

Undergoing Varicocele Embolisation

Patient Information

X-Ray Department



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Introduction

This leaflet tells you about the procedure known as varicocele (pronounced VARI-CO-SEAL) embolisation. It explains what is involved and what the possible risks are. It is not meant to be a substitute for informed discussion between you and your doctor but can act as a starting point for such a discussion.

As you are having the varicocele embolisation as a planned procedure you should have sufficient explanation before you sign the consent form.

The Radiology Department may also be called the X-ray or Imaging Department. It is the facility in the hospital where radiological examinations of patients are carried out, using a range of x-ray equipment, such as a CT (computed tomography) scanner, an ultrasound machine, or an MRI (magnetic resonance imaging) scanner.

Radiologists are doctors specially trained to interpret the images and carry out more complex examinations. They are supported by radiographers who are highly trained to carry out x-rays and other imaging procedures.

What is a varicocele embolisation?

A varicocele is an abnormality of the veins that take blood away from the testicle. The veins become bigger and more obvious, rather like varicose veins in the leg. Varicoceles can cause various problems, including infertility.

Why do I need a varicocele embolisation?

Embolisation is a way of blocking these veins, and therefore making them less obvious and helping the varicocele to disappear, without the need for an operation. In the past, an open operation would have been necessary to get rid of the varicocele, but now it can be treated by the technique of embolisation.

Who has made the decision?

The consultant in charge of your case, and the radiologist carrying out the varicocele embolisation, will have discussed the situation, and feel that this is the best treatment option. However, you will also have the opportunity for your opinion to be taken into account and if, after discussion with your doctors, you do not want the procedure carried out, you can decide against it.

Who will be performing the varicocele embolisation?

A specially trained doctor called a radiologist will do the procedure. Radiologists have special expertise in using x-ray equipment, and interpreting the images produced. The radiologist will look at these images while carrying out the procedure.

Where will the procedure take place?

The procedure will take place in the x-ray department, in a room adapted for specialised procedures.

How do I prepare for varicocele embolisation?

You will be a day case patient in the hospital. You will be asked not to eat for four hours beforehand.

You will be asked to put on a hospital gown.

If you have any allergies, you **must** let your doctor know. If you have previously reacted to intravenous contrast medium (the dye used for kidney x-rays and CT scans), then you must also tell your doctor about this.

What actually happens during varicocele embolisation?

You will lie on the x-ray table, generally flat on your back.

You will also have devices attached to your arm and finger, to monitor your blood pressure and pulse.

The radiologist will keep everything as sterile as possible and will wear a sterile theatre gown and gloves. The skin, near the point of insertion, usually the groin, will be swabbed with antiseptic, and then the rest of your body covered with a theatre towel. On occasion this procedure is performed via the large vein in your neck (jugular), if this is the case the radiologist will discuss this during the consenting process.

The skin and deeper tissues over the vein will be numbed with local anaesthetic, and then a needle will be inserted into the large vein.

Once the radiologist is satisfied that this is correctly positioned, a guide wire is placed through the needle. Then the needle is withdrawn allowing a fine plastic tube, called a catheter, to be placed over the wire and into the vein.

The radiologist uses the x-ray equipment to make sure that the catheter and the guide wire are moved into the right position. The radiologist can block the abnormal veins, either by injecting a special fluid through the catheter, or passing small metal coils down into the varicocele. These metal coils are like small springs, and cause the blood around them to clot, and consequently block the vein.

The radiologist will inject small amounts of special dye, called contrast, down the catheter, to check that the abnormal veins are being blocked satisfactorily. Once they are blocked completely, the catheter will be removed. The radiologist will then press firmly on the skin entry point for several minutes, to stop any bleeding.

Will it hurt?

When the local anaesthetic is injected, it will sting to start with, but this soon passes, and the skin and deeper tissues should then feel numb. After this, the procedure should not be painful.

There will be a nurse, or another member of staff, standing next to you and looking after you.

You will be awake during the procedure, and able to tell the radiologist if you feel any pain or become uncomfortable in any other way.

How long will it take?

Every patient's situation is different, and it is not always easy to predict how complex or how straightforward the procedure will be. Generally, the procedure will be over in about an hour, but you may be in the x-ray department for longer.

What happens afterwards?

You will be taken back to your ward, usually the Surgical Assessment Lounge (SAL), on a trolley. Nurses on the ward will carry out routine observations, such as taking your pulse and blood pressure, to make sure that there are no untoward effects. They will also look at the skin entry point to make sure there is no bleeding from it. You will generally stay in bed for a few hours, until you have recovered. You will be allowed home on the same day. You **MUST** have someone to escort you home and supervise you overnight.

Are there any risks or complications?

Varicocele embolisation is a very safe procedure, but there are some risks and complications that can arise. There may occasionally be a small bruise, around the site where the needle has been inserted, this is quite normal. If this becomes a large bruise, then there is the risk of it getting infected, and this would then require treatment with antibiotics. Very rarely, some damage can be caused to the vein by the catheter, and this may need to be treated by surgery or another radiological procedure. Unfortunately, there is always the possibility that although the varicocele seems to have been cured, months or even years later, it may come back again. If this happens, then the procedure may need repeating, or you may be advised to have an operation. Despite these possible complications, the procedure is normally very safe, and is carried out with no significant side-effects at all.

Finally

Some of your questions should have been answered by this leaflet but remember that this is only a starting point for discussion about your treatment with the doctors looking after you. Do satisfy yourself that you have received enough information about the procedure, before you sign the consent form.

Contact

The X-Ray Department can be contacted directly on (01942) 778713, or via the hospital switchboard on (01942) 244000 and ask for the X-Ray Department.

Acknowledgments

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This leaflet has been prepared by the British Society of Interventional Radiology (BSIR) and the Clinical Radiology Patients' Liaison Group (CRPLG) of The Royal College of Radiologists.

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The Royal College of Radiologists, 25th February 2020

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am to 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust
Royal Albert Edward Infirmary
Wigan Lane
Wigan WN1 2NN

Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?



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This leaflet is also available in audio, large print, Braille and other languages upon request.

For more information, please ask in the department/ward.

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