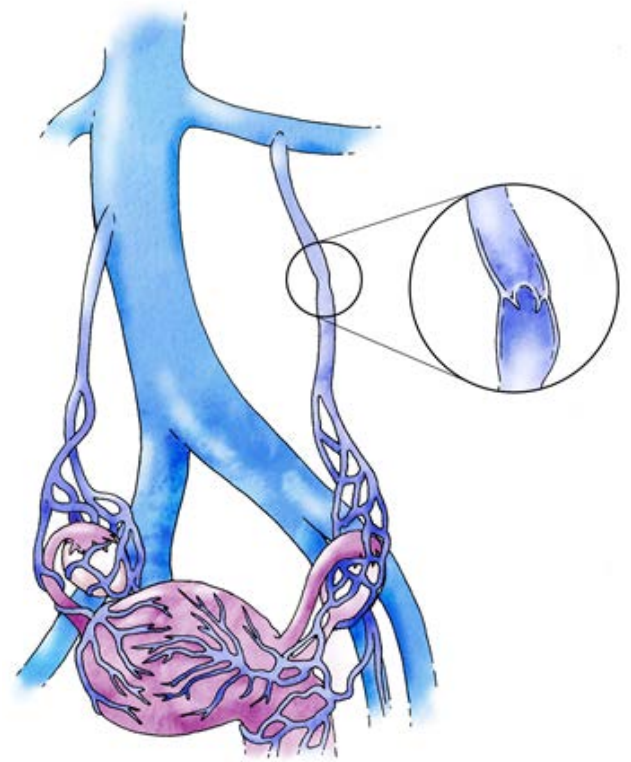


# Pelvic Congestion Syndrome

*Helpful information*



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## Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

To request an appointment or talk with someone about pelvic congestion syndrome, call the Surgical Specialties Center: 206.598.4477

*Please talk with your doctor if you have any questions about pelvic congestion syndrome.*

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## What is pelvic congestion syndrome?

Pelvic congestion syndrome is ongoing (*chronic*) pain in the pelvic area (lower abdomen). The pain occurs when veins in the area become enlarged.

## Who is most likely to have it?

Women who have pelvic congestion syndrome usually:

- Are under 45 years old  
and
- Have had at least 1 pregnancy

This syndrome can also occur in women who have *varicose veins* (swollen veins) in their legs.

## What are the symptoms?

The main symptom of pelvic congestion syndrome is ongoing pelvic pain that gets worse when a woman:

- Is having her period (menstruating)
- Is having sex (intercourse) or has just had sex
- Has been standing or walking for a long time

Other symptoms include:

- *Irritable bladder* (a sudden, urgent need to urinate)
- Varicose veins on the genitals or legs



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*The main symptom of pelvic congestion syndrome is ongoing pain in the lower abdomen.*

## Your Care Providers

When you come for your first clinic visit, you see either a doctor or our nurse practitioner. If you decide to have either coil embolization or foam sclerotherapy, you will also meet Dr. Mark Meissner at one of your visits.



Mark H. Meissner, MD

Dr. Meissner is the lead surgeon working with patients with pelvic congestion syndrome at UWMC. He received his medical degree from the University of Colorado, but did his residency and a vascular surgery fellowship at the University of Washington (UW). He is now a professor of surgery at the UW.

Dr. Meissner specializes in vascular surgery and vein diseases of the pelvis. He is an active member of many medical organizations. He publishes and lectures on vein diseases around the world.

## To Learn More

If you would like to learn more about pelvic congestion syndrome and its treatments, here are 2 online articles you may find helpful:

- “New Treatments for Vein Disorders”:  
<http://uwmedicinehealth.com/article/new-treatments-vein-disorders>
- “All About Pelvic Congestion Syndrome”:  
[www.veindirectory.org/article/conditions/pelvic-congestion-syndrome](http://www.veindirectory.org/article/conditions/pelvic-congestion-syndrome)

## Foam Sclerotherapy

The images below show the 4 main steps in foam sclerotherapy:

- Step 1: A *catheter* (small tube) is inserted into the vein that is causing pain.
- Step 2: Foam is inserted through the catheter and into the vein. This makes the vein *contract* (get smaller).
- Step 3: The catheter is removed and the vein closes up.
- Step 4: Over time, the body absorbs the closed vein.



Step 1



Step 2



Step 3



Step 4

## How is pelvic congestion syndrome diagnosed?

To diagnose pelvic congestion syndrome, your doctor will take images of the veins in your pelvis and abdomen. This can be done using one or more of these imaging methods:

- *Ultrasound* (see photo below)
- *Magnetic resonance imaging* (MRI)
- *Computed tomography* (CT)
- *Pelvic venography* (a type of X-ray)

The technologist and your doctor will examine these images to see if you have varicose veins. They will also check veins outside your pelvic area to see if they are *compressed* (narrowed). This can cause blood to back up into your pelvis, which causes pain. This is called a *compression syndrome*.

Two types of compression syndrome are *Nutcracker phenomenon*, and *May Thurner syndrome*. Visit these websites to learn more:

- [www.phlebology.org/nutcracker-syndrome](http://www.phlebology.org/nutcracker-syndrome)
- [www.cvmus.com/may-thurner-syndrome-greenbelt](http://www.cvmus.com/may-thurner-syndrome-greenbelt)



An ultrasound technologist uses a small hand-held device called a transducer to take images of the inside of your body. Inset: An ultrasound image of pelvic varicose veins.

## How is it treated?

Treatment for pelvic congestion syndrome depends on what is causing the pain in your pelvis:

- If the images show that you have varicose veins in your pelvic area, your doctor may advise you to have a procedure called an *endovascular intervention*.
- If you have compression syndrome (see page 3), your doctor may advise you to have surgery.

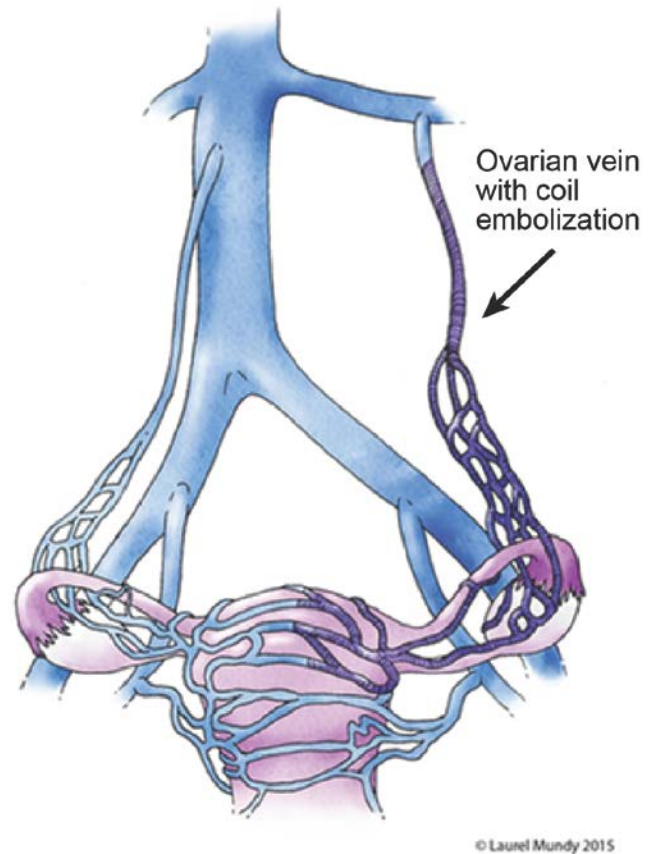
## What is an endovascular intervention?

In an endovascular intervention, small catheters (thin, flexible tubes) are used to access your arteries and veins. This is a *minimally invasive* procedure. It is done through a tiny incision and you will not need to have sleeping medicine. Some patients will need to stay overnight in the hospital after their procedure, but others will be able to go home the same day.

Here are 2 types of endovascular intervention your doctor may suggest:

- **Coil embolization** may be done in your ovarian or *iliac* (hip) veins. During this procedure, your doctor will insert small metal coils into the painful veins to block the blood flow. (See drawing on page 5.) The metal coils will stay in your veins after the procedure. They will not harm your body.
- **Foam sclerotherapy** may be done in the varicose veins in the pelvis. In this procedure, your doctor will inject chemical foam into the painful vein. (See page 6.)

Your doctor will carefully go over the results from your scans and talk with you about which type of procedure will be best for you.



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*Coil embolization of an ovarian vein.*