

Dr Susan Austin Provider No: 049332LX

## Consent form for use of Aethoxysklerol to treat leg veins

Dear Patient,

Aethoxysklerol is a solution that has been used for injecting varicose and spider veins in Europe and the UK for many years on thousands of patients and recently it has been used in the United States. It has been on trial in Australia for many years and has been fully registered by the Therapeutic Goods Administration in 2001.

According to extensive information that is available overseas, it is one of the safest and most effective sclerosants available in the world at the present moment. Its main advantage is that it has very much less pain on injection that sclerosants previously available in Australia.

Possible side-effects are as follows:

- 1. **Anaphylaxis:** This is an extreme allergic reaction and is extremely rare. It has been reported overseas.
- 2. Allergic reaction: These are mainly in the form of minor rashes.
- 3. Local Skin Ulcers: These are rare and tend to be very small and heal rapidly.
- Deep Vein Thrombosis: This is extremely rare if the correct dosage is followed and the injection is associated with compression and mobilisation. It occurs using this solution in approximately one leg in 7000 injected.
- 5. **Pulmonary embolus** is an extremely rare complication of sclerotherapy.
- 6. Thrombophlebitis or inflammation of the veins is an uncommon side-effect of sclerotherapy.
- 7. **Pigmentation** or brown staining of the skin over the areas injected. This is rarely long lasting, but may cause some temporary concern.
- 8. **New vessel formation:** Occasionally a blush or flare area may appear adjacent to the veins injected. This can occur after the use of any sclerosant and may be a sign that further injections would be unsuitable for you if this occurs.



At your first consultation, you will be given this information sheet and asked to read it carefully. At a subsequent consultation you will have your injections and if you have any questions please ensure that you ask your doctor before signing the consent form.

I agree to pay for treatment at time of consultation.

## Consent for use of Aethoxysklerol

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consent to having my veins injected with Aethoxysklerol. I have read the information about this sclerosant. I fully understand the effects and possible complications and I have discussed these with Dr Susan Austin.

PATIENTS NAME .	 	 
SIGNATURE	 	 
DATE		
WITNESS	 	 