Post Embolization Syndrome (PES)

Notes of Interest:

**Definition:** Syndrome following solid organ embolization and infarction.

**Occurrence:** Leung et al. (2001) describes PES to “occur in the majority of patients undergoing hepatic chemoembolization and is the major reason for hospitalization after the procedure.”

**Applicable to:** UFE, Liver embolization TACE/TARE, Renal tumor embolization, RFA

**Symptoms:**

Self limiting combination of:

- Pain and cramping
- Low grade fever
- Mild elevation in WBC counts
- Nausea and vomiting
- General malaise

**Cause:** Probable cause due to the body’s inflammatory response to the embolization process, embolization causing lack of blood flow to the effected organ and therefore tissue necrosis eliciting PES symptoms.

**Duration:** expected duration 24-72 hours post embolization, usually self limiting

**Treatment:** treatment of symptoms, analgesia, antiemetic, antipyretic, rest, fluids

**Reference / Links:**


**Thoughts?**

- Is this patient at risk for PES?
- Re-embolization would this be a factor in PES?
- What dose of embolization materials is being used will this have a possible effect of PES?
- Has sufficient analgesia been ordered for the patient post procedure.
- Has tests been ordered to evaluate for PES?
- Has PES been discussed and explained to the patient?