



Patient Information Venous Insufficiency

VEAND INSTITUTE

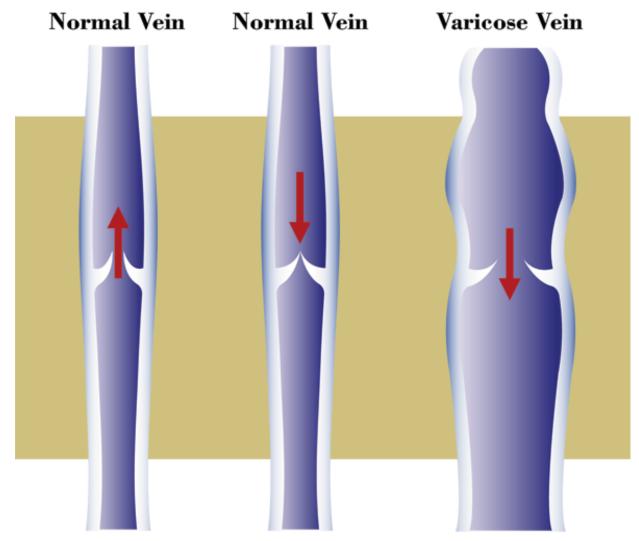
1

Varicose Veins



What is a Varicose Vein?

Incompetent Valves



Walking Sitting or Standing Backwards Flow



Frequently Asked Questions

What is the difference between varicose and spider veins?

Varicose veins are enlarged veins that appear twisted and bulging. They are usually swollen and distended past the skin's surface. Varicose veins may appear as bluish bumps and cause varying degrees of discomfort.

Spider veins are tiny visible vessels within the skin. They most commonly develop on the face and legs.

What causes varicose veins?

Failure of the one-way valves in veins allows blood to lead backwards, causing congestion and enlargement of the vessel. This failure may occur in individual veins themselves; however the majority of cases saphenous reflux is present. This vein must be treated as well for successful vein treatment.

Contributing factors may include heredity, pregnancy, hormonal changes, being overweight, standing or sitting for long periods of time, advancing age or injury to the vein.

What are the symptoms of varicose veins?

Symptoms may include the following: aching or burning in the legs, restless legs, swelling of the legs or ankles, leg cramps or sores, itching of the skin around the veins, skin discoloration, and open wounds such as skin ulcers around the ankles.



What is an radiofrequency ablation?

Radiofrequency ablation is a safe and highly effective treatment for varicose veins. It is the newest alternative to the previous vein surgery known as "stripping" which was performed years ago. This procedure is usually performed in a physician's office, typically using a diluted local anesthesia. You can usually return to work the same day, with minimal post-procedure discomfort. Radiofrequency seals the vein shut causing the blood to reroute to deeper and healthier channels.

Why do I need radiofrequency ablation?

If Dr. Gitter has determined that you have saphenous insufficiency, you will need a radiofrequency ablation. Venous insufficiency is caused by heredity, pregnancy, hormone replacement and prolonged standing. The valves in the superficial veins are affected by any or all of these factors and as a result, the blood is not able to flow in the right direction. Over time, the blood pools causing the veins to dilate which puts pressure on the skin and causes spider veins or varicose veins to form. Radiofrequency ablation is for treatment of symptoms such as pain, swelling, itching, burning, fatigue, restless leg, cramping, and spontaneous bleeding.

What should I expect during the procedure?

During the procedure, you will feel a small stick of a needle in order to numb the area. Through that numbed area, a small needle is inserted into the vein followed by a small guide wire, and a radiofrequency catheter. Once that is in place, you will experience a few needle sticks and some pressure while the numbing medicine is placed around your vein. Once you are numb, the fiber is activated while slowly pulled out. The energy from the device causes the vessel wall to be damaged and blood is not able to flow in the incorrect direction. The vein is not removed from the body. Over time, your body will absorb the closed vein and it disappears. This procedure improves the circulation in the leg by ensuring that blood is traveling in the correct direction. Symptoms improve quickly and many patients say they can see and/or feel relief in a matter of days. Minor bruising is normal and mild discomfort is common.



How long will the procedure take?

The procedure usually lasts for about 20-30 minutes. You should plan the total appointment time being 1 hour.

How soon after will I be able to walk after the procedure?

You will be encouraged to walk immediately after the completion of the procedure.

Will I be able to resume normal activities following varicose vein treatment?

You can return to work the day of the procedure, unless otherwise instructed by your physician. Other activities, such as walking and light daily activities are possible and encouraged following the procedure. Patients are encouraged not to over-do-it for a couple of days, however being sedentary is discouraged.





What is a phlebectomy?

Dr. Gitter may determine that you need a micro-phlebectomy to eliminate the large bulging varicose veins. This can be done at the same time as the radiofrequency ablation but is frequently staged because sometimes these veins will get smaller after the ablation. They typically do not go completely away and therefore, the phlebectomy will give you the best cosmetic result. The area will be marked with a pen while you are standing. The area will be numbed using a very dilute solution called tumescent with a series of very small needle sticks to inject the medication. Once you are numb, very small incisions (2mm) are made and the bulging veins are gently removed. The incisions are so small that stitches are not required. You will be wrapped in a special wrap that can be removed the next day. Compression stockings will be worn for 1 week. Little to no discomfort is expected after the procedure. Normal activities can be resumed in 2 days.

Is the Radiofrequency Ablation procedure for varicose veins painful?

There is a minor degree of discomfort during treatment, which patients tolerate very well. All efforts are made by Dr. Gitter and staff to provide a calm and relaxing environment. We can offer you an anti-anxiety and/or pain medication to take before the procedure.

How soon will it take for my symptoms to improve?

Symptoms improve quickly and many patients say they can see and/or feel relief in a matter of days. Minor bruising is normal and mild discomfort is common.

Will there be any scarring from the procedure?

No. Due to the small size of the catheter insertion point, most patients do not experience any scarring at all. No incisions are made.



What are the consequences of avoiding treatment for varicose veins?

Venous insufficiency and varicose veins always get worse over time when left untreated. It is a progressive problem; however it is not immediately life threatening. Some patients notice the veins increasing in size over the years. Left untreated, the elevated venous pressure will progress from leg pain, aching, or swelling to blood clots, the breakdown of skin (ulcers), permanent skin discoloration, poor healing and bleeding.





BEFORE YOUR RADIOFREQUECNY ABLATION

Please try to avoid Aspirin or Aspirin products for 1 week before your procedure. This will increase the amount of bruising post-operatively. However, if you take Aspirin as directed by your primary care physician or Cardiologist, you should continue that regimen.

If you decide to take the pre-operative medications, you will need someone to drive you to your procedure.

No one other than the patient and medical staff are allowed in the surgery room.

You should eat a normal breakfast before coming in for surgery.

No excessive alcohol the night before a procedure and drink plenty of water. Proper hydration will help the procedure to be more successful.

You can take all of your normal medications before the procedure.

Wear comfortable clothing on the day of surgery and loose fitting shoes.



AFTER YOUR RADIOFREQUENCY ABLATION

You will leave the office in an Ace Wrap compression dressing. You may remove the Ace Wrap and take a shower the following morning. Then you put your compression hose on and wear them during the day only. **You do not have to sleep in the compression hose.**

You may resume normal activities the day of the procedure. If taking prescription pain medication, you should not drive for the remainder of the day.

As needed for pain: Start on a regimen of 4 tablets of 200mg Ibuprofen (over the counter) every 6 hours. This is a total of 800mg Ibuprofen every 6 hours. This is especially important if you will be exercising. Exercise won't affect the outcome of the procedure but it will increase your discomfort. Judge your activity level according to how you feel. If you have stomach upset due to the Ibuprofen, you may take Prilosec OTC with the Ibuprofen.

(Advil and Motrin are brands of Ibuprofen and acceptable for use. Aleve, Naproxin and Naprosyn are <u>NOT</u> Ibuprofen so please do not substitute for Ibuprofen.)

As needed for pain: You can apply ice to affected area for 10 minutes every hour on the outside of the Ace Wrap compression dressing. This can be done for the first 12 hours.

Avoid squatting with weights, heavy lifting over 150lbs, hot baths or hot tubs for 7 days.

You may return to work immediately. If you have a job that requires you to be on your feet for an extended period, you may prefer to take time off.

A small amount of oozing, bruising and swelling is normal. We highly recommend using **Dermaka** to reduce bruising and swelling. A natural plant based vitamin enriched cream; Dermaka was developed, by a surgeon, to minimize inflammatory responses of the skin in the post-operative period. Its main ingredient, the Arnica Montana Flower, soothes and moisturizes the skin in just days, if used as directed. It's a favorite product of all our patients post EVLA, RFA procedures and spider vein treatments.

Wear the compression hose throughout the treatment schedule and for **1 week** after the last procedure, only while you are up and active. If you are resting at home and you can elevate your leg, you may take the compression hose off while elevating.

If you are prescribed antibiotics, take them as directed.

Return for your scheduled appointment in 2 days & then 1 week for a completion ultrasound.

If you have ANY questions or concerns, please call the office at

(504) 833-0111. If you experience severe pain, swelling, fever or bleeding, please call Dr. Gitter at (504) 388-2212 (After-hours emergencies ONLY).



Services and Pricing

Spider Vein & Reticular Vein Treatment –legs only\$350 (per session)

Vascular Lesions of the Face and body

\$500 (per session)

Sessions are 20-30 minutes. We will strive to accomplish as much as possible during this time while maintaining patient safety.

Endovenous Laser Ablation/ Radiofrequency Ablation

Micro-phlebectomy

USG Foam Sclerotherapy

Varithena Foam Sclerotherapy

Any of these or a combination of them may be used in treatment of Venous Insufficiency. Dr. Gitter and staff will develop your individual treatment plan during the Diagnostic Ultrasound

These procedures may be covered by your insurance. As a courtesy, our office will file for pre-authorization with your insurance company prior to your procedure. Authorization does not guarantee payment. Patient is still responsible for any deductibles, co-pays and any remaining balances after insurance reimbursement.

We require notice 2 business days in advance to cancel a procedure or a \$200.00 fee will be charged.

Sigvaris Compression Hose:

\$59.00 Select Comfort Knee-high \$79.00 Select Comfort Thigh-high

\$45.00 Access Knee-high \$55.00 Access Thigh-high

**Gitter Vein does not submit cost of compression hose to insurance companies for reimbursement.

GVI Knee High Compression Hose: \$32.00/Pair

Dermaka: \$32.00/Bottle



Out of Pocket Costs

For those patients without insurance, we offer a discounted rate for services paid for out of pocket.

Radiofrequency

1 vein \$2,450

2 more veins \$750

(If performed at the same time)

Micro-phlebectomy

(0-5 incisions) \$500 (6-10 incisions) \$1,000 (11-15 incisions) \$1,500 (16-20 incisions) \$2,000

Ultrasound Guided Foam Sclerotherapy

Sclerotherapy \$350

2 or more veins Additional \$100 per vein (If performed at the same time)

Use of Ultrasound Guidance \$100

Diagnostic Ultrasound

\$460



