OVERVIEW
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.

PRIOR AUTHORIZATION
No Preauthorization is needed

POLICY STATEMENT
BlueCHiP for Medicare and Commercial:
Embolization of the ovarian vein and internal iliac veins is considered not medically necessary as a treatment of pelvic congestion syndrome because the available literature regarding embolization therapy for the treatment of pelvic congestion syndrome consists of case series and is inadequate to draw clinical conclusions.

MEDICAL CRITERIA
None

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.

Randomized controlled studies 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 not medically necessary.

COVERAGE
Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for limitations of benefits/coverage when services are not medically necessary.
CODING
BlueCHiP for Medicare and Commercial:

The following CPT code is not medically necessary when filed with the diagnosis codes listed below:
37241 Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary complete the intervention; venous, other than hemorrhage (eg, congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)

ICD9 code 625.5
ICD 10 code N94.89:

RELATED POLICIES
None

PUBLISHED
Provider Update, Apr 2015
Provider Update, Jan 2015

REFERENCES


