

What You Don't Know About Varicose Veins Could Hurt You

What Are Varicose Veins?

Veins that have become swollen and raised above the skin's surface are called varicose veins. They can vary in color (flesh color, dark purple or blue) and are characterized by having the appearance of twisted rope. They are usually located on the inside of legs, backs of calves or groin area, and are actually a very common problem. Akin to varicose veins are red or purple spider veins, which are smaller, flatter veins located closer to the skin's surface.

You probably already know what a varicose vein looks like, but you might not know the true underlying causes of them. In addition to their unwanted appearance, varicose veins can lead to serious medical problems. Included here is information to help you understand varicose veins, while treatment details are on the back.

Statistics

- 1 out of every 2 people over 50 are affected by varicose veins.
- Varicose veins affect 40% of women.
- Varicose veins affect 25% of men.

What Causes Varicose Veins?

Many risk factors contribute to the development of varicose veins. This section will explain the anatomical causes behind varicose veins.

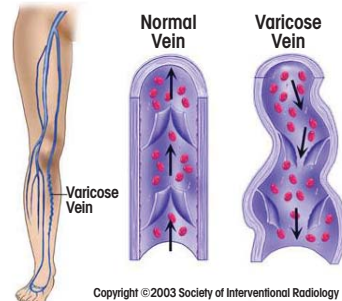
As you know, your heart pumps blood through your body. Arteries carry oxygen-rich blood away from the heart to your organs and tissue, and veins carry the deoxygenated blood back to the heart.

When you think about your circulatory system, visualize where your heart is in relation to your different body parts. Your legs are the limbs farthest away from your heart. Because your veins must work against gravity to pull blood from your legs back up to your heart, you can understand how hard your veins must work. What's more, almost 3/4 of the blood in your body is circulating in your legs.

Your body has two kinds of veins: deep veins and superficial veins. All veins have valves. These valves open to let blood flow back up toward the heart, and close to prevent backflow.

Deep veins are deep inside your body's tissue and are assisted by muscles. Superficial veins don't receive any help. Because they work very hard all by themselves, the valves in superficial veins often wear out. Also, age and hormones can cause veins to lose elasticity, which can prevent the valve from working correctly.

When the valve can't open and close, blood flows backwards. This is called venous reflux. When this happens, blood pools in the veins and causes them to take on the bulging, rope-like appearance that characterizes varicose veins.



Risk Factors for Developing Varicose Veins

- If a parent or grandparent had varicose veins, you have **inherited** a higher risk.
- **Women** are more at risk because of certain hormones.
- During **pregnancy**, hormones and increased blood volume can enlarge veins.
- As you **age**, vein walls become less elastic. This can cause the valves to malfunction.
- **Prolonged standing**, especially on the job, can increase the pressure and volume of blood in your legs.
- **Weight gain** can increase abdominal pressure, leading to worsened vein problems.
- **Hormones** in birth control pills and hormone replacement therapy (HRT) may mimic the hormones associated with pregnancy, a known risk factor.
- Blood vessels damaged from **leg injuries** can add to varicose veins.

See a Doctor If You Have These Symptoms

- Leg pain (cramps, aching)
- Heavy or tired feeling in legs
- Burning or tingling in legs
- Swelling or throbbing in legs
- Tenderness around the veins

Untreated Symptoms Can Lead To:

- Inflammation (phlebitis)
- Blood clots, including a condition called deep vein thrombosis
- Ankle sores
- Skin ulcers
- Bleeding

If You Have Varicose Veins, What Can You Do?

- Exercise, like walking, can improve symptoms.
- Exercise can also manage weight gain, which aggravates symptoms.
- Don't stand or sit for long periods of time. Walk around every 30 minutes.
- Don't wear high heels or clothing that restrict blood flow in the leg or groin.

Although these steps improve how you feel, they do not treat the root cause of varicose veins. Without proper treatment, symptoms will worsen as the varicose veins become larger and new varicose veins possibly develop. If your legs are swollen and you have pain, heaviness, burning or tenderness, contact your doctor immediately.

Sources: Diomed, Inc. and The National Women's Health Information Center at www.4women.gov

Treatment Can Help Varicose Vein Sufferers Kick Up Their Heels Again

You Are a Candidate for Treatment If...

- You or someone in your family has varicose veins or venous reflux.
- You have varicose veins that are large and bulging; swollen, red or warm to the touch; skin discoloration or texture changes are noticed around the veins.
- You have pain like aching or a cramping feeling in your legs, ankles or feet.
- Your legs, ankles or feet feel heavy or tired.
- You have burning or tingling in your legs, ankles or feet.
- The area around your varicose veins is tender to the touch.
- You have sores or skin ulcers near your ankles.
- Your legs, ankles or feet are swollen.
- You have had skin ulcers, or slow-healing areas, on your legs in the past.
- Your symptoms were not improved by exercise, weight loss, elevating your legs, avoiding long periods of standing or sitting and compression stockings.

Treatment Options

Patients and their physicians have surgical and non-surgical choices to treat varicose veins. When non-surgical steps fail to provide relief, new minimally-invasive treatments can be used. New treatments like Endovenous Ablation, which use laser-guided technology and don't require a hospital stay, have proven effective. What's more, patients have no scarring, very little pain following the procedure, and usually immediate symptom relief.



Compression Stockings

A conservative but life-long approach to treatment, compression stockings squeeze veins in order to stop excess blood from pooling in your veins. Exercise, weight loss, keeping your legs elevated and avoiding sitting or standing for long periods of time are included in this treatment regimen.

Sclerotherapy

Used to treat smaller varicose veins and spider veins, sclerotherapy involves a chemical injection into the vein that causes it to close and eventually be absorbed by the body. Minor stinging or itching at the injection site may occur.

Endovenous Ablation (e.g. Laser)

Many physicians prefer this latest advance in treatment over surgery. It is both highly effective and minimally invasive, with few side effects.

First, a small catheter is inserted into the vein and extended up into the groin. A laser fiber is then inserted through the catheter and aimed at the internal vein wall. After the wall is lasered, the vein will seal off and be absorbed by the body. A similar effect can be gained using electrically generated heat delivered through electrodes, an older version of this technology.

The procedure can be done in less than one hour in the physician's office using only a local anesthetic. No hospital stay is needed. It is successful at providing relief in 93-98% of all cases, with no scarring and a lower risk of complications. In most cases, normal activity can be resumed in one to two days.

Surgery (Ligation & Stripping)

Under general anesthesia, two large incisions are made at the groin and the knee. After the vein is tied off and cut, it is then stripped out of the leg. Patients usually have bruising and swelling, plus there is a risk of nerve damage around the incision site. This risk, the discomfort of surgery, the long recovery time, and 10-25% recurrence rates are why most physicians now recommend Endovenous Ablation.

Is Endovenous Ablation Safe?

New advances in treatment for varicose veins have sped up recovery times and minimized side effects. Patients who have undergone laser treatment, can expect a pulling sensation 4-7 days after treatment and some slight bruising.

Minimally-invasive procedures are typically safer, but all surgical procedures have the potential for complications. These include, but are not limited to, vessel perforation, thrombosis, pulmonary embolism, phlebitis, hematoma, ecchymosis, paresthesia, skin burn and infection.

Adjunctive Treatments

Sometimes additional procedures are necessary to obtain an optimal result. Endovenous ablation may not be appropriate or may not completely solve the problem. In these cases Micro-phlebectomy (a procedure where veins are removed through tiny incisions under local anesthesia) or sclerotherapy (mentioned earlier) may be used. We also offer procedures to improve the cosmetic outcome including superficial laser ablation or sclerotherapy of "spider veins".

Sources: Diomed, Inc. and The National Women's Health Information Center at www.4women.gov



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