Varicose Vein Therapies

What are veins?
Veins are blood vessels that return blood to the heart. Veins contain one way valves. These valves keep blood flowing to the heart and prevent blood from flowing backwards.

What are varicose veins?
Varicose veins develop when valves fail to close properly. When valves fail a reversal of blood flow occurs called reflux. This leads to an increase in internal pressure on the vein wall and a pooling of blood below the valve. This results in dilation and bulging of veins. Varicose veins can be problematic to circulation.

What are the symptoms of varicose veins?
Symptoms can include fatigue, heaviness, aching, burning, throbbing, itching, cramping, and restless legs. In more severe varicose veins the legs can swell, develop eczema-like rashes, discolor, and develop ulcerations.

Who can get varicose veins?
Varicose veins can happen to both men and women. Factors include genetic predisposition, obesity, trauma, pregnancy, and occupations involving prolonged standing and/or prolonged sitting.

Leg Vein Treatments

Sclerotherapy
This involves injecting a solution into the affected veins with a fine needle. The solution irritates the lining of the vein wall, destroys the red blood cells in the diseased vein which then causes an inflammatory reaction, the vein will then collapse and eventually be absorbed by the body.

Echosclerotherapy
This technique combines ultrasound for visualization with sclerotherapy. This procedure is reserved for those larger and deeper veins that cannot be seed directly.

EVL (endovascular laser treatment)
This is the latest technology in large, deep varicose vein treatment. It is a quick, minimally inva-
sive procedure done on an outpatient basis. There is no post operative scarring – only a probe and a slim sheath enter the vein via a tiny skin opening.

Frequently Asked Questions

Do I need those varicose veins?
No. The incompetent veins will only impair circulation.

How does pregnancy impact varicose veins?
Pregnancy can onset varicose veins and may make present varicose veins worse due to hormonal changes and later by the enlargement of the uterus. Conservative management in pregnancy includes compression stockings, exercise, and leg elevation.

Nursing mothers cannot be treated due to passing of medication into the breast milk.
Those who are planning to become pregnant should wait until 3 months after finishing their current series of treatments. You do not have to wait until you have had all your children to have your veins treated.

How does having treatment help me?
When the varicose veins are shut down, the blood is channeled into healthy veins which improves the blood flow.

Does it hurt?
Patients will experience some discomfort. The amount of discomfort depends on each patient’s pain tolerance, and the concentration of the solution needed.

How many treatments?
It depends on the extent and size of your varicose veins.

How much time do I need between treatments?
At least 4 weeks between treatment on the same leg. We usually alternate treatments – one leg, then the other and back again. Unless there is only a “minimal” amount of treatment to be done on your legs – we will only work on 1 leg per treatment.

Are there side effects of sclerotherapy?
Common side effects:
1. pain – mostly described as a burn of sting. Usually will disappear in a few minutes to a few hours.
2. bruising – lasts days to weeks depending on the individual
3. swelling – can last one to several days. Cold compresses, compression, and frequent short walks will help reduce the above listed side effects.
4. discoloration of the skin – as the red blood cells die in these veins the hemosiderin (iron) can adhere to the skin causing a brown staining. In most patients this will disappear in 6 to 12 months. For those few with persistant skin staining after this length of time chemical peels can be done to lighten the stain.
5. trapped blood – these “lumps” are common. They are not dangerous and can be drained to reduce any discomfort they might cause.

Rare side effects:
1. allergic reaction – can be treated with immediate medical attention.
2. nerve irritation – can include localized numbness or tingling which could take a few months to resolve.
3. infection – very remote with proper antiseptic measures.
4. telangiectatic matting – spontaneous rupture of tiny blood vessels around the injection site – can be treated if doesn’t resolve on its own.
5. ulcers – rarely a small sore can develop at an injection site from solution reacting with the skin. It can be treated simply with compression and will go away.
6. DVT (deep vein thrombosis) extremely rare – can be treated with blood thinners.
Will treatment affect my working?
No, you can go back to work the same day.

Will I get varicose veins again?
As sclerotherapy cannot treat the underlying cause of varicose veins, new varicose veins may appear. Prevention and maintenance are important in keeping healthy veins.

What can I do to prevent varicose veins?
There is no way to ensure that varicose veins do not occur. The most important things that you can do to maintain healthy legs are wearing compression stockings, regular exercise, and maintaining a healthy weight. Avoidance of prolonged standing or sitting, and not crossing your legs will be helpful as well.

Graduated Compression Stockings
Compression socks/stockings are for you if:
- If you have leg ulcers
- If you have had phlebitis or a deep vein blood clot
- If you are pregnant

The main purpose of compression stockings (hose) is to reduce pressure in the venous system of the legs. The stockings exert greater pressure on the lower leg and therefore help the venous return to flow upward. This can slow the formation of varicose veins.

Symptoms associated with varicose veins and spider veins can be reduced or alleviated by the wearing of compression hose.

Compression knee-high socks are usually just as effective as thigh-high stockings or panti-hose.

Compression hose come in 3 different strengths – your doctor will recommend the right compression for you.

For medium or high strength compression hose please check with your extended benefit plan – you may have coverage for compression hose.

Remember – wearing compression hose is a choice, not a "must". For example if the weather is very warm you can choose not to wear your hose. You will not endanger your health by not wearing them. You can compensate with additional leg exercise.
Getting to Know your Options through the Consultation Process

Esthetic dermatology, laser services and healthy skincare are the most effective ways to enhance your natural beauty and to prevent further skin damage. Dr. Searles and his team of trained nursing staff offers consultations for all cosmetic and laser procedures and skincare offered at our office.

A consultation includes a complete evaluation of your skin history, depicting your skin care concerns and goals, and a treatment and skincare regimen based on those areas evaluated. The treatment and skincare options will be described in-depth to you so that you understand all of the necessary information for beginning the recommended regimen. This information includes, but is not limited to, description of the treatment, pre- and post-treatment protocols, risks and side effects, costs, and before and after examples.

If an area of concern is not treatable with the technology and therapies available at Keystone Dermatology, we will refer you to a qualified professional in that field.

The consultation is designed to provide you with all of the information necessary for you to feel most comfortable in receiving the benefits of these treatments and skincare programs.

About Dr. Searles…

Dr. Searles is dually certified by the Royal College of Physicians of Canada in both Internal Medicine and Dermatology. He has been honoured to be elected as a Fellow of the prestigious American College of Physicians. He is a member of numerous National and International medical organizations devoted to the discovery and application of new ideas and techniques for treating medical and esthetic skin conditions.

Dr. Searles is a Clinical Professor in Medicine at the University of Alberta, and is the Director of Resident Training for Dermatology.

Dr. Gordon Searles’ primary mission is to deliver the best care possible through the use of the latest advances in medical research and new technologies.

A Member of the ASLMS

A Fellow of the ASDS

Peer-Elected to Best Doctors in Canada, 2008

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