Chronic Venous Insufficiency

BY DR. PETER K. HENKE

If you have CVI, valves in your veins (usually in the leg or sometimes the arms) don't work, causing blood to pool in your legs and putting increased pressure on the walls of the veins. May be due to valve dysfunction (usually hereditary) or due to valve destruction after a deep vein thrombosis (DVT) or blood clot.

FAIRLY COMMON, USUALLY CHRONIC

May affect up to 40% of the U.S population. More common in women (especially after multiple pregnancies) and in people who are middle-aged or older.

TREATABLE - PREVENTING COMPLICATIONS IS IMPORTANT

- Usually treated with exercise, compression stockings and weight loss if applicable.
- In some cases, may require vein ablation or vein stripping.
- Occasionally treated with angioplasty and stents.
- Preventing severe complications such as venous leg ulcers is key.

OFTEN RECURS

Even with very successful treatment, recurrence is common and you may need further care.

Find a vascular specialist near you

The information contained on Vascular.org is not intended, and should not be relied upon, as a substitute for medical advice or treatment. It is very important that individuals with specific medical problems or questions consult with their doctor or other health care professional.
Symptoms

Most symptoms are mild, and not limb-threatening.

HEAVINESS, SWELLING & PAIN

You may feel heaviness in the affected limb, as well as swelling and pain. Sometimes there is a darkening of the skin. An open sore or ulcer may develop—if your leg is affected, usually on the inside of the ankle—and it may be difficult to heal.

VARICOSE VEINS

Enlarged and twisted veins close to the surface of the skin are a sign of a milder form of venous disease. You may feel burning, aching, heaviness and pain.

Causes

Vein valves become incompetent, especially when standing, for unknown reasons.

A blood clot in a deep vein that causes your vein valves to fail and may completely block the vein. This causes greater swelling and can lead to tissue changes that may cause darkening of the skin, dermatitis or ulcers.

Diagnosis

SEE A VASCULAR SURGEON

You will be asked questions about symptoms and medical history, including questions about family members. The vascular surgeon will also perform a physical exam.

TESTS MAY BE RECOMMENDED

- Duplex ultrasound testing to look at your vein valves and see if they work.
- In cases where severe swelling occurs and is difficult to treat, a computer tomography (CT) scan of the venous system to look for vein narrowing or blockage in your abdomen.

Treatments
Most treatment is nonsurgical. The main goal is to prevent severe swelling and ulcers from developing.

- Compression garments relieve symptoms and aid ulcer healing.
- If superficial veins are affected, they may be treated through vein ablation or injection.
- If varicose veins develop and are close to the skin, they may be removed through superficial vein stripping, usually an outpatient procedure.
- If deep veins are affected, in severe cases angioplasty and stenting maybe recommended.
- In rare cases, surgical bypass may be required.

**Staying Healthy**

- Maintain a normal weight
- Exercise regularly
- Wear compression garments
- Maintain good skin care
- If you have had a deep vein thrombosis (DVT), it is essential to stick with any anticoagulation medications you have been prescribed

**Resources**
Varicose Veins
Deep Vein Thrombosis (DVT)