

PHYSICAL MEDICINE ASSOCIATES OF N.W. OHIO, INC.

939 W. Market St., Ste. 1

Lima, OH 45805

Phone: 419-228-5434

Fax: 419-228-4620

Kathy M. Harvey, C.N.P.

Kurt A. Kuhlman, D.O.

Jodi M. Wilhelm, C.N.P.

Venous insufficiency

Venous insufficiency happens when the veins in your legs become damaged and do not work properly. Veins bring oxygen-poor blood back to your heart. They contain one-way valves that open when the muscles around them contract (such as from walking). This allows the blood to go from your toes all the way back to your heart. If these one-way valves do not work properly, gravity will cause the blood to leak backward, resulting in swelling in the legs, most commonly below the knees.

Varicose veins - varicose veins are swollen blood vessels that appear just under the skin surface. When the vein walls are weak and the valves are not working properly, the blood backs up in the vein causing a blue and purple bulge seen in the legs, ankles and feet. Spider veins are smaller and thinner than varicose veins. They look like red or blue spider webs just under the skin.

Deep vein thrombosis (DVT) - a DVT is a blood clot in a deep vein in the leg. This can be very dangerous as the blood clot can break off and go to the heart and lungs causing a pulmonary embolism which can be fatal. Following a DVT, the person is at significant increased risk of developing venous insufficiency.

How common is venous insufficiency? Venous disease is very common. About 1 in 3 adults will have varicose veins and 1 in 20 adults will develop chronic venous insufficiency.

How does chronic venous insufficiency affect my body? Chronic venous insufficiency slows down blood flow from your legs back up to the heart. This will raise pressure in your leg veins and the small capillaries may burst. When this occurs, the skin along your feet, ankles and calves can turn reddish-brown in color. Open sores can occur and you can develop an infection called cellulitis in the skin.

What are the common symptoms of chronic venous insufficiency?

1. Achy or tired legs
2. Burning, tingling, pins-and-needles in the legs
3. Cramping in the legs at night
4. Reddish-brown discoloration to the feet, ankles and calves
5. A heavy feeling in the legs
6. Leathery looking skin in the lower legs and ankles
7. Open sores near the ankles
8. Varicose veins

What are the common causes and risk factors for developing chronic venous insufficiency?

1. History of a deep venous thrombosis (DVT) is the most common cause
2. Trauma and/or surgery to the leg is the second most common cause
3. Varicose veins
4. Obesity
5. Pregnancy
6. Not getting enough physical activity
7. Smoking and tobacco use
8. Sitting or standing for long periods of time
9. Sleeping in a chair or recliner
10. Being female
11. Being over age 50

How can I prevent chronic venous insufficiency?

1. Avoid smoking and tobacco use
2. Avoid wearing restrictive clothing like tight girdles and belts
3. Do not sit or stand too long at a time
4. Eat a heart healthy diet
5. Exercise regularly
6. Keep a healthy weight
7. If you have had a DVT, follow closely with your doctor's recommendations for treatment

Can chronic venous insufficiency be reversed? Treatment cannot reverse the damage to the veins, but can help improve symptoms.

How can I treat chronic venous insufficiency?

1. Avoid long periods of standing or sitting
2. Monitor your skin closely
3. Elevate your legs above the heart frequently
4. Exercise on a regular basis especially walking
5. Manage your weight
6. Practice good skin hygiene - wash and moisturize your skin every day
7. Wear compression stockings

Are there any surgical treatments for vein disease? Varicose veins can be treated with injection therapy (sclerotherapy), laser therapy and vein stripping.

How is venous insufficiency different from peripheral arterial disease (PAD)? PAD is an accumulation of plaque (fats and cholesterol) in your leg arteries. The arteries bring "new" blood (rich in oxygen and nutrients) from the heart to the feet whereas the veins bring "old" blood (oxygen poor with waste products) from the feet back to the heart. PAD is potentially much more serious as it can result in amputation of the foot if not treated. PAD is treated with smoking cessation, high-fiber low-cholesterol diet, regular exercise especially walking, good foot and skin care and medications for high blood pressure, diabetes, high cholesterol and blood thinners. Occasionally, surgery to remove the blood clots and placement of stents in the arteries of the legs is required.