

Varicose veins

Varicose veins are swollen and enlarged veins that are usually a blue or dark purple colour. They may also be lumpy, bulging or twisted in appearance.

Varicose veins develop when the small valves inside the veins stop working properly. In a healthy vein, blood flows smoothly to the heart. Gravity tends to pull blood back downwards but this is prevented by a series of tiny valves that open and close to let blood through. If the valves weaken or are damaged, the blood can flow backwards and can collect in the vein, eventually causing it to be varicose (swollen and enlarged). They are not a sign of any underlying or serious condition and usually occur for no apparent reason.

How common are varicose veins?

Varicose veins are a very common condition, affecting up to 30% of adults at some stage in their lives. It affects women more than men. They most commonly occur in the legs and feet, especially the calves; because standing and walking puts extra pressure on the veins in the lower body and blood flow is slowest in the lower body as it is furthest from the heart. They occur more frequently in pregnant women, people who are overweight, people who stand a lot due to their job. They become more common with increasing age.

Possible complications

Varicose veins have an unpleasant appearance, but they usually do not affect circulation or cause any long-term health problems. They generally do not require any treatment. Occasionally, varicose veins can cause aching, swollen and painful legs. Rare complications include skin discolouration and leg ulcers. Treatment is generally only needed if discomfort or complications develop.

Types of varicose veins

Types of varicose veins include:

- **Trunk varicose veins** occur near skin surface and are long, thick and knobbly.
- **Reticular varicose veins** are a group of small red veins clustered together
- **Telangiectasia varicose veins** are better known as thread veins or spider veins, are small clusters of blue or red veins that do not bulge that can appear on the face or legs.

Symptoms of varicose veins

As well as their distinctive appearance described above, symptoms of varicose veins can include:

- aching, heavy and uncomfortable legs
- swollen feet and ankles
- burning or throbbing in the legs
- leg cramps, particularly at night
- dry, itchy and thin skin over the affected vein

Symptoms can be worse during warm weather or after standing for long periods of time.

Self help

Avoid prolonged standing or sitting still. Try putting the feet up regularly. This can be done by sitting or lying down and raising the feet above the level of the hips, for example, using extra pillows under the feet on a bed. This helps reduce blood pooling in the veins. Use a moisturising cream or ointment to protect the skin if it is dry, flaky or itchy.

Treatment

Compression stockings steadily squeeze the legs to improve circulation. They are usually tightest at the ankle and gradually get looser as they go further up the leg. This encourages blood to flow upwards towards the heart. Ideally, they should be put on first thing in the morning, before you get out of bed, and taken off when going to bed at night. Below-knee class 1 (light) or class 2 (medium) compression stockings are generally most suitable. Compression should not be used with arterial disease; a medical professional should check the circulation using a device such as ultrasound machine called a doppler ultrasound.

Surgical removal may be required for large varicose veins. Surgery is usually carried out under general anaesthetic. People often get varicose veins removed for cosmetic reasons.

The most commonly used surgical technique to remove varicose veins is called ligation and stripping. This involves tying off the vein in the affected leg and then removing it. Two small incisions are made, approximately 5cm in diameter. The first cut is made at the top of the varicose vein near the groin. The second incision is made further down the leg, generally at the knee or ankle. The top of the vein (near the groin) is tied up and sealed. To remove the vein, a thin flexible wire is passed through the bottom of the vein and then carefully pulled out and removed through the lower cut in the leg. It is considered a minor surgical procedure and most people can leave hospital the same day of surgery and can usually return to work after a few days. It has a high success rate, with the veins only returning in 1 out of 10 cases.

Sclerotherapy is another type of surgery usually used to remove smaller veins. The treatment involves injecting a solution (usually a salt solution) into the veins; the solution scars the veins, which seals them closed. Small veins usually disappear a few weeks after the procedure. Larger veins take a little longer to disappear. Foam sclerotherapy may be required for larger veins. Instead of the liquid chemical, a special type of foam is injected into the affected vein. This Sclerotherapy is not suitable if a person has suffered from deep vein thrombosis.

Disclaimer: Please ensure you consult with your healthcare professional before making any changes recommended

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