Ovarian and Internal Iliac Vein Embolization as a Treatment of Pelvic Congestion Syndrome

Medical Benefit
Effective Date: 01/01/11
Next Review Date: 07/17

Preauthorization
No
Review Dates: 09/10, 07/11, 07/12, 07/13, 07/14, 07/15, 07/16

This Protocol considers this test or procedure investigational. If the physician feels this service is medically necessary, preauthorization is recommended.

The following Protocol contains medical necessity criteria that apply for this service. The criteria are also applicable to services provided in the local Medicare Advantage operating area for those members, unless separate Medicare Advantage criteria are indicated. If the criteria are not met, reimbursement will be denied and the patient cannot be billed. Please note that payment for covered services is subject to eligibility and the limitations noted in the patient’s contract at the time the services are rendered.

Description
Pelvic congestion syndrome is characterized by chronic pelvic pain that often is aggravated by standing; diagnostic criteria for this condition are not well-defined. Embolization of the ovarian and internal iliac veins has been proposed as a treatment for patients who fail medical therapy with analgesics.

Summary of Evidence
Randomized controlled trials using well-defined diagnostic criteria are required to establish the safety and efficacy of this procedure. The available literature regarding embolization therapy for the treatment of pelvic congestion syndrome consists of case series and is inadequate to draw clinical conclusions; thus the treatment is considered investigational.

Policy
Embolization of the ovarian vein and internal iliac veins is considered investigational as a treatment of pelvic congestion syndrome.

Policy Guidelines
Embolization of the ovarian vein may require an overnight hospital stay. Embolization of the internal iliac veins has been performed on an outpatient basis.

Background
Pelvic congestion syndrome is a condition of chronic pelvic pain of variable location and intensity, which is associated with dyspareunia and postcoital pain and aggravated by standing. The syndrome occurs during the reproductive years, and pain is often greater before or during menses. The underlying etiology is thought to be related to varices of the ovarian veins, leading to pelvic congestion. As there are many etiologies of chronic pelvic pain, the pelvic congestion syndrome is often a diagnosis of exclusion, with the identification of varices...
using a variety of imaging methods, such as magnetic resonance imaging, computed tomography scanning, or contrast venography. For those who fail medical therapy with analgesics, surgical ligation of the ovarian vein has been considered. More recently, embolization therapy of the ovarian and internal iliac veins has been proposed. Vein embolization can be performed using a variety of materials including coils, glue, and gel foam.

**Regulatory Status**

Ovarian and internal iliac vein embolization is a surgical procedure and as such is not subject to regulation by FDA.

A variety of materials including coils, glue, and gel foam would be used to embolize the vein(s), and those would be subject to FDA regulation. Several of these products have 510(k) marketing clearance for uterine fibroid embolization (e.g., Embosphere® Microspheres, Cook Incorporated Polyvinyl Alcohol Foam Embolization Particles) and/or embolization of hypervascular tumors and arteriovenous malformations (e.g., Contour® Emboli PVA).

**Related Protocol**

Occlusion of Uterine Arteries Using Transcatheter Embolization

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Services that are the subject of a clinical trial do not meet our Technology Assessment Protocol criteria and are considered investigational. For explanation of experimental and investigational, please refer to the Technology Assessment Protocol.

It is expected that only appropriate and medically necessary services will be rendered. We reserve the right to conduct prepayment and postpayment reviews to assess the medical appropriateness of the above-referenced procedures. **Some of this Protocol may not pertain to the patients you provide care to, as it may relate to products that are not available in your geographic area.**

**References**

We are not responsible for the continuing viability of web site addresses that may be listed in any references below.


