



Varicose veins are swollen, blue, bulging, twisted, veins close to the skin on the leg. High pressure inside the leg veins causes varicose veins, but genetics could play a large role.

As many as 40 million Americans have varicose veins. Left untreated, varicose veins can become worse. People with varicose veins often experience leg aches and fatigue. They may also suffer from skin changes, such as rashes, redness, and ulcers. Fundamentally, varicose veins result from the constant pressure of gravity pulling on veins as they work to return blood back to the heart from the feet. Treatment is focused on improving quality of life plus leg and general circulatory health.

Symptoms

- Visible veins that are swollen, twisted, or bulging
- Thin, web-like veins close to the skin's surface
- Aching or heaviness in the legs, especially after prolonged standing or sitting
- Swelling, particularly around the ankles
- Itching or burning sensation around the veins
- Discomfort or pain that worsens with prolonged standing or sitting
- Skin changes, such as redness, inflammation, or ulcers
- Restless legs or leg cramps, especially at night

These symptoms can vary in severity and may worsen over time if left untreated.



People between the ages of 30 and 70 have a higher chance of varicose veins

Causes and Risks

- Age – People between the ages of 30 and 70 have a higher chance of varicose veins
- Pregnancy – 50 to 55 percent of American women experience varicose veins during pregnancy; in most cases, the veins return to normal within a year after childbirth
- Multiple pregnancies – Women who have multiple pregnancies may develop permanent varicose veins
- Family history
- Obesity
- Standing or sitting for long periods of time

Diagnosis and Role of a Vascular Surgeon

A vascular surgeon will review the patient's medical history, do a physical exam, and look at prominent veins. The patient might be referred for a duplex ultrasound test, also known as a venous reflux study. This painless test identifies the causes of varicose veins using high-frequency sound waves to measure venous blood flow. The test helps the physician visualize the vein structure and blood flow.

Treatment

Most doctors will suggest lifestyle changes for patients with varicose veins, such as:

- maintaining a healthy weight
- elevating legs when resting
- avoiding sitting or standing for long periods of time
- wearing compression (elastic support) stockings

In some cases, a vascular surgeon will recommend additional treatments for varicose veins:

- **Sclerotherapy** is the sealing of the veins using a medication injection. This procedure is done mainly for smaller spider veins. It is performed in a doctor's office. The physician injects a chemical into the varicose veins to prevent the veins from filling with blood.
- **Vein stripping** is performed for more involved varicose veins. The physician makes two small incisions, one in the groin area and another below the knee, through which the diseased veins are removed. This is an outpatient procedure, usually done under general anesthesia. Patients can usually resume their normal activities after four weeks.
- **Radiofrequency and laser ablation treatment** use a tiny fiber placed in the vein through a catheter. The fiber sends out energy that closes the diseased portion of the vein. The treatment is performed under local or general anesthetic. These two modes of treatment frequently replace stripping of the saphenous vein. They can be performed alone or in conjunction with removal of individual clusters of varicose veins known as small incision avulsion or ambulatory phlebectomy.

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