

Ovarian Vein Embolisation

Ovarian Vein Embolisation/ Pelvic Congestion is an examination of the blood vessels using x-rays and contrast (x-ray dye). A specialist known as an Interventional Radiologist often performs these procedures.

The contrast is injected through a thin plastic tube called a catheter, which is passed through a sheath inserted into the femoral vein.

Why do I need this procedure?

Ovarian vein embolisation is a minimally invasive treatment for pelvic congestion syndrome that is used to stop blood flow through incompetent veins so they can no longer enlarge with blood, thus relieving the pain.

Pelvic congestion syndrome, also known as ovarian vein reflux, is a painful condition resulting from the presence of varicose veins in the pelvis. The condition is caused by valves in the veins that help return blood to the heart against gravity becoming weakened and not closing properly, allowing blood to flow backwards and pool in the vein causing pressure and bulging veins.

The chronic pain that is associated with this disease is usually dull and aching. The pain is usually felt in the pelvis and lower back. The pain often increases during the following times:

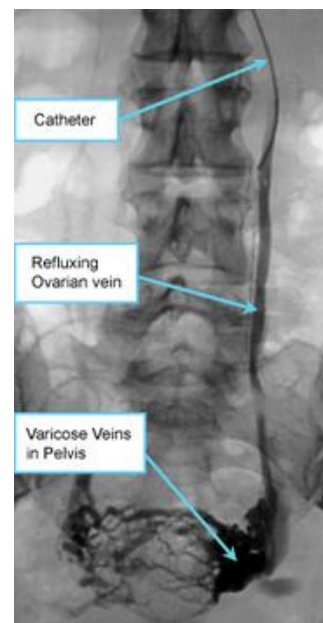
- Following intercourse
- Menstrual periods
- When tired or when standing (worse at end of day)
- Pregnancy

Other symptoms include:

- Irritable bladder
- Abnormal menstrual bleeding
- Vaginal discharge
- Varicose veins on vulva, buttocks or thigh.

What should I expect?

- The procedure can take between 20 - 60mins.
- The contrast can cause a warm flushing or burning sensation. It only last for a few seconds and stops once the contrast has stopped being injected. **Please ring MIVIR if you have a known allergy to iodine or contrast.**
- You may be required to take some time off work – please let the nurses know so they can organise a medical certificate for you. An attendance certificate can be provided for your carer on the day of the procedure.
- Please make sure you have someone to pick you up after your procedure. Your procedure will be cancelled if you don't have an escort. Please contact MIVIR as soon as possible if this cannot be arranged.
- After the procedure you may experience mild-moderate pelvic discomfort which should resolve over the following few days with original symptoms resolving over the next few weeks. You should only require oral pain medication to help relieve symptoms.



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On the day of your procedure

You will need to present to the Day Procedure Unit on the day of your procedure – your admission time will be sent to you with your appointment time. This will allow the nurses time to complete your admission paperwork and any other tests that may be required such as blood tests or pre-medication.

You will be required to fast for 4 hours before your procedure – this means no food or fluids. You may take any regular medication with a small sip of water. Please continue to take your blood pressure medication. Please bring a list of your medications with you.

Please contact MIVIR if you are taking medication for the following;

- Diabetes,
- Stroke,
- Heart Conditions such as a Heart Attack or Atrial Fibrillation.

Pre Procedure

You will be required to change into a hospital gown and remove all clothing including your underwear. A cannula will be inserted into one of the veins in your arm or hand so medication can be given before, during or after your procedure. You may need to have some hair removed from your groin crease.

Procedure

You will be taken into the Angiography Suite and positioned on the table. Monitoring equipment will be attached so the nurses can monitor your blood pressure and heart rate throughout the procedure. The scrub nurse will clean the top of your leg with a cold antiseptic solution and then cover you with a sterile drape. Local anaesthetic will be injected into the skin, which will sting for 15-20 seconds. You should only feel pushing and pressure after this.

Post Procedure

At the end of the procedure the sheath will be removed and firm pressure will be applied to the puncture site for at least 10 minutes. You will be required to lie flat for a minimum of 2 hours after the sheath is removed. During your time in the recovery room the nurses will monitor your blood pressure and heart rate and regularly check the puncture site for any signs of bleeding. You will be given something to eat and drink as soon as you are able to sit up. Your cannula will be removed just before you leave the hospital. If you are staying overnight in the hospital, you will be taken to the ward after a short period in recovery.

Discharge

If you are being discharged home, your recovery period is approximately 4 hours. You must have someone to collect you and stay with you overnight. You will be given a letter from the nurses with some discharge instructions and any other relevant information related to your procedure. You may be required make a follow-up appointment with Dr Vrazas. This can be made at your convenience by phoning MIVIR on 9411 7165.

At Home

We recommend the following;

- Rest quietly for the next 24-48 hours.
- No strenuous activity for the next 24-48 hours.
- You may remove the dressing the following day – you can leave it uncovered.
- Avoid swimming, spas and baths for 7 days.
- If you notice any swelling, bruising or pain at the injection site that continues to increase, call an ambulance or present to your nearest Emergency Department.

Useful Links

- [Ovarian Vein Embolization – Radiology Info](#)
- [Pelvic venous disease \(pelvic congestion syndrome or chronic pelvic pain\) – Society of Interventional Radiology](#)