

Ambulatory Phlebectomy

Ambulatory phlebectomy is a minimally invasive procedure that uses a small needle and hook to remove bulgy varicose veins on the surface of the legs. No stitches are required and the scars are nearly imperceptible. The patient is able to walk immediately following the procedure, which is often performed the same day as an endovenous thermal ablation.

How is Ambulatory Phlebectomy Performed?

The radiologist will numb the area along the varicose veins with local anesthetic. A small needle is then used to make very small incisions along the enlarged veins, these incisions are no larger than a pencil eraser. A phlebectomy hook (similar to a crochet hook) is inserted under the surface of the skin to remove the varicose vein through the tiny incision. This procedure is usually completed within 1 hour.

Risks

The potential side effects of ambulatory phlebectomy include, but are not limited to:

- Any procedure where the skin is penetrated carries a risk of infection. The chance of infection requiring antibiotic treatment appears to be less than one in 1,000.
- Bruising or bleeding at the puncture site
- Allergic reaction

Most Common Side Effects

- Thrombophlebitis (inflammation of the vein):
 - This is a common symptom which may cause pain, firm areas, and redness over the treated area.
- Post-operative bruising is common. This can be alleviated by wearing compression stockings.
- Nerve damage:
 - Occasionally the nerve that runs next to the vein being treated becomes irritated. This can lead to some numb areas along the treated veins.
 - These numb patches generally return to normal after 1 to 6 months.
 - While these nerves are healing, it is common to experience numbness, tingling, burning, or “zing-like” sensations to the area affected.
- Swelling: It is not uncommon to experience mild swelling to the treated leg up to 6 months after the procedure. This can be due to inflammation, and to the body’s natural response of trying to reroute the blood flow to the deep venous system.

Before the Treatment

- Well-fitting compression stockings are an important part of the post procedure care and should be brought to the appointment. Compression

stockings can be purchased at The Vascular Institute by Teton Radiology, local medical supply stores, or online. Best brands of compression stockings to purchase are: Medi, Sigvaris, Juzo, or Jobst. **Do NOT purchase Therafirm brand.**

Places to purchase compression stockings:

- The Vascular Institute by Teton Radiology, 2001 S Woodruff, Suite 16, Idaho Falls
- Norco Medical, 146 N 2nd East, Rexburg
- Eagle Rock Oxygen, 2425 Channing Way, Idaho Falls
- Online: discountsurgical.com
- Shower prior to the procedure, as a shower will not be permitted for 3 days following the procedure.
- Wear loose, comfortable clothing.
- Eat as normal.
- A light sedative may be prescribed as long as you have someone to drive you to and from the appointment.
- An analgesic cream will be provided to apply to your leg 1 ½ hours prior to the scheduled appointment. The instructions for the cream will be provided with the cream prior to the scheduled appointment.
- Women should always inform their physician and nurse if there is any possibility that they are pregnant.

The Procedure

- The nurse will take you to the procedure room and stay with you for your entire procedure.
- The nurse or radiologist will review the risks and benefits of the treatment and answer any questions you may have.
- Your leg will be cleaned and numbed.
- You will feel a slight pin prick when the local anesthetic is injected.
- Injection of the local anesthetic around the abnormal vein is the most bothersome part of the procedure because it usually requires multiple injections along the vein. This usually takes 5-10 minutes to complete.
- The actual removal of the vein is usually not painful because the area being worked on is under a local anesthetic.
- The incisions made during the procedure are so small that no stitches are required.

Aftercare Instructions

- A 3 week follow up appointment will be scheduled.
- Keep leg elevated whenever sitting.
- Day of surgery: Resume normal activities except as mentioned below:
 - Activity: Be up walking hourly during the day for the first 5 days following the procedure.

- Driving a car: Yes, except when taking Tramadol (Ultram) as it is a narcotic. **On long rides, get out and walk hourly)**
- Bathing: Sponge bath only - no shower until after compression hose removal (2-3 days after procedure).
- Return to work/school: When able
- Active sports or aerobic exercise: What feels comfortable
- Lifting/devices/precautions: No heavy squats or leg weight training for 1 week
- Diet: Resume normal diet
- Medications:
 - Ibuprofen 800 mg 3 times a day
 - This is a very important part of the healing process.
 - Take with food for 10 days. If it upsets stomach, break the tablet in ½ and take ½ with meals.
 - Ibuprofen is an anti-inflammatory which helps alleviate the redness, swelling, and tenderness.
 - Remember to take it regularly for 10 days after the procedure, even if there is no pain.
 - Tramadol (Ultram) 50 mg every 4-6 hours as needed for pain
 - Tramadol is a narcotic, therefore do not drive or operate machinery when taking this medication.
 - This medication can cause dizziness and drowsiness.
 - It can be taken along with Ibuprofen since they are different types of medications.
- Compression hose: Wear compression hose continuously for 3 days, then during the daytime only for one week. You may find it beneficial to continue to wear the compression hose during the daytime after the initial 10 days as healing can take up to 6 weeks.
- Dressing: A bulky dressing and compression hose will be applied to the treated leg. The dressing and hose should be left on for 3 days following the procedure.
- Steri-strips: Steri-strips (brown bandaids) will be placed over the incision sites. There are no stitches used for this procedure.

Call The Vascular Institute at 208-535-5959 or after hours at 208-390-2457 with any questions or problems.