

Through the keyhole

Mr Sudip Ray, a Consultant Vascular Surgeon working in London and the Channel Islands, discusses the assessment and modern treatment of varicose veins

Summer is coming so we asked Sudip some common questions about a condition that affects 20% of our population and about the best ways to get rid of them...

What are varicose veins?

Varicose veins are easily recognised as bluish worm-like cords around the thigh, knee and calf. They are surface veins that have become baggy or dilated, and are often worse after standing or exercise.

What causes them?

Varicose veins are usually associated with faulty valves within the drainage system of the leg. These valves normally ensure that blood is returned against gravity, but when they fail the surface veins are put under pressure and enlarge into varicosities. Varicose veins are more common following pregnancies due to the increased pressure on veins in the pelvis as well as hormonal changes which weaken the vein walls. There may also be a genetic predisposition explaining why varicose veins sometimes “run in the family”.

What symptoms do varicose veins produce?

They may cause discomfort and aching or feelings of heaviness, especially towards the end of the day. Occasionally the veins become hard (“phlebitis”), itch or bleed. If severe and untreated, they may produce pigmentation, eczema or even ulceration. We tend to see this

kind of skin damage in men rather than women as they prefer to hide their legs beneath hair and long trousers rather than seek treatment earlier!

Do varicose veins cause leg clots (DVT) after flying or long journeys?

No, although the veins may be more uncomfortable at these times.

How do I know whether I have a significant valve problem?

The anatomy and function of leg veins can be determined by a simple, safe and painless ultrasound examination (see photo below left). This provides a detailed vein map for the specialist to analyse and gives an indication as to whether they will get worse in the future.

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How can varicose veins be treated?

Temporary relief from aching or swelling may be gained by wearing elastic support stockings. If veins are particularly sore, large or unsightly then it is worth considering treatment using either a “keyhole” closure procedure or injections (sclerotherapy).

How do the keyhole closure procedures work?

A faulty vein inside the leg is sealed using either radiowaves or laser energy. This takes about 45 minutes under a local anaesthetic and is tolerated very well, with full recovery taking one to two weeks.

How do injections work?

A small amount of liquid (sclerosant) is injected into smaller veins without any need for anaesthetic. This causes a biological reaction which obliterates the vein within a few weeks. The simple addition of air to the liquid creates a potent foamy solution which is useful for larger veins.



Patient undergoing ultrasound of veins

Are there any future developments to treat varicose veins?

Yes quite a few, but we are particularly excited about a new bioglue which seals veins within minutes and allows immediate return to full activity.

How successful are vein treatments?

With the help of a detailed ultrasound map it should be possible to correct or remove 80-90% of the abnormal veins following one treatment session. Some people have a tendency to form more veins later on but these are usually small and respond to injections.

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