

IQ_2012_06_venus - Venous Interventions

Non-IR Treatments



*Exercise may help some patients. This is especially true for those that are overweight, as slimming may relieve symptoms and make treatment possible.
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Apart from the minimally invasive treatments provided by interventional radiology (IR), there are a number of other strategies available for the management of symptomatic varicose veins.

Conservative Management

Graduated compression hosiery is a mainstay of managing venous insufficiency. Specially designed to provide more compression at the bottom of the leg than the top, the poor functioning of the veins is compensated for and the blood is guided in the right direction.

As well as being used on its own for symptomatic relief, graduated compression hosiery is used after surgical and IR procedures to support and aid the recovery process.

People suffering from varicose veins may find that frequent rest as required with elevation of the legs helps ease symptoms, although this is not always a practical solution.

Vein Stripping and Ligation

- surgical procedure
- takes one or two hours
- general or spinal anaesthesia required
- full recovery can take up to six weeks

Incisions are made at both ends of the affected part of the vein: in the groin and in the calf or ankle. After cutting the vein at both ends, the surgeon pulls it out of the leg.

The open vein ends remaining in the leg are tied shut and the incisions in the leg are closed. The patient must wear bandages and compression hosiery for a number of weeks after the procedure. Patients can typically return to their normal routine after around two weeks but strenuous activity should be avoided until full recovery.

Although effective, vein stripping is less popular than it once was. Less painful alternatives are now available that have shorter recovery periods and do not require general or spinal anaesthesia.

Ambulatory Phlebectomy

This procedure is a less invasive option involving the surgical removal of affected surface veins (phlebectomy).

Many small incisions or punctures are made in the leg, along the path of the symptomatic vein. The affected portions of the vein are then removed through the incisions bit by bit. Only local anaesthesia is usually required.

Transilluminated Powered Phlebectomy

This procedure involves phlebectomy and is performed under general or local anaesthesia. A powered resector device and an endoscopic light source are both inserted underneath the skin through incisions made at both ends of the varicosity.

The resector device cuts the problem parts of the vein and removes them by suction. Compression hosiery is worn during the recovery period.

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