

Patient information

Radiofrequency Ablation of Varicose Veins (VNUS Procedure)

Martin Corke Day Surgery Unit

VNUS closure

You have varicose veins which can be treated using radiofrequency ablation or 'VNUS' closure. This leaflet tells you about the procedure. Please read it carefully and ask your surgeon if you have any questions or concerns.

What is VNUS closure procedure?

VNUS is a minimally invasive treatment for varicose veins. It has been approved by the National Institute for Clinical Excellence (<u>www.nice.org.uk</u>) which assesses the safety and effectiveness of all new treatments.

The size and shape of the varicose vein will determine whether we will be able to treat you using VNUS. The VNUS catheter is attached to a generator which is used to obliterate (close) the faulty vein using locally directed heat, redirecting blood through nearby healthy veins as a result. The procedure is often performed under local anaesthetic. You will be able to go home on the day of treatment.

Before the procedure

You will be asked to sign a consent form in clinic or on the day of the procedure. Whilst the procedure is generally not particularly painful, there is some inevitable postoperative discomfort. It is a good idea to have some paracetamol and ibuprofen to take when you get home.

What will happen during the treatment?

You will be taken into the operating theatre and will be greeted by your team. Your name and procedure will be checked, and you will be asked about allergies.

You will be measured for support stockings to wear after the procedure. You will be placed on the operating couch and a cleaning solution will be painted on your leg(s).

An ultrasound scan will be used to mark the veins that require treatment. An injection will freeze the skin, and a small flexible wire will be passed into the vein. A fine tube is

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passed over this wire and then the VNUS probe is threaded through the tube. The position of the probe will be checked, and further local anaesthetic will be injected around the vein.

The generator then creates heat energy to seal the vein from the inside. This takes a few minutes. You should not feel anything during the treatment. Once the vein has been sealed the probe is removed.

Finally, a bandage is applied to the leg. This should be kept on for 1 to 3 days. A support stocking should be worn for 1 to 3 weeks.

What will happen after the treatment?

You will be taken back to the ward area for a short while after the operation. Once you can walk safely and feel fine you can go home. You should not drive yourself home and you should sit in the back seat with your leg(s) up.

Normal activity, including work, can be resumed as soon as you like, although contact sports, heavy exercise and swimming should be avoided for 1 to 2 weeks.

When the bandage is taken off, you may see some bruising or hardness under the skin. This is quite normal and will gradually settle.

You should wear your stocking(s) during the day for up to 3 weeks, but you may remove them at bedtime or for bathing.

What advantages does VNUS have over conventional surgery?

- •VNUS can be performed under a local anaesthetic. Normal activity can be resumed straight away, and you should be able to return to work within a few days.
- •VNUS removes the need for a groin incision in the skin, leaves fewer scars and less potential for complications such as wound infection and pain following surgery.
- •VNUS closure has been shown to cause much less pain and bruising than conventional surgery or endovenous laser therapy.

What are the potential complications?

- •There is a small chance that the vein will not be completely obliterated by the VNUS probe (this occurs in about 3% of patients).
- •Some patients have bruising and tenderness that lasts longer than 3 days. This is more common if you have had varicose veins removed at the same time as the VNUS procedure.
- It is not uncommon for some discomfort to develop around the obliterated vein 5 10 days after the procedure, due to inflammation. If this occurs, you may require antiinflammatory tablets such as ibuprofen.
- •About 2 5% of patients experience some numbness in the leg after VNUS. This is usually temporary, although it can be permanent.
- •There is a small risk of skin burns from the VNUS catheter (1%).

•As with any surgical procedure there is a small risk (1:1000) of blood clots forming in the main leg veins (DVT), although this is less common after VNUS than conventional surgery.

The procedure will not necessarily get rid of any bulging veins in the lower leg. It is designed to reduce the pressure in them. They often shrink but are still visible. If there is significant bulging and further scans reveal more leakage in the veins, then you may require further treatment with an operation or injections.

Airline travel

Although the risk of blood clots is minimal with keyhole techniques, we do not advise patients to undertake air travel within 4 weeks of the procedure.

Outpatients' appointment

This will be sent to you.

Contact your GP if:

- •You have severe pain.
- •If bruising is severe.

If you require any further advice, please contact the Martin Corke Day Surgery Unit on 01284 713050 between 7.45am and 8.00pm Monday to Friday.

Or the vascular secretary on 01284 713521 9.00am and 4.00pm Monday to Friday.

Outside of these hours contact the surgical ward F5 on 01284 713262 and speak to the nurse in charge. Please have your hospital number on the discharge letter available

If you would like any information regarding access to the West Suffolk Hospital and its facilities, please visit the website for AccessAble (formerly DisabledGo) <u>https://www.accessable.co.uk</u>



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