

What happens afterwards?

We move you to our recovery area. You stay in bed for at least 1 hour.

Tell your nurse if you have any pain or if you feel sick to your stomach (nausea). We can give you medicine for the pain and nausea. Most women go home the same day. If you are having a lot of pain, you might need to stay overnight.

Are there any risks or complications?

Possible complications include:

- bleeding or blood clots at the site
- allergic reaction to x-ray dye
- infection
- damage to other tissue if particles go to the wrong place (misembolization)

You can ask questions about the risks before you sign the consent form.

When to get help

See your doctor if you notice any of the following:

- Fever above 38.5°C (101°F), aches, chills
- Abdominal cramping that does not go away
- Increasing abdominal pain

Go to the nearest Emergency Department if you have:

- Shortness of breath all of a sudden
- Chest pain
- Severe abdominal pain that is not helped with pain medicine

Locations

Abbotsford-Regional Hospital 604-851-4866
Medical Imaging 2nd Floor, Fraser Wing
32900 Marshall Road, Abbotsford

Lions Gate Hospital 604-984-5775
Medical Imaging, Lower Level
231 East 15th Street, North Vancouver

Royal Columbian Hospital 604-520-4640
Medical Imaging, Columbia Tower
330 E. Columbia Street, New Westminster

St. Paul's Hospital 604-806-8006
Medical Imaging, 2nd Floor, Providence Building
1081 Burrard Street, Vancouver

Surrey Memorial Hospital 604-588-3308
Medical Imaging, 1st Floor, Lower Level
13750 96th Avenue, Surrey

UBC Hospital 604-822-7076
Medical Imaging, Main Floor
2211 Westbrook Mall, Vancouver

Vancouver General Hospital 604-875-4111
GI/GU Department, Jim Pattison Pavilion Ext 68612
Station 5, Ground Floor, 855 West 12th Avenue, Vancouver

HealthLinkBC 8-1-1

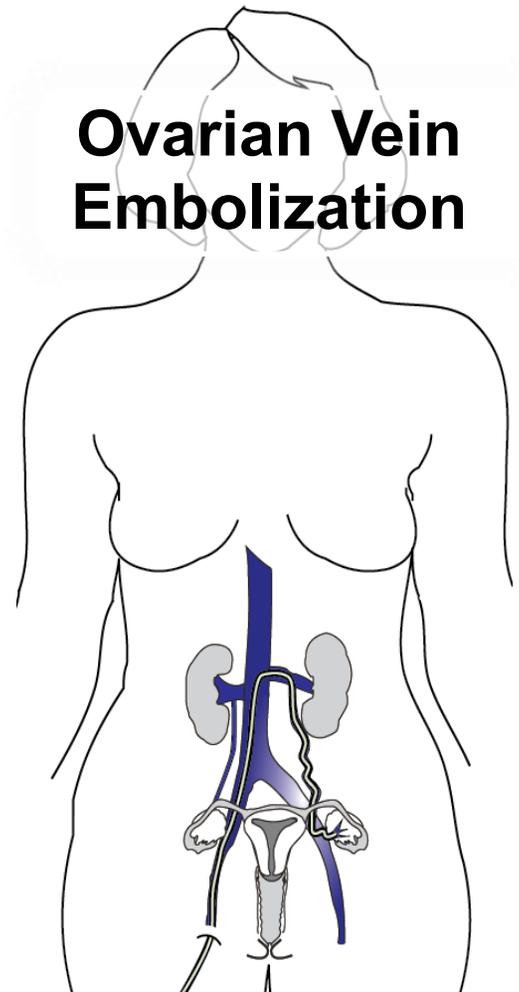
Call any time you have any questions or concerns. HealthLinkBC is open 24 hours.

Available in 130 languages. For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

www.fraserhealth.ca ♦ www.vch.ca

This information does not replace the advice given to you by your healthcare provider.

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Ovarian Vein Embolization

Follow-up Instructions/Appointment:

- Make an appointment to see your gynecologist.

What is an Ovarian Vein Embolization?

This procedure treats enlarged veins in the lower abdomen, called pelvic congestion syndrome. The syndrome is similar to varicose veins in the leg. The veins in the lower abdomen become weakened and do not properly drain blood from the area. The veins bulge with the pressure. This is a painful condition.

This procedure closes off the faulty veins without surgery (called 'embolization'). When the vein is blocked, your body naturally finds other veins to drain blood from the lower abdomen.

Who does the Ovarian Vein Embolization?

It is done by an interventional radiologist (a doctor who specializes in using x-ray, ultrasound, and fluoroscopy imaging to guide treatment).

Can I bring a relative or friend?

Yes, they can stay with you before and after the procedure. However, for reasons of safety and regulations, they cannot be in the room during the procedure. We will tell you where family members can wait.

What happens before the procedure?

Our Medical Imaging Department contacts you with specific instructions on how to prepare for this procedure.

How long will it take?

The procedure usually takes about 1 to 2 hours. Everyone is different. We cannot predict exactly how long your procedure will take.

Does it hurt?

Many women find it uncomfortable as the vein is being treated. Tell us if you are having pain so we can give you pain medicine.

After the procedure, you could have pain, a fever, and/or feel sick to your stomach (nausea). The amount of pain and how long it lasts varies from person to person. The pain can last from hours to several days. Contact your doctor for directions on how best to manage your pain, fever, or nausea.

Alert

Let us know if:

- You have any allergies.
- You have reacted to x-ray dye in the past.

What happens during the procedure?

- We start an intravenous in your arm so we can give pain and other medicines during the procedure.
- We might give you a suppository that is a long-acting anti-inflammatory medicine.
- We use a large vein in either your neck or groin for the procedure. If using the groin, we might need to shave both groin areas.
- We clean the area then cover it with sterile drapes.
- The radiologist injects numbing medicine to 'freeze' the area.
- The radiologist guides a tiny, flexible tube (or catheter) into the large vein.
- X-ray dye is injected through the catheter to locate the faulty vein(s).
- Small particles (embolic agent) are injected through the catheter into the faulty vein(s), blocking blood supply.
- More x-ray images are taken to check the location of the particles and check for any bleeding in the area.
- Once the catheter is removed, the radiologist puts pressure over the area to stop any bleeding then covers it with a bandage.

You must arrange for a 'responsible adult' to take you home after this procedure.