



Waitemata
District Health Board

Best Care for Everyone

Managing Varicose Veins



What you need to know

VARICOSE VEIN SERVICES AT WDHB

Varicose veins are extremely common but vary tremendously in terms of symptom severity and lifestyle impact. Unfortunately not all patients referred for assessment of their varicose veins are able to be seen by a vein specialist. Patients with the highest need are prioritized to be seen. This includes patients with complications of varicose veins including severe skin changes such as active or healed ulceration (breakdown of the skin forming a wound) or severe skin thickening known as lipodermatosclerosis.

This booklet contains information that is intended to assist you in understanding what it means when you have been diagnosed as having varicose veins by your family doctor/ GP. It includes some advice aimed to help you manage your varicose vein symptoms and to slow the progression towards varicose vein complications.

PLEASE REMEMBER

Patients with bleeding varicose veins should immediately call for Help, Elevate the leg, Lie down, apply Pressure directly to the site of bleeding. (Remember HELP). Call an ambulance if bleeding cannot be controlled or does not stop after 10 - 15 minutes of continuous pressure.

FOR MORE INFORMATION VISIT

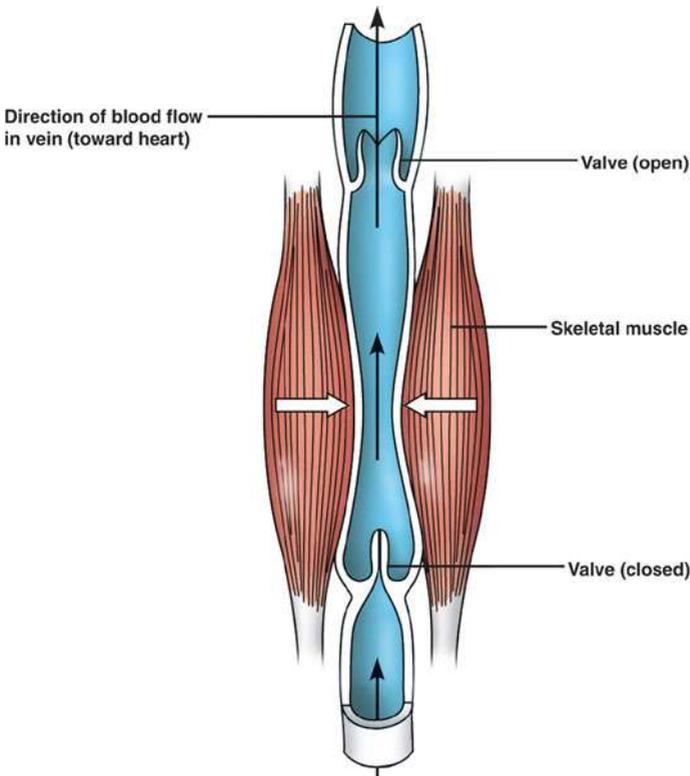
<http://www.sirweb.org/patients/varicose-veins/>

<http://www.phlebology.com.au>

<http://www.cirse.org/index.php?pid=112>

NORMAL VEINS

Healthy arteries and veins allow blood to flow in one direction only. The beating heart directs oxygenated blood via the arteries to the tissues and cells throughout body. De-oxygenated blood is then returned to the heart through the veins. The contraction of the leg muscles also acts like a pump to move blood up the leg veins, against the force of gravity. One-way valves in the leg veins prevent the back flow of blood down towards the feet.

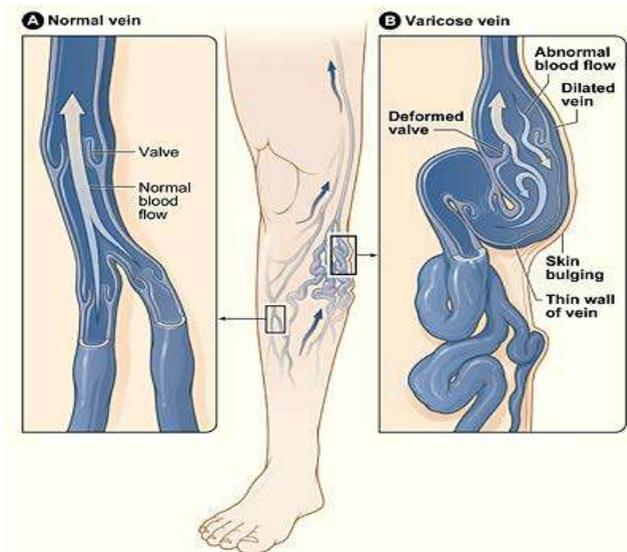


ABNORMAL VEINS

Abnormal veins have weak walls. These veins collect and contain more blood than normal veins, causing swelling of the vein. Because of this swelling, the valves no longer function properly, which causes a 'leakage', 'reflux' or 'backflow' of blood in the affected vein and leg. A vein demonstrating reflux is termed 'incompetent'. If severe reflux is present this results in venous hypertension (raised blood pressure within the veins) which may go on to cause leg swelling (venous oedema) and breakdown of the skin usually around the ankle (known as venous ulceration).

There are three types of abnormal veins, which are frequently seen in combination.

- 'Spider veins' are the fine red capillary veins.
- The larger blue veins are called 'reticular veins', and are slightly deeper below the skin's surface.
- Varicose veins are the largest of the abnormal veins, and may bulge above the skin's surface.



WHAT CAUSES VARICOSE AND SPIDER VEINS?

- A family history of varicose veins is a common underlying cause, suggesting that genetics plays an important role in the development of varicose veins.
- Up to 30% of men and women have varicose veins.
- Women are more likely to suffer from varicose veins at an earlier age than men.
- In women, varicose veins may worsen with fluctuations of hormones, such as during puberty, pregnancy and menopause, and with the use of birth control pills.
- Women who have given birth by normal vaginal delivery may also develop ovarian vein reflux and dilated varicose veins deep within the pelvis. This condition known as Pelvic Venous Congestion may result in chronic pelvic pain, vulval varices, or fed into varicose veins in the legs. Blocking off the refluxing ovarian veins by catheter directed embolization, (performed by an endovascular specialist), may be required to deal with the source of the problem.
- Other significant factors that contribute to the development and progression of varicose veins include obesity, sedentary lifestyle, aging, standing occupations and previous deep venous thrombosis (DVT).

HOW CAN ABNORMAL VEINS AFFECT YOU

- Reflux from larger veins into smaller veins causes swelling and the formation of so-called 'spider veins'. This is why treatment of spider veins in the presence of varicose veins is not appropriate, because it does not address the underlying cause.
- Reflux also leads to congestion of blood in the leg veins, which can cause symptoms such as aching legs,, leg fatigue, heaviness, burning, throbbing, cramping, itching and restless legs.
- Symptoms are often made worse by prolonged standing.
- The presence of ankle swelling, dry scaly skin or eczema, skin discoloration, skin thickening and leg ulcers indicate advancing vein problems.

Incompetent or refluxing leg veins are not always visible. A medical history, physical examination and ultrasound imaging are used to assess the nature and severity of any venous disorder. It is important to fully understand the source of the venous reflux (backflow) using ultrasound imaging before treatment decisions can be made.

TREATMENT OPTIONS FOR VARICOSE VEINS

Endovascular ablation (shutting down the vein from the inside) had become the preferred way of treating varicose veins in the legs. These minimally invasive therapies performed by an endovascular specialist have largely replaced older surgical stripping techniques. Procedures are performed under local anaesthetic as a day case and take around one hour to perform. Post operative compression of the treated veins is required by wearing a compression stocking / sock for two weeks.

ADVICE TO HELP MANAGE YOUR VARICOSE VEINS (Remember the 7 E's)



1. **Exercise regularly** (walking, jogging). This is one of the most important things you can do to encourage the leg muscles to contract, which acts to push the blood up the deep veins of the legs and back to the heart.
2. **Eat a balanced high fibre diet.** Excess weight can substantially worsen varicose veins and causes both venous and lymphatic problems. A high fibre diet and drinking plenty of water also keeps the bowels soft in order to avoid straining with constipation which places additional pressure on your veins.

3. Elevate your legs. Do this when resting or to relieve aching or tired leg symptoms. This will reduce the pressure in the veins and helps the return of blood back to the heart.



4. **Elastic compression stockings / socks.** These provide more compression near the ankles and less further up the leg, which encourages the flow of blood back to the heart.

5. **Eliminate tight clothing** especially around the waist and at the tops of socks.

6. **Emollient creams and moisturizers.** These help to keep your skin moist and in good condition. This is especially important if you have dry scaly or flaky skin or venous eczema.

7. **Ease leg discomfort or pain** using simple analgesia such as paracetamol. Oral anti-inflammatories or topical creams such as hirudoid cream may be useful if there are signs of inflammation or tenderness over your varicose veins. Use these medications as prescribed by your doctor.

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