Varicocele Embolization

Varicocele treatment has traditionally involved open surgery, requiring general anesthesia and a surgical incision above the scrotum (or higher in the flank area) to expose the affected veins. However, now there is a minimally invasive treatment option called a varicocele embolization.

Varicocele embolization is an outpatient procedure performed by inserting a small tube (catheter) into the groin (or neck) through a small nick in the skin. The catheter is guided up into the abdomen and directly into the varicocele vein under the guidance of x-ray imaging. A dye is injected to create an x-ray map (venogram) of the vein and tiny metal coils or other embolizing agents are inserted through the catheter to block the blood flow to the vein.

Patients are typically observed for a few hours and go home the same day. Total recovery time is generally less than 24 hours and patients often return to work the next day.

Advantages of treatment compared to traditional surgery

- Success rates of 90%, similar to surgical techniques
- Quicker recovery time; days vs. weeks as compared to open surgery
- Reduced risk of infection
- Same day procedure, allowing you to recover at home

Interventional and Vascular Consultants is a comprehensive medical practice specializing in minimally invasive endovascular solutions to diagnose and treat diseases of the blood vessels. Our unique approach to vascular care is recognized for its commitment to clinical excellence and outstanding patient satisfaction.

The minimally invasive techniques used by interventional radiologists often replace open surgical procedures because there are no large incisions, less risk, reduced pain, and shorter recovery times for patients. Our state-of-the-art endovascular suites are equipped with the newest devices to assist in performing minimally invasive procedures.

How to make an appointment:

Physician Referrals
Call or fax a request to our office. Please include any pertinent X-rays, labs and chart notes you have. These will be reviewed and a consultation appointment will be scheduled with your patient. We can provide your office with referral forms as well.

Patient Direct Referrals
Call or email inquiry. We will review your inquiry. We may ask for additional information prior to a consultation appointment to assure that we can provide the care you are seeking.

Available for Consultation in Wilsonville

Treatment is available at our outpatient center in Wilsonville and at the following hospital locations: Legacy Emanuel, Legacy Meridian Park, Legacy Mt. Hood and Legacy Salmon Creek.

Wilsonville Office
25030 SW Parkway Avenue, Suite 200
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**What is benign prostatic hyperplasia?**

Benign Prostatic Hyperplasia (BPH) is the most common disease of the prostate causing debilitating symptoms that have an impact on the quality of life. BPH is a benign non cancerous increase of prostate volume, and commonly causes obstruction of the bladder outflow. Despite having significant prostatic enlargement some men may remain asymptomatic and require no active treatment.

**Possible Treatments**

There are several suggested treatments, according to the severity of the symptoms. For patients with mild symptoms, physicians may choose to follow the ‘watchful-waiting’ approach.

Patients with more severe symptoms or those unable to benefit from pharmacotherapy may be candidates for surgery. Although open prostatectomy is rarely performed these days, other less invasive approaches such as a transurethral resection of the prostate (TURP) may be performed if the prostate volume is between 60 to 80 cc. Other available surgical methods may include laser surgery, thermotherapy and electrovaporization.

If left untreated, BPH causes urinary retention and can lead to severe complications such as urinary tract infections, bladder stones or diverticula, and renal failure.

**What are Varicoceles?**

Varicoceles are a tangled network of blood vessels or swelling of the veins on the testicles. It is similar to varicose veins in the legs, but in this condition a vein called the gonadal vein has weak defective valves resulting in the blood pooling in varicose veins in the scrotum.

Approximately 10% of all men have varicoceles. They are most prevalent in men ages 15-35. Among infertile couples nearly 30% of men have varicoceles.