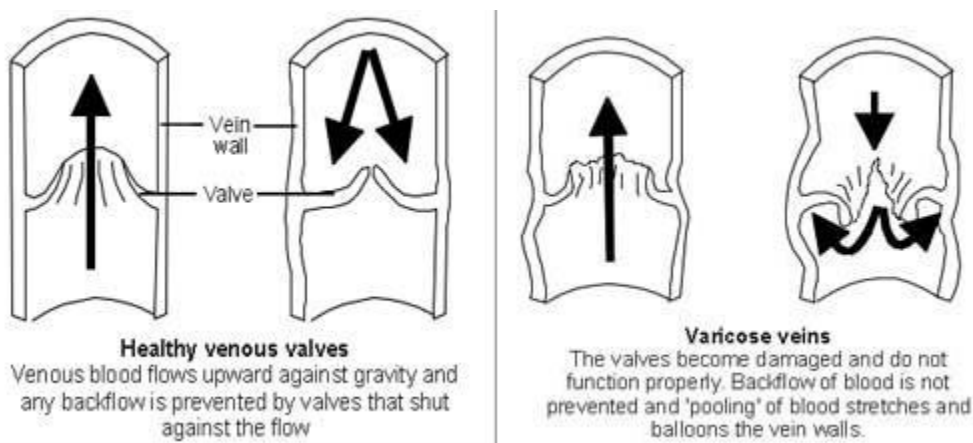


Varicose Vein Removal

What is it?

Varicose veins are twisted, enlarged veins near the surface of the skin. It gets swollen because of overspill of blood from veins running deep in the muscles of the legs. This occurs when the leg veins don't return [blood](#) back toward the [heart](#) the way they should. Varicose veins may cause no symptoms. However, most patients experience problems such as itching, aching and a feeling of heaviness in the legs. Less frequently, varicose veins can cause bruising and swelling and can get clotted. Rarely can they also be the cause of leg ulcers.



The Surgery

Usually, the main feeder vein to the varicose veins is tied off through two small cuts - one at the groin and one below the knee - and is then removed. There are many ways of doing the operation and you can always discuss your surgeon's method before the surgery. The most frequently used method is the passing of a special wire through the cut in the groin into the vein followed by stripping of the vein. Sometimes another feeder vein behind the knee has to be tied off as well using a similar procedure as for the main feeder vein. Following that, smaller varicose veins are removed through tiny cuts dotted down the leg. Your operation will either be a day case, where you are discharged the very same day of the hospitalization, or a non-day case, where you are in hospital for one or two nights. A general anaesthetic is given so that you will be unconscious throughout the operation. Local anaesthetic may be injected into the groin as well as into the other smaller cuts on your skin to make them pain free when you wake up.

The first step of the operation is for the ulcers to be measured. A probe test may be done to check the circulation. A specimen of the discharge is taken for the laboratory to examine for the presence of any bugs in the ulcers. This will guide the antibiotic treatment that you will need in the future. The ulcers are cleaned. A non-stick dressing is put on the ulcer. Four layers of special bandages are wrapped round your leg from the knee down to the base of your toes. The doctors

arrange to see you again each week. You may need to take antibiotics when they have a report from the laboratory.

Any Alternatives

If left untreated, there is no harm done in the short term. Over 5 or 10 years or more, you will probably notice the veins getting worse. This is usually associated with worsening of the symptoms and you will experience more pain, bruising and swelling. Injection treatment works on its own, if the veins are only seen below the knee and they are relatively small. Injections are also useful to control small veins that are still there after an operation. Elastic stockings are helpful if you are not keen on an operation. They can help determine if your pains are due to varicose veins. Laser treatment, ointments, and drug treatment are not helpful for your type of veins. Camouflage make-up is helpful to cover up small flare veins.

Before the operation

Stop smoking and reduce the weight if you are overweight. (See Healthy Living). If you know that you have problems with your blood pressure, heart, or lungs, consult your physician and ask him to check that these are under control. Check the hospital's advice about taking the Pill or hormone replacement therapy (HRT). Check you have a relative or friend who can come with you to the hospital, take you home, and look after you for the first week after the operation. Sort out any tablets, medicines, inhalers that you are using. Keep them in their original boxes and packets. Bring them to the hospital with you.

On the ward, you may be checked for past illnesses and may have special tests to make sure that you are well prepared and that you can have the operation as safely as possible. Please tell the doctors and nurses of any allergies to tablets, medicines or dressings. You will have the operation explained to you and will be asked to fill in an operation consent form. Many hospitals now run special preadmission clinics, where you visit for an hour or two, a few weeks or so before the operation for these checks.

After - In Hospital

There will be some slight discomfort on moving. Painkilling tablets should easily control this discomfort. If not, you can have painkilling injections. By the end of one week the wound should be just about pain-free. A general anaesthetic will make you slow, clumsy and forgetful for about 24 hours. Do not make important decisions during this time. The nurses will help you with everything you need until you can do things for yourself. There will be a dressing on the groin wound which may be changed after 24 hours for a day case or 48 hours for a non-day case. An elastic sleeve bandage is always used. You will need to wear it for about 10 days. Under the elastic sleeve, the wounds may be covered with tiny paper strip dressings. Take off all dressings and bandages 10 days after the operation. If the elastic sleeve becomes slack or too tight let the nurses know. Sometimes there are stitches under the skin which melt away, so that the wound

does not need any more attention. You can wash, bathe, or shower as soon as the stitches, clips or paper strips are taken off. Soap and tap water are quite alright to use. Salted water is not needed. Some hospitals arrange a check-up about one month after you leave hospital. Others leave check-ups to the general practitioner. The nurses will advise about sick notes, certificates etc.

There may be some swelling of the surrounding skin which also improves in 2 to 3 days. After 7 to 10 days, slight crusts on the wound will fall off. The cellulose varnish will peel off and can be assisted with nail varnish remover. Occasionally minor match head sized blebs form on the wound line. These settle down after discharging a blob of yellow fluid for a day or so. You can wash the wound area as soon as the dressing has been removed. Soap and tap water are entirely adequate. Salted water is not necessary. The nurses will talk to you about your home arrangements so that a proper time for you to leave hospital can be arranged. Some hospitals arrange a check up about one month after leaving hospital. Others leave check-ups to the General Practitioner. The nurses will advise about sick notes, certificates etc. You may need to see the Haematology specialist after your operation. This will be arranged.

After - At Home

At first discomfort in the wound will prevent you from harming yourself. You can drive as soon as you can make an emergency stop without discomfort in the wound, i.e. after about 10 days. You may restart sexual relations within a week or two, when the wound is comfortable enough. You should be able to return to a light job after about two weeks and any heavy job within four weeks. The wounds take a month or more to heal and soften up. Sometimes injections are given for minor veins that are still present.

Possible Complications

As with any operation under general anaesthetic there is a very small risk of complications related to your heart or lungs. The tests that you will have before the operation will make sure that you can have the operation in the safest possible way and will bring the risk for such complications very close to zero.

Minor complications after an operation for varicose veins occur in about 17% of cases. They include:

- Minor bleeding from one of the wounds which almost always stops by applying some extra pressure on the wound or more frequently bruising and swelling. Bruising and swelling may be troublesome, particularly if the veins were large. They may take four to six weeks to settle down completely.
- Minor infection of one or more of the wounds or of a bruised area of the skin that settles down with antibiotics in a week or two.
- Occasionally there are numb patches in the skin around the wounds which get better after two to three months. This is due to the cut of very small nerves of the skin around the wounds.

The chances of serious complications are very small (less than 1%). This includes the formation of a blood clot in one of the deep veins of the leg that can potentially push a life-threatening embolus (part of a clot) to your lungs or cause damage to one of the big arteries, veins or nerves of the leg. All necessary precautions will be taken to avoid such complications (i.e. helping you to be as mobile as possible after the operation and giving you blood thinners to avoid the formation of clots in your leg) and it is important to know that they very rarely happen in centres with good experience in performing this operation.

Finally, you have to keep in mind that approximately 1 in 10 patients may need more treatment to the veins in the 10 years after the operation.

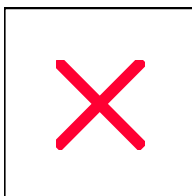
General Advice

Do leave yourself enough time to get over the operation. Practically all patients are back to their normal duties within one month. If you have both legs operated on, the recovery is a little slower. These notes should help you through your operation. They are a general guide. They do not cover everything. Also, all hospitals and surgeons vary a little. If you have any queries or problems, please always feel free to discuss it with the doctors or nurses.

MEDICAL TOURISM IN INDIA

- [Laparoscopic Surgery India](#)
- [Liver Transplant Surgery](#)
- [Kidney Transplant Surgery](#)
- [Bone Marrow Transplant Surgery](#)
- [Hair Transplant Surgery](#)
- [Hip Replacement Surgery](#)

CUSTOMER SPEAK:



Varicose Vein Removal Surgery India, Cost Varicose Vein Removal Surgery, Varicose Vein Removal Surgery India, Low Cost Varicose Vein Removal Surgery Delhi India, Varicose Vein Removal Surgery Hospital Delhi, Varicose Vein Removal Surgery Mumbai Hospital, Cost Varicose Vein Removal Surgery Mumbai, Delhi-India, Low Cost Varicose Vein Removal Surgery Hospital, Affordable Varicose Vein Removal Surgery Hospital Mumbai, Delhi, Cost Varicose Vein Removal Surgery Hospital Delhi.

