Information About Your Child’s Procedure

Sclerotherapy

Read this form so you understand the procedure and its risks. Please ask questions about anything you do not understand.

What is sclerotherapy?
Sclerotherapy is used to treat certain types of vascular and lymphatic malformations. The physician injects a liquid medication into the malformation. The liquid causes inflammation, and then, over time, shrinking of the malformation. Sometimes malformations become enlarged again and require repeat sclerotherapy.

How is sclerotherapy performed?
Using ultrasound for guidance, the physician will insert a small needle into the malformation. Next, the physician will inject X-ray dye (contrast) and the liquid medication (sclerosant) into the malformation. Depending on the size of the malformation, sclerosant may be injected into several sites. For larger lesions, small drainage catheters may be placed.

Will my child be awake for the procedure?
No. Depending on your child’s medical history and the location of the malformation, we will use either IV sedation or general anesthesia.
How long does the procedure take?
Approximately one hour.

What are the risks of sclerotherapy?
Sclerotherapy is considered a low-risk procedure. However, potential complications include:
• bleeding
• infection
• skin blistering, scarring or ulceration
• nerve damage
• injury to surrounding structures (skin, nerves or organs)
• allergic reaction to X-ray dye or sclerosant
• blood in the urine

Will my child be in pain after sclerotherapy?
The areas that were injected will become swollen and tender and may bruise. These effects usually last from one to 10 days. You may give your child over-the-counter pain medication. We will prescribe stronger pain medicine if necessary.

When can I remove the bandage?
Leave the bandage on for 24 hours. After 24 hours, you may remove the Band-Aid® or the gauze and clear bandage. If drainage catheters were placed, they will be secured with a locking device (StatLock®) which must not be removed. For children with drainage catheters, the bandage should be changed only when saturated; we will explain this to you in person.

When can my child bathe?
Your child may shower or take a bath after 24 hours, when the bandage is removed. However, if drainage catheters were required, they will remain in place for approximately a week. During that time, the site must remain dry and your child may only take sponge baths.
Are there any activity restrictions?

We will discuss restrictions with you based on your child’s circumstances. Generally, your child may resume normal activity as soon as he or she feels comfortable doing so. If the area treated was on the leg or foot, your child must keep the leg or foot elevated for 24 hours. Crutches might be required if the procedure was performed on the foot. If compression stockings were worn prior to treatment, your child may resume wearing them in 24 hours.

CONTACT US IMMEDIATELY IF YOUR CHILD EXPERIENCES ANY OF THE FOLLOWING:

• fever higher than 101°Fahrenheit
• pain increasing instead of decreasing
• skin at injection site blisters or becomes pale, white or black
• numbness at injection site
• reduced mobility of the limb or in the area of the injection
• facial drooping (uneven smile)
• pupils of uneven size

Call Interventional Radiology between 8 a.m. and 4:30 p.m., Monday through Friday, at 215-590-7000. At the first prompt push 1, and at the second prompt push 2.

At all other times, call 215-590-1000 and ask to speak to the interventional radiologist on call.

The Interventional Radiology team is here to help you and your child. Please ask us if you have any questions or if anything is not clear.

Thank you!