unless otherwise specified, Ibuprofen 400-600mg every 4-6 hours may be used

Activity:

- Avoid strenuous activity for 48 hours following the procedure
- **Over the next few days**, progress back to normal/regular activities
- Aerobic activity and other forms of exercise (such as walking/running, Zumba, Yoga, Pilates, etc...) may be resumed as soon as **4 - 5 days after** the procedure as long as you feel comfortable doing so.
- Avoid strenuous activity or heavy lifting (anything that requires breath holding or grunting) for 10-14 days

Driving/travel:

- Patient should not drive for 24 hours after receiving IV sedation.
- For patients residing outside of the Anchorage area, overnight stay in the area prior to returning home is recommended.

Post-procedure dressing care:

- Leave procedure site bandage in place for 24hours following the procedure. At that time he may shower or bathe without restriction

Follow up:

- 2 week clinic visit with the vein clinic or primary physician if outside of the anchorage area
- Contact our office if you experience fevers greater than 100.5° F, signs of allergic reaction

or progressive pain not relieved by anti-inflammatory medications. **907-339-9455**