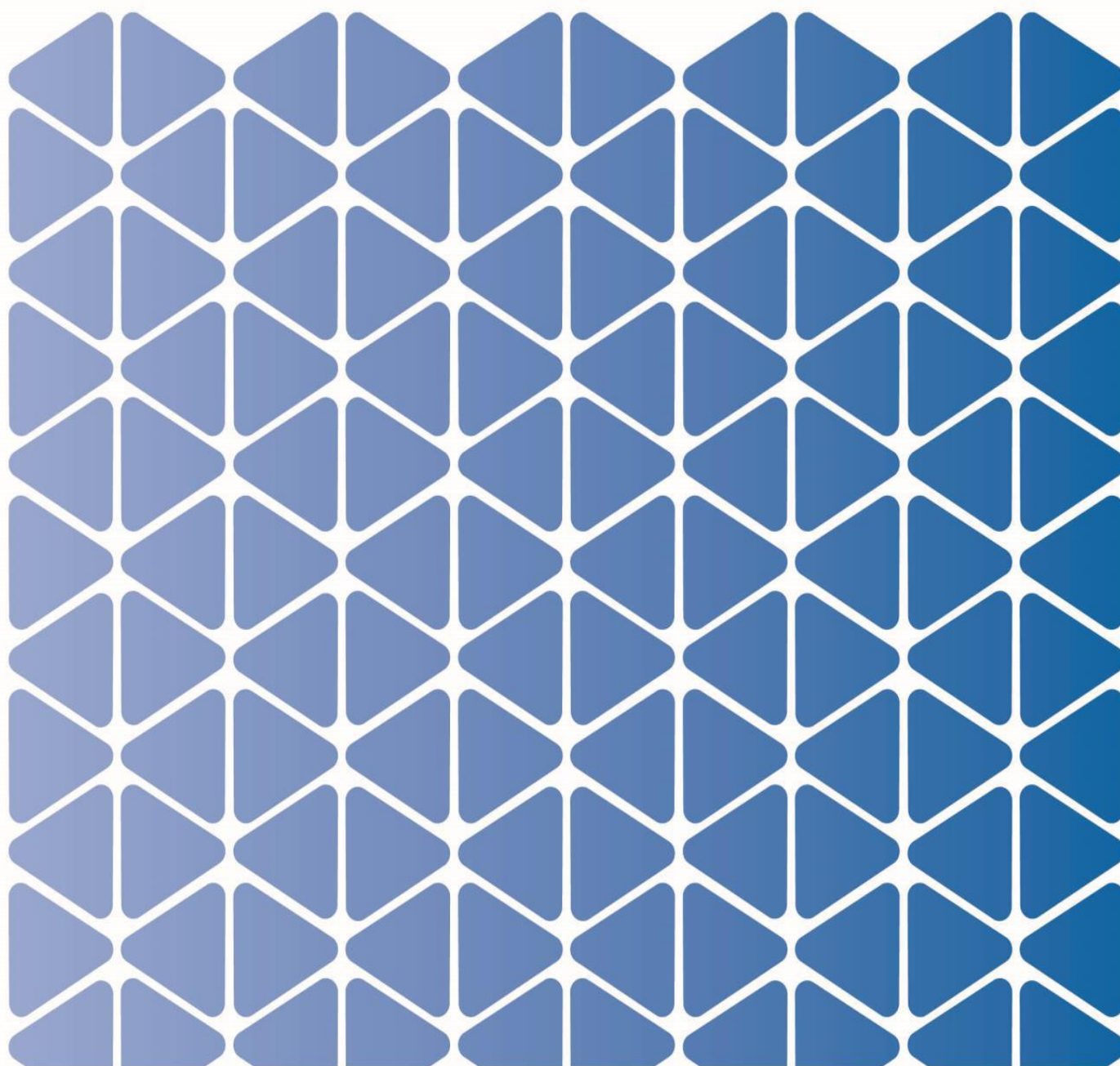


PATIENT INFORMATION**OVARIAN VEIN EMBOLISATION**

What is ovarian vein embolisation?

Ovarian vein embolisation is a minimally invasive procedure used to treat pelvic congestion syndrome (PCS). PCS occurs when there is an accumulation of blood in the veins of the pelvis, which can cause pain, discomfort, and other symptoms.

The procedure involves the insertion of a catheter (small plastic tube) into the affected ovarian vein, followed by injection of a substance (usually a type of coil or foam) that causes the vein to become blocked, reducing blood flow and relieving symptoms.

Why is ovarian vein embolisation performed?

Ovarian vein embolisation is performed to treat PCS, which can cause chronic pelvic pain, discomfort during sex, and other symptoms. The condition is more common in patients who have had multiple pregnancies. It can also occur in patients who have had pelvic surgery or trauma.

The procedure aims to reduce symptoms by blocking the affected vein, which helps to alleviate pressure and improve blood flow in the surrounding veins.

What happens during the procedure?

There is no need to fast for the procedure and please take regular medications.

Before the procedure, you will be given a local anaesthetic to numb the area where the catheter will be inserted. You may also be given a sedative and possibly medication to prevent nausea.

Once you are comfortable, the doctor will insert a catheter into a vein in your neck or groin and guide it to the affected ovarian vein. A contrast dye is injected to help visualise the area, and then coils or foam will be injected into the vein, causing it to become blocked.

After the procedure, you will need to lie or sit still for a few hours. You may have pain medication or anti-inflammatory drugs to manage any discomfort. You will also need to avoid any strenuous activity for a few days and may need to take some time off work.

What are the risks and complications?

Like any medical procedure, ovarian vein embolisation carries some risks and possible complications. These may include:

- Temporary discomfort, pain, or bleeding at the site of catheter insertion
- Infection
- Reaction to the anaesthetic or medications used
- Adverse reaction to the injected coils or foam
- Damage to surrounding organs or tissues
- Risk of blood clot formation
- Recurrence of symptoms

This procedure involves exposure to x-rays. X-rays consist of a type of radiation known as ionising radiation. The doses that are used in medical x-rays are very low and the associated risks are minimal. The radiologist is responsible for making sure that your dose is kept as low as possible and that the benefits of having the x-ray outweigh any risk. X-rays can be harmful for an unborn baby. If you think you may be pregnant, please contact the x-ray department.

Your doctor will discuss the risks and benefits of the procedure with you before proceeding.

What should I expect after the procedure?

After the procedure, you may experience some mild discomfort, swelling, or bruising in the groin area. These symptoms usually subside within a few days. You will also need to avoid any strenuous activity for at least 48hrs and make sure you have time off from work for 2 days after the procedure.

- Ask a responsible adult to take you home by car or taxi.
- Arrange for a responsible adult to stay with you for 24 hours.
- Eat and drink as usual after the procedure.
- Rest for the remainder of the day and possibly for the next day, depending on how you recover.
- Take your usual pain medicine like paracetamol if you have any discomfort and follow the instructions on the packet.
- Continue taking your usual medicines as prescribed, unless the Interventional Radiology (IR) doctor or nurse gives you different advice.
- Avoid any exercise including sexual activity that involves a lot of effort or energy, or heavy lifting, for 48 hours (2 days) after the procedure.
- Remove the small dressing after 48 hours.
- Continue your usual daily activities after 48 hours, if you feel well enough

Further information:

BSIR Pelvic Venous Congestion Patient Information

https://www.bsir.org/patients/pelvic-venous-congestion-syndrome/#col_right

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.