



PICKLE JUICE OR BANANAS

Treating Chronic Venous Insufficiency

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Pickle juice or bananas? Which do you use for your leg cramps? Professional athletes to enhance athletic performance commonly use these remedies for cramping and aches in the legs. While most of us typically dismiss leg cramps as a necessary evil from being an athlete, spending a long day in the garden weeding, “overdoing it” or merely a nuisance, there really is a treatable pathological condition that should not be overlooked. Chronic Venous Insufficiency or CVI, is a great masquerader.

CVI is twice as common as coronary artery disease and five times more common than peripheral arterial disease. This prevalent and often overlooked medical diagnosis classically presents as tired, achy and heavy legs that may itch, burn or even be tender to the touch. Often night cramping of the legs and uncontrollable movements of the legs in bed or at rest can be exhausting and painful signs of this disease. What most people are not aware of is that these symptoms are commonly misdiagnosed as “Restless Leg Syndrome”, “Peripheral Neuropathy”, or “Sciatica”. The numbness and tingling sensations experienced by some patients are actually due to an active inflammatory process that is ongoing beneath the surface of the skin, most of the time not visible to the naked eye.

I constantly hear from patients that they are told their symptoms are part of the normal aging process and that there is little that can be done to help them. Fortunately, the signs of CVI are easily recognizable. Just by looking at your legs, you may easily see swelling and redness in the skin, darkening of the skin near the calf or ankle, blue and/or red lines of varying lengths that seem to increase over time (“spider veins”), non-healing wounds that may seem to be ‘wet’, flaky and itchy skin, or the obvious bulging of the blood vessel (“varicose vein”) itself.

After evaluation by a qualified vein specialist, most patients are first instructed to exercise, wear medical grade compression stockings (20-30 mmHg), take over-the-counter anti-inflammatory medicines and elevate their legs. Typically, these initial steps fail to adequately address the primary complaints of discomfort and, until recently, the patient was often left with the intimidating thought of a vein stripping procedure performed under general anesthesia in a hospital operating room.

So what can be done to help your legs feel and look better? The rapid advances in medical technology now allow physicians to perform what used to be major surgery (requiring scalpels and blood loss) to be completed as a brief outpatient procedure performed without a major incision having you out the door in less than an hour. The procedure is called a Radiofrequency Ablation. Many of you may be familiar with this technology as it is commonly used in pain medicine for joint pain and even for an irregular heartbeat, such as atrial fibrillation.

Appropriate medical workup always involves an evidence-based diagnosis. In this case, the evidence is clearly documented in a diagnostic ultrasound examination. This ultrasound is more comprehensive than the ultrasound typically ordered by your doctor should there be concerns over a clot in the deep leg veins. While the standard lower extremity venous ultrasound study surveys for an obstruction to blood flow in a deep vein, this should not be confused with the more comprehensive vascular ultrasound examination performed to evaluate for CVI. This study, performed by a Registered Vascular Technologist and optimally interpreted by a radiologist, not only assesses the deep veins but the superficial veins as well. These shallower veins are predominantly responsible for both the visible skin changes, as well as, the chronic discomfort experienced on a daily basis.

Fortunately, most commercial insurance companies and Medicare cover the costs associated with both the diagnostic vascular ultrasound, as well as, the therapeutic options including the radiofrequency ablation procedure. The radiofrequency ablation procedure is not the only type of therapeutic option available for CVI. There are other therapies that are used in conjunction with the RF procedure and help to optimize results and delay the progression of disease. The other procedures employed for comprehensive vein treatment include ambulatory phlebectomy and ultrasound guided sclerotherapy. The extent and distribution of the disease will dictate the combination of therapies recommended for you.

Chronic venous insufficiency can and should be treated to prevent the adverse sequela of more advanced disease leading to skin discoloration in the calf and ankle or even worse — a non-healing wound/ulcer. If you suffer from tired, achy, heavy, crampy legs that can be restless, you can seek the advice of a vein specialist to properly evaluate and manage your disease.

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