

# All is not in **VEIN**

There's effective help for  
unsightly blood-vessel  
conditions

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THINKSTOCK

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**T**O MISQUOTE CARLY SIMON, “YOU’RE SO VEIN.” And we’re so vein because rosacea, varicose veins and spider veins are all common blood vessel conditions that creep up on many of us over time. These vascular changes can be uncomfortable, and since all three are plainly visible on the skin, they can be embarrassing, too.

■ **Rosacea**, which affects the face, doesn’t usually appear until after age 30. Tiny inflamed veins make areas of your face look red, and the disease also causes thickened or pimply skin. “It can become quite cosmetically displeasing,” says Dr. Anatoli Freiman, a dermatologist at the Toronto Dermatology Centre. “Many patients are frustrated by rosacea.”

The cause is multifactorial, but we know it’s hereditary and can be worsened by certain foods. These are many and varied and range from sour cream and cheese to liver and spicy or high-temperature foods. Ultraviolet light, even stress, can be factors. That’s why identifying and avoiding your individual triggers — using sunscreen and avoiding caffeine and alcohol, for instance — may help.

The condition isn’t fully understood but it’s getting easier to treat. A low-dose oral antibiotic is coming on the market to help settle underlying inflammation.

Topical ointments such as azelaic acid and topical metronidazole antibiotics are also improving. Newer gel formulations are readily absorbed and are less irritating to skin. A series of laser treatments given by a dermatologist or vein specialist will often shrink the tiny blood vessels and reduce redness. “It’s important to assess rosacea early, just so it doesn’t get out of hand,” says Freiman.

■ **Varicose veins and spider veins**, their tinier cousins, develop when one-way valves in veins weaken, allowing blood to leak and pool. The valves are small flaps that help to direct venous blood back to the heart against the pull of gravity.

These vein problems are most often seen in the legs, thanks to gravity, but can appear elsewhere on the body,

too. They’re more common as we age but can affect people in their 20s, and they are often hereditary. Other contributing factors include injury, standing or sitting for long periods, weight gain, hormonal changes and pregnancy. Not surprisingly, more women than men are affected.

“I had my second child at almost 41 years of age. I gained weight steadily after my pregnancy and developed a surprise varicose vein in my left leg,” says Debra Samuels (a pseudonym), a Toronto mother of three.

Varicose veins may bulge and look purplish, twisted and ropy. Spider veins are smaller and finer, but their red and blue hues stand out, too. Varicose veins may cause aching and heaviness in your legs, and spider veins can itch and burn. The skin over the veins can become thin and easily injured, increasing the risk of bleeding.

But they may also cause no symptoms. “There’s no correlation with the size of a vein and symptoms,” says Dr. Mandy Wong, a family physician in Kelowna, B.C., with a specialty in vein treatment. “You’ll see people walking around with huge varicose veins and they don’t hurt. And some with small spider veins are really bothered.” Even symptom-free varicose veins slightly raise the risk of blood clots.

■ **Lifestyle measures** You can try measures such as the following: reducing the amount of time you sit or stand, avoiding restrictive clothing or crossing your legs for long periods, getting regular muscle-toning exercise, losing weight, preventing vessel-straining constipation, elevating your feet in the evening, or wearing elastic support stockings.

And if the problem doesn’t improve? Says Wong: “There are

many methods for destroying a vein!” Read on.

■ **Sclerotherapy** is a treatment in which a chemical is injected directly into the problem vein causing it to swell and seal closed. (Don’t worry: there are plenty of healthy veins to take over its job.) Sclerotherapy is the gold standard for treating smaller veins and spider veins. The technique has been refined over the past decade for greater effectiveness and less pain and, with the help of an ultrasound, can now effectively treat even very large varicose veins. Lasers that are applied to the skin are available to treat spider veins, but they generally are effective for only very small veins and can cause pain.

■ **Surgical ligation (tying off) with stripping** is a procedure in which the larger saphenous veins of the thigh and leg are pulled out through incisions. This is becoming less common as newer, less invasive methods have proven effective. An example is laser surgery, in which a laser is placed directly inside the vein. Radiofrequency devices can deliver heat to problem veins, and soon Canadian doctors may even be using steam.

That’s good news for surgery-averse people who, some years ago, might have rejected a couple of hours under general anesthesia but can now have large veins managed less invasively.

The treatment your doctor recommends will depend on the size and location of the trouble spots. Any vein treatment can trigger a clot, but treatment carries a low risk of less than 1%.

■ **Down the road**, you may need a repeat procedure. “People who have varicose veins will make more varicose veins,” Wong says. “All we can do is treat what you have now.”

Most of these vascular treatments are not covered by provincial health insurance. But if you’re really bothered by your symptoms, it can’t hurt to explore your options. “I think it’s always worthwhile to have an early consultation,” says Freiman. “An ounce of prevention is worth a pound of cure.” ■