

Anticoagulation and DVT Service

What are varicose veins?

Veins are blood vessels that take blood back to your heart. The veins just under your skin are called superficial veins. The larger veins that run through your muscles and cannot be seen or felt are called the deep veins.

The term varicose veins only applies to superficial veins bulging under the skin. Some people have very visible small veins that have several names such as spider veins, thread veins, collateral veins, venous flares, or reticular veins.

These are not varicose veins but an indication that the pressure within the deep veins is increased.

What causes varicose veins?

Our veins have valves within them to keep the blood going back to the heart. If these valves weaken, they allow the blood to flow the wrong way back through the vein, this is called reflux.

Varicose veins are commonly caused by reflux in a superficial vein in your thigh (the long or great saphenous vein) or in your calf (the short saphenous vein). The vein then puts more pressure on weaker veins further down your leg and causes them to become varicose.

What problems do varicose veins cause?

If you have varicose veins, you may feel pain in the affected veins and your legs may feel tired and heavy. Lumpy veins may be visible and there may be swelling in your lower legs.

Over time the skin around your ankle can start to look different, and eczema, brown pigmentation (haemosiderin) and eventually leg ulcers can appear.

Risk factors for varicose veins.

It is not fully known why the valves fail and the veins lose their elasticity in some people.

Often varicose veins run in the family, suggesting there is a hereditary component.

Other factors that increase your risk of developing varicose veins are pregnancy, obesity, and prolonged periods of standing.

What will help to improve the varicose veins?

Anything that lowers the pressure in the veins in your legs can help improve your symptoms.

- Exercise: try walking daily as it helps to reduce the pressure in your veins by using the calf pump to help pump blood out of your leg.
- Elevate your legs when sitting and avoid standing still for prolonged periods of time.
- Try to lose weight as increased weight puts more pressure on your leg veins.
- Compression stockings help to squeeze the blood out of your superficial veins and into your deep veins (they also help with the symptoms of varicose veins).
- Compression stockings need to be Grade II stockings and you will need a prescription and be measured properly for these).

What treatment is available?

The NHS no longer treats varicose veins that are just “lumpy” as cosmetic surgery does not help with the symptoms and they are likely to return.

The NHS will however treat varicose veins that have started to develop small clots within them, either by non-operative treatment or by operative treatment

Non-operative treatments

Some GPs may suggest wearing support or compression stockings.

Operative treatments

- Radiofrequency ablation (RFA) ultrasound - guided foam sclerotherapy
- Ultrasound guided sclerotherapy (UGFS)
- Less frequently, surgery (stripping and / or multiple avulsions)
- A combination of the above

Remain well hydrated and remain as active as possible to reduce your risks of developing a deep vein thrombosis (DVT).

Clinical research

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

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