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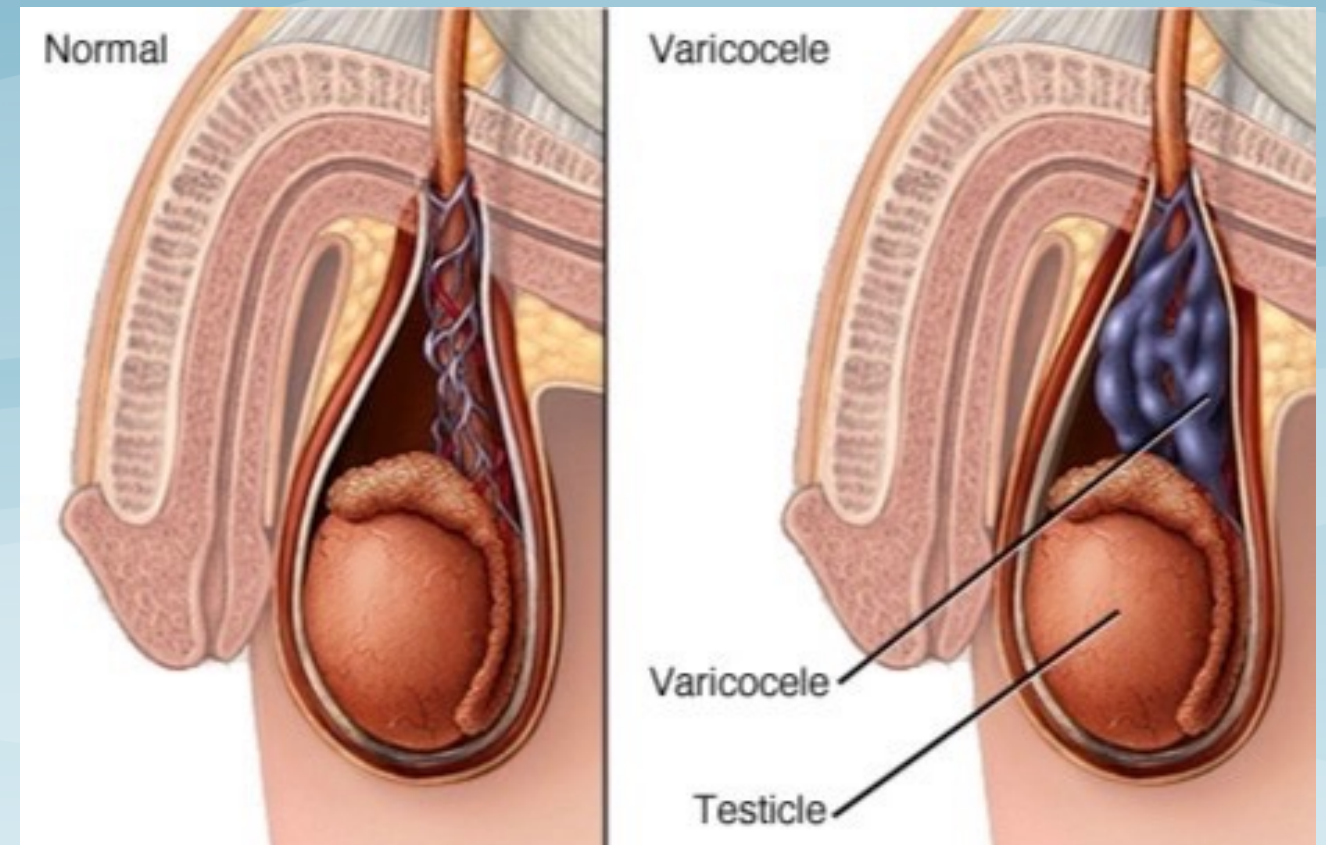


# VARICOCELES

(Dilated scrotal veins)

Symptoms, Medical Implications and Treatment

Interventional Radiology Treatment  
Trans-venous Varicocele Embolization



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## Questions and Answers about Varicoceles

**Q.** What are Varicoceles

**A.** A varicocele is an enlargement of the veins within the loose bag of the skin that holds your testicles (the scrotum). It is an abnormal distension of the pampiniform venous plexus, the venous drainage from the testicle. The cause is usually backward flow in or impaired drainage of the testicular or internal spermatic vein. A Varicocele has also been described as looking like a “BAG OR WORMS”. The condition may cause a swollen testicle almost always on the left side.

**Q.** What are the Typical Symptoms and Implications.

**A.** Most varicoceles do not cause symptoms, however they can be significant as they can result in chronic shrinkage (atrophy) of the testicle, Infertility or pain. Pain and infertility are the most common reasons men present to a doctor.

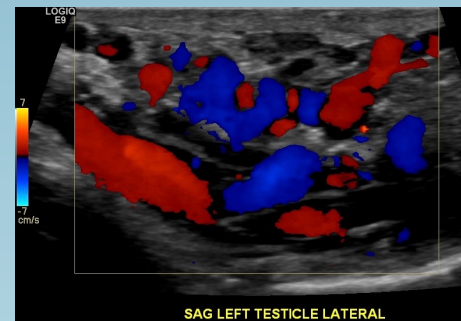
- **Infertility:** They are the most common treatable cause of male factor infertility and present in 30 to 40% of infertile men. Adverse effects on spermatogenesis are thought to be due to impaired heat dissipation in the venous plexus of the testicle or reflux of adrenal or renal metabolites into the testicles.
- **Shrinkage (Atrophy):** Decreased size of the testicle correlate with decreased sperm counts and motility.
- **Pain:** May vary from sharp to dull. Increases with standing or physical exertion, especially over long periods. Usually worsens over the course of the day. May be relieved when you lie on your back.

**Q.** What are the risk factors for Varicocele

**A:** There does not appear to be any significant risk factors to developing a varicocele. They usually form during puberty and can grow larger and easier to notice over time. They are essentially like varicose veins in the leg.

**Q.** How are Varicoceles diagnosed

**A:** They are found by self physical examination or diagnosed by physical exam done by your doctor. An Ultrasound scan is also usually obtained. In some patients we may also recommend a CT scan to help plan treatment.



**Testicular Ultrasound showing dilated scrotal veins.**

**Q.** When is treatment recommended?

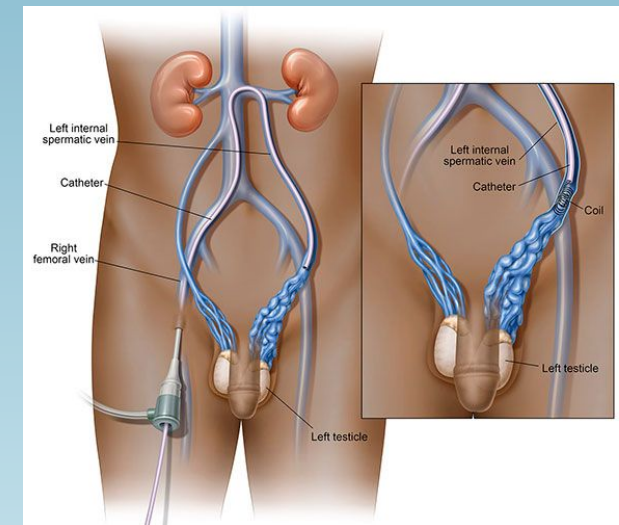
**A.** Most men present to the doctor with infertility or have significant chronic pain associated with their varicoceles.

- **Pain:** When there is pain we treat.
- **Infertility:** The American Society of Reproductive Medicine recommend treatment in men if the semen parameters are abnormal and the varicocele is palpable.
- **Left testicle growing more slowly than the right:** An important Third group is the asymptomatic adolescent male with a palpable varicocele. Prophylactic treatment is recommended if there is reduction in the testicular size( 2ml difference in volume compared with the other testicle or 2 standard deviations with respect to normal testicular volume).

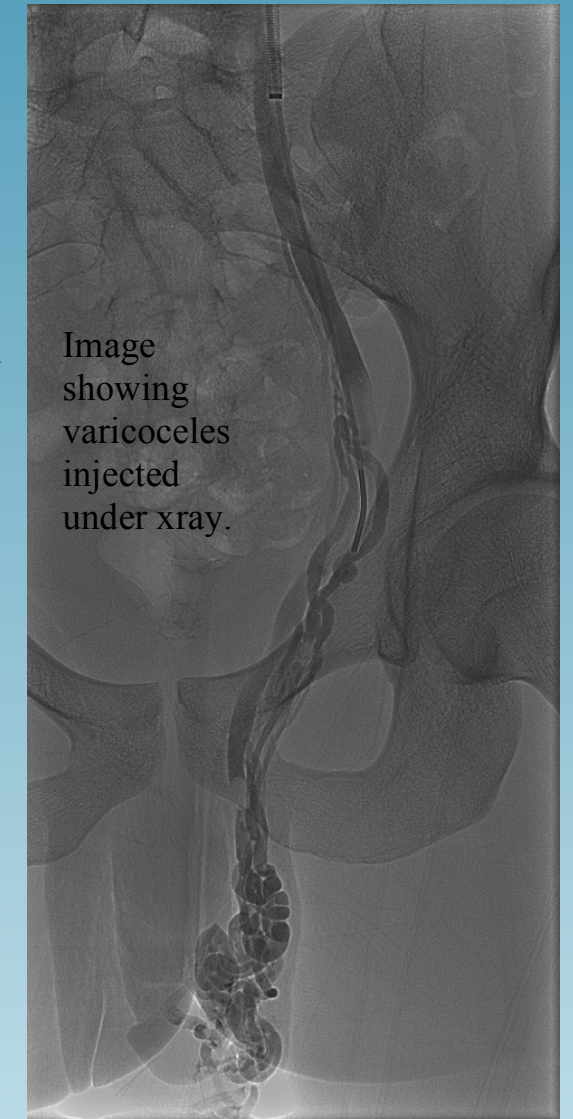
**Q:** What are Your treatment options.

**A:** Treatment options include transvenous embolization or surgery.

1. **Surgery:** There are many ways to do varicocele surgery. All involve blocking flow to the veins. May be open or laparoscopic surgery.
2. **Tran-venous Embolization:** This is a procedure done by an Interventional Radiologist. A specialist trained in minimally invasive intravascular techniques. The entire procedure is done through a puncture in a vein in the neck or groin the size of a pen tip.



The specialists guides a catheter under real time fluoroscopy(Xray) into the abnormal veins in the scrotum. Once identified, the veins are occluded with metallic coils and sclerosant (a vein irritant). The vein is immediately occluded.



The entire procedure is done with the patient awake while given a small amount of medication to relax. The catheter is removed after the procedure and a Band-Aid is placed over the access site. You are discharged home about 30 minutes after the procedure.