

## What is sclerotherapy?

Sclerotherapy is used to treat very large blood vessels and cysts. The large blood vessels are called vascular malformations.

- Medicine is injected into the vessels or cysts. This damages the cells lining the cysts or blood vessels. The damage causes scarring on the inside of the vessels and cysts.
- The scarring helps to shrink the blood vessel or cyst and make the problem area smaller. This will also reduce the symptoms.

## How is it done?

- Medicine is given to make your child sleepy. This is called sedation.
- An ultrasound will help the doctor find the area to be treated.
- A small needle will be put in that area. Contrast agent (dye) is then injected.
- An x-ray will be used to check the area to be treated. A scarring (sclerosing) liquid is injected in that area to shrink the large blood vessels or cysts.
- The needle is taken out and a bandage is put over the area. If needed, other areas may also be treated.

## How long does it take?

The procedure may take a few hours or more. This will depend on the amount of therapy and size of the malformation. Your child will need to stay in the day surgery area for a few hours. Your child will get intravenous (IV) fluids and pain treatment. Your child may need to be admitted to the hospital if the malformation is very large or if it is next to an area where swelling can cause problems, like the airway.

## What are some of the risks?

- Your child may have pain at the treated site for a few days after the procedure. You will be given medicine for the pain.
- The skin in the area treated may blister, look dark, or develop a sore.
- Blood vessels, muscles, or nerves around the area being treated may be affected. This could be a short time or permanent.
- Infection can develop in or around the vein or cyst that has been injected. This is rare.

## Important information

If your child had an x-ray or other images such as a CT, MRI, nuclear medicine, or ultrasound done somewhere besides Children's Hospital of Wisconsin, please bring the copies of these tests when your child has the procedure.

## What care is needed after the procedure?

### For 1 to 2 days:

- Give your child steroid medicine to help decrease swelling if a prescription was given.
- Give your child pain medicine, if needed.
- An ACE wrap may be put over the area that is treated. This will help keep the swelling down. Ice can also be used to help with swelling.
- When possible, put the treated area up above the level of the heart.
- Your child should not be very active the first few days. Do not let your child play sports, run, or lift heavy objects.
- Put on a new dressing if it gets wet.

### For 4 to 5 days:

- The area may look bruised. Watch the skin for other changes, such as increased redness, skin breakdown, or drainage.
- Give Tylenol® and anti-inflammatory medicines such as ibuprofen for pain and swelling. Give it with food every six hours while your child is awake. Let your doctor or nurse know if the pain is not helped by Tylenol and ibuprofen. A stronger medicine may be needed.

**ALERT:** Call your child's doctor, nurse, or clinic if you have any questions or concerns or if your child has:

- An increase in red, hot, or very swollen skin in the treated area after the first day.
- Foul smelling or thick drainage.
- Bleeding that does not stop with a short period of pressure.
- A fever of 101°F (38.3° C) or higher.
- Pain that is not controlled by the medicine you were told to use.
- Special health care needs that were not covered by this information.

**This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up.**