

AMBULATORY PHLEBECTOMY

WHAT IS AMBULATORY PHLEBECTOMY?

Ambulatory phlebectomy is an outpatient procedure that removes superficial veins through small, slit-like incisions in the skin. The procedure involves the following:

Marking the veins to be removed.

Injecting local anesthetic into the skin.

Surgical removal of the veins, segment by segment, through small incisions using a tiny phlebectomy hook. Suture is rarely needed. Steri strips are applied to the small incisions.

Legs are then wrapped with compression dressings. Compression is needed for estimated three weeks.

WHAT SHOULD FIRST BE DONE BEFORE CONSIDERING AMBULATORY PHLEBECTOMY?

A vein evaluation should be performed including a duplex ultrasound of the lower extremities.

Are the varicose veins the main problem, or are they connected to other veins that may need to be treated?

Are there clots in the superficial or deep veins which may need to be addressed?

Are other procedures needed in addition to ambulatory phlebectomy?

WHEN IS AMBULATORY PHLEBECTOMY APPROPRIATE?

Ambulatory phlebectomy may be used to remove both asymptomatic and symptomatic superficial veins from just below the skin. Typically, treated veins are the larger, bulging and varicose veins, although smaller veins may also be removed with ambulatory phlebectomy. Ambulatory phlebectomy may be combined with other treatments such as radiofrequency ablation or sclerotherapy.

WHO IS NOT A CANDIDATE FOR AMBULATORY PHLEBECTOMY?

Patients who are allergic to local anesthetic, who are not able to walk on their own and who cannot wear the compression stockings (arterial circulation problems) are not candidates for this procedure. Any active infection or rash in the treated areas needs to resolve before surgical treatment.

IS AMBULATORY PHLEBECTOMY PAINFUL?

Ambulatory phlebectomy is performed under local anesthesia and patients will feel the injections and some tugging during the procedure. After surgery, discomfort should also be minimal to none, especially if compression stockings are worn as directed.

WHAT ARE THE COMPLICATIONS OR POTENTIAL SIDE EFFECTS OF AMBULATORY PHLEBECTOMY?

Temporary bruising and swelling of the treated area is typical and is minimized with compression stockings. The small incisions heal well without sutures and are nearly imperceptible after six to twelve months. Patients with darker skin may experience a longer scarring process. The residual veins may feel like a hard cord and may be tender. Compression, time, and over the counter medications usually resolve the condition. Rarely, a sensory nerve may be injured and skin numbness may result. The skin numbness usually affects a small area only. Movement or leg function should not be affected.

WHAT CAN I EXPECT AFTER HAVING HAD AMBULATORY PHLEBECTOMY?

Bruising and swelling is normal and temporary. You can walk immediately after surgery and carry on normal daily activities except for exercise and heavy lifting. You must follow the activity restrictions and wear the compression stockings as directed by Dr. Schilperoort. Your varicose veins are physically removed and therefore should not come back. However, depending on other factors such as family and personal history, new varicose veins may develop over time.