



Extravasation of sclerosing agent do not obligatory provoke necrosis

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No potential conflict of interest

Necrosis and sclerotherapy :

Mechanisms

- Direct toxicity: Iodine, ? STS ? Hypertonic saline
- Arterio-venous microfistulas
- Inadvertent intra-arterial injection
- Veno-arterial reflex vasospasm
- Parietal diffusion

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- Exceptional with chromated glycerine, polidocanol (in particular with foam)
 - Guex JJ et al. 12,173 sclerotherapy sessions

Dermatol Surg 2005;31: 123-8

Polidocanol

- Anaesthetic agent (BASF, 1936)
- Side effect: vascular obliteration
- Nr 1 Drug for sclerotherapy
- Topical antipruriginous agent in Dermatology
- Paravasal injection in C1: Quaddeln (**W. Goor**)
- POL is unique among sclerosing agents in that it is both painless to inject and does not produce cutaneous ulceration, even with intradermal injection of concentrations less than 1%
(Goldman, 4th ed.)

Skin necrosis - Animal studies

- **MP Goldman**
- **No necrosis in rats if < 0.5 mL POL, < 1%, or as foam**
Schuller-Petrovic S et al. JEADV 2011;25: 983-6
- **Paravasal injection of 0.05 – 1 ml polidocanol (0.1 - 1%) in rats**
- **Ultrastructural damage of the arterial and venous media /intima and nerves**

Staubesand J, Seydewitz V. Ultrastructural changes following paravascular and intra-arterial injection of sclerosing agents: an experimental contribution to the problem of iatrogenic damage

Phlebologie 1991;20:1-8

Schibler F, Borradori L, Ramelet AA, Dermatol Surg 2018

- Anxious patient, 19 years
 - Atypical naevus (forearm)
 - Mother: malignant melanoma
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- Local anaesthesia
(7 cc lidocain-epinephrine)
→ no effect, no vasoconstriction



Confusion Lidocain - Polidocanol

- Checking the utilised product....
- Polidocanol 0.5%...
- Explications, postponed intervention, surveillance

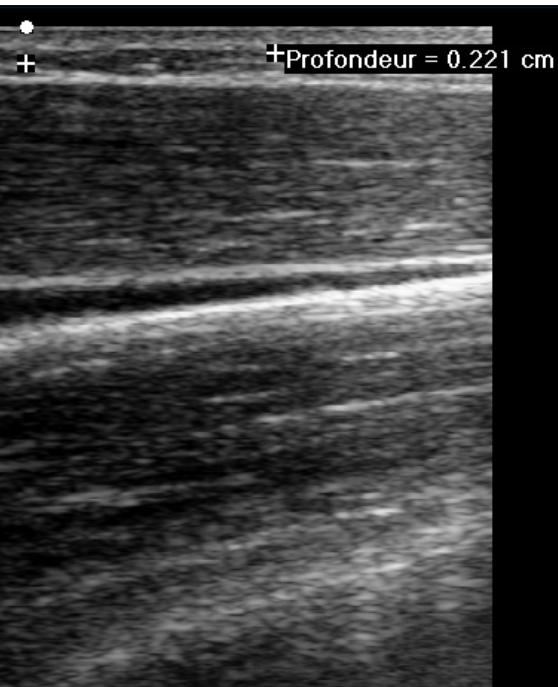
- Next days
- Tumefaction and local warmth
- Renitence at palpation
- Pain
- No cyanosis

After 14 days

left

forearm

right



After 14 days

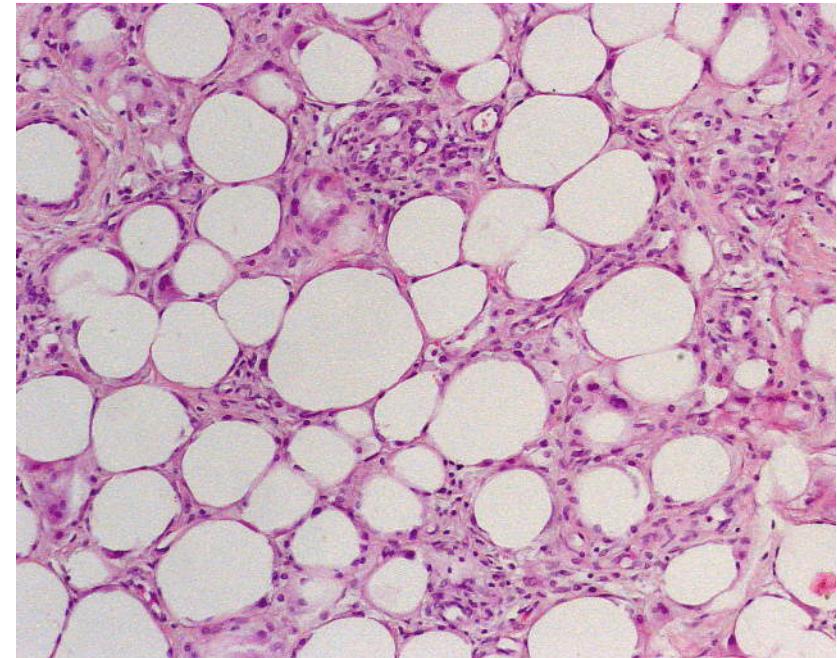
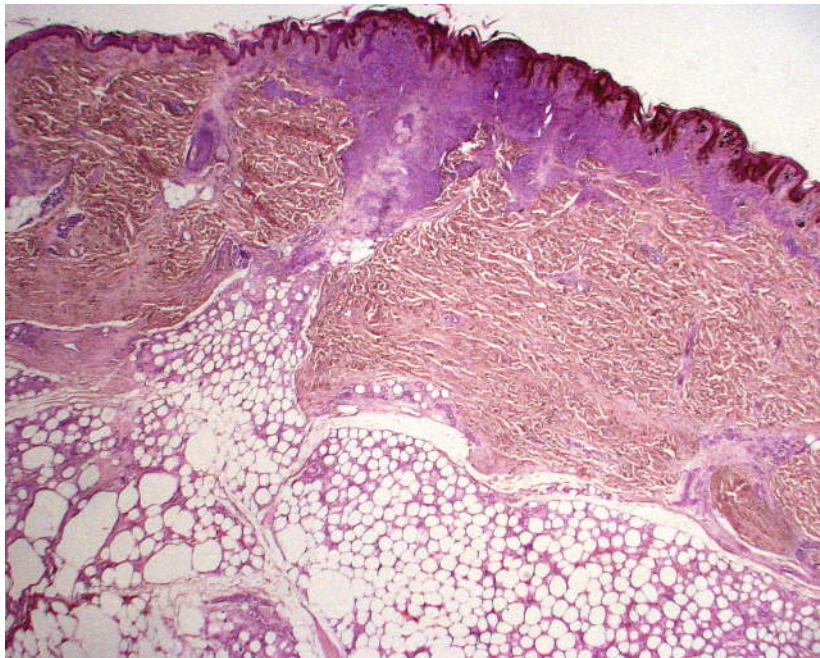
left

forearm

right



**6 weeks later,
excision in LA...**



**Dysplastic melanocytic Naevus
Underlying panniculitis**



Conclusions

Polidocanol:

- A good sclerosing agent, a bad anaesthetic
- Necrosis – exceptional, even if paravasal
- Beware transparietal diffusion in arteries, veins and nerves ?