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When Should Varicose Veins Be Treated?

Varicose veins and spider veins (a more common milder version of varicose veins) are a part of a spectrum of venous disorders arising from valvular insufficiency. In some cases, varicose veins can cause no symptoms and are just cosmetically unattractive. In other cases, varicose veins can be the source of aches and pain causing heaviness in the legs along with cramps and itchiness. In extreme cases, varicose veins can cause symptoms such as leg oedema and skin changes that are chronic and irreversible. The final stage of the disease can lead to venous ulceration.

Unfortunately, the above-mentioned symptoms of varicose veins are rather non-specific, therefore, it is difficult to correlate the severity of symptoms with the severity of the venous disease. For this reason, early detection and treatment of venous disease is critical to stop the progression of this disease. Proper assessment and treatment can help reverse the damage and prevent further complications resulting in improved outcomes, as venous disease has been shown to have significant effect on health-related quality of life.

For optimum results, varicose veins should be treated at the earliest stage of the venous disease.



Early Detection of Varicose Veins

Before varicose veins develop, there are some early warning signs and symptoms to look out for. The table below highlights some these signs and symptoms.

Achy legs	When your legs cramps & ache with physical activity and exercise
Spots on legs	When you notice red spots develop on your lower legs
Itchy legs	When you notice your legs get itchy or your skin may peel
Shiny legs	When you notice an unnatural shine or pigmentation to your skin
Swollen feet	When you notice regular swelling of feet and ankles

Additionally, there are some common risk factors which can increase the chance of developing varicose veins.

Age	General wear and tear of the valves over time	
Sex	Females tend to be more prone due to hormonal changes	
Pregnancy	The increase in the blood volume can affect the veins	
Family History	Increased change of development if other members in family have it	
Obesity	The additional weight puts pressure on the veins	
Standing / Sitting	Lack of movement for long periods of time affects the veins	

It is important to screen patients who complain of leg pain and to investigate the specifics of their pain to determine if they are at risk of developing venous disease. However, screening should not be limited to feelings of pain and discomfort as some patients are taking some form of pain medication for other conditions and which may mask the pain in the feet and legs. A better marker would be if a patient shows signs and symptoms related to skin changes. It is advisable to refer these patients to a vascular surgeon who can provide a diagnosis and offer vascular intervention if necessary. This early intervention will halt the process that has caused the complications and will give the patient the best chance of reversing any changes that may have taken place in the skin or tissues of the leg.



When To Refer

Once the patient has displayed any of the above-mentioned signs and symptoms of varicose veins, it is advisable to refer them to a vascular surgeon at Northern Beaches Hospital. The benefit of sending the patient through to Northern Beaches Vascular rooms, is that that we offer an in-house ultrasound service with a specialised ultrasound technician who can scan the patients on the same day as the initial consultation. This service saves the patients time and money as the scans are bulk billed.

The ultrasound scans, also known as a venous insufficiency scan or a venous Doppler ultrasound will provide the vascular surgeon the information needed to make a diagnosis and offer the relevant treatment options to the patient. In patients with simple varicose veins that have not caused serious complications, treatment can be considered optional. However, those patients who have symptoms or the appearance of the varicose vein is unsightly, often decide to proceed with treatment. The choice is left up to the patient in consultation with the surgeon after they have weighed up the problems the varicose veins are causing against the treatment options recommended. To a large extent, the treatment will depend on the sites of the major valve problems in the varicose veins, the distribution and tortuosity of the veins and the severity of the varicose veins.

Summary For Referring		
Bulging or large varicose veins		
Symptomatic varicose veins with ache, pain or heaviness		
Episodes of thrombosis or superficial thrombophlebitis		
Venous eczema or skin irritation		
Deterioration in varicose veins that are chronic		
Veins with lower limb oedema		
Veins with skin pigmentation or ulceration		



What treatment is available for varicose veins?

The treatment options for varicose vein largely depend on the progression of the venous disease with more conservative management options available to the patients diagnosed at the onset of the disease. The vascular surgeon will diagnose the underlying cause of the varicose vein after reviewing the Doppler ultrasound. Subsequently, the vascular surgeon will provide each patient with an individualised treatment plan that is tailored to provide the patient with optimum results. These treatment options range from a more conservative approach such as self-care measures, compression stockings to minimally invasive approach such as sclerotherapy to more progressive treatment plans of surgeries or other procedures. These treatment options are not exclusive and often the treatment is a combination of different treatment types customised to each patient.

Self-Care	Compression stockings, elevating feet when sitting, exercise, weight loss.
Compression Stockings	Different grades of compression stockings available, which apply pressure to the leg veins and muscles resulting in more efficient blood flow.
Ambulatory phlebectomy	Surgical procedure where small varicose veins are removed through tiny skin punctures.
EVLT (Endovenous Laser Ablation)	A newer method of treatment where a laser fibre is guided inside the vein.
Sclerotherapy Injection	A microinjection technique where a solution or foam is injected into the vein to collapse the vein.
FRA (Radiofrequency Ablation)	A newer method of treating the source of the varicose vein where a heated catheter is guided inside the vein.
Vein stripping high ligation	A less common form of treatment of tying off a vein before it joins a deep vein and removing the vein through small cuts.



Other problems that can be caused by Varicose Veins

Superficial thrombophlebitis

This is due to blood clots forming in the varicose vein. The superficial varicose veins become red, hot, tender and painful and blood clots form in the superficial veins. This can take many weeks to resolve. Sometimes when a severe phlebitis has resolved the varicose veins may disappear.

Chronic venous insufficiency

The development of brown discolouration of the skin at the ankle (pigmentation), varicose eczema and thickening in the tissues around varicose veins are signs that more extensive tissue damage is occurring.

Varicose ulceration

If the tissue damage becomes bad enough, ulcers can develop in the skin just above the ankle. Many patients are concerned when they hear the term ulceration, but it only means that there has been a loss of skin and that the tissues beneath the skin are exposed.

Will treatment remove all the varicose veins?

Probably not. No treatment can erase every visible varicose vein, but most patients are satisfied with the vast improvement that can be gained by undergoing treatment. In most instances, receiving treatment can help alleviate the patient's pain and discomfort, with improved appearance of their legs. Additionally, early intervention and treatment can help prevent further complications from arising. It is more difficult to eliminate spider veins. A combination treatment of laser ablation followed up by sclerotherapy tends to provide the best results in helping with the appearance of varicose veins and spider veins.

Will varicose veins come back after treatment?

Currently, there is no treatment options available that does not have a risk of reoccurrence of varicose veins. New varicose veins can sometimes appear even after satisfactory treatment. It is possible to remove existing varicose veins, however, it is not possible to remove the tendency to develop varicose veins – regardless of what treatment type is used. Sometimes in patients who have had injection treatment like schlerotherapy, the varicose veins that have been injected can reopen as they have not been physically removed.

Reflux (abnormal flow) in deep veins may be a cause of recurrent veins (often described as burning and throbbing), and discomfort - causing heaviness (swollen legs) and aching in the legs along with cramps and itchiness.

Fortunately, a variety of treatment options are available should the need for further treatment arise. Consulting a qualified vascular surgeon can recommend the best course of treatment or combination treatments to assist in the reoccurrence of varicose veins.

Northern Beaches Hospital's Vascular Surgeons are available to offer advice and provide optimum care for your vein related issues. We provide in house ultrasound scans, which are performed by a specialised sonographer. This service is conveniently bulk billed to all Northern Beaches Hospital patients. We offer urgent and rapid access to inpatient services when necessary. Please contact our rooms on (02) 9439 1110 for an appointment.

