

Leg Vein Therapy

TREATMENT PLAN AND OUTCOMES

Reticular veins are typically smaller than varicose veins, closer to the skin surface with short, jagged lines that look like spider webs. Treatment options include sclerotherapy, laser and IPL therapy. The number and type of treatments will vary for each patient based on the size and number of veins involved. You will be given an estimate of the number of treatments required to obtain optimal results during your consultation visit. Several veins can be treated at each session. With sclerotherapy, treated blood vessels begin to fade as soon as 3 weeks post treatment and continue to disappear over a 3-month period. With laser and IPL, treated vessels are reabsorbed by the body and disappear over a period of 4 to 6 weeks. Treated veins will usually turn red before fading, caused by localized inflammation and may be associated with some persistent pain. Most patients are able to return to their normal routine right after their treatment session with minimal discomfort.

Most patients require a combination of treatments for optimal results.

BENEFIT DURATION

New vessels may form and not all injected vessels will disappear totally and may require additional sessions. Treatment to different sites can be repeated every 2 to 3 weeks and continued until cosmetic benefit is achieved, on average 4 to 12 treatments. Oral contraceptives with estrogen or pregnancy may aggravate the problem and complicate treatment outcomes.

DURATION OF TREATMENT

A leg vein therapy session varies depending on the scope of treatment but will generally last between 15-30 minutes.

WILL IT HURT?

With sclerotherapy, there is a little sting with each injection that usually resolves within minutes. Most report that the procedure is less painful than expected and do not require any type of anesthesia. Numbing cream may constrict spider veins and make them more difficult to treat but may be used for isolated sensitive areas along with cold packs. With the laser and IPL, a pulse of light may feel like a snapping rubber band. With both, the treatment head is chilled and both ice packing and cooling gel are applied to aid patient comfort.



Leg vein therapy utilizes sclerotherapy to treat reticular veins and telangectasia, called spider veins, of the legs. Sclerotherapy may be combined with an Nd-YAG 1064nm laser and Intense Pulse Light (IPL) to target those vessels unable to be injected.

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SCLEROTHERAPY

The standard of care for reticular veins and telangiectasia, called spider veins. A very small needle is inserted into the blood vessel where a small amount of a sclerosing agent is gently injected. This causes inflammation within the lining of the blood vessel, which causes the vessel to shrink down, close and gradually disappear. This process may take from a few weeks to several months.



Pre-operative: Purchase support hose and bring to each session. Before treatment, do not shave your legs for at least 3 days or apply moisturizer or cream to the legs for at least 24 hours. Avoid aspirin, ibuprofen or other anti-inflammatory drugs for 48-72 hours. Tylenol, however, should not affect the procedure. Wear loose fitting slacks or bring shorts to each session.

Post-operative: Cold packs, Aloe Vera or other cooling topical agents may be used to ease discomfort and Tylenol is also an option. Keep band-aids on the injection sites until the following morning. Wear support hose during awake hours for 2 weeks for best results. Walking the day of treatment is encouraged and avoid sitting for long periods. Avoid hot baths or showers for 2 days after treatment but lukewarm is acceptable. Avoid strenuous activities or high impact exercise for 1 week if possible. Do not scratch the injection sites.

Side effects: After the procedure, itching may occur for 1-2 days as well as temporary redness and flushing at the injection site. Bruising may occur lasting several days or weeks. Less common effects include small blood clots in larger vessels that can be removed by puncture; and pigmented spots that usually heal spontaneously but may remain discolored for several weeks up to 1 year. A bleaching agent can be used to lighten these areas. Rarely, there is an allergic reaction to the sclerosing agent; a bloody blister that can be promptly treated; and lightheadedness and cardiac arrhythmias.

LASER AND IPL THERAPY

Nd-YAG 1064nm LASER

For medium sized reticular vessels that are too small, deep or twisted to inject. A small spot of laser light travels through the skin and is absorbed by the blood within the vein. The resulting heat coagulates or clots the blood and destroys the function of the vein without affecting surrounding tissue. Over time, the vein is absorbed by the body and disappears.

INTENSE PULSE LIGHT [IPL]

For smaller superficial blood vessels, also known as matting. As with the laser, IPL uses precise pulses of light energy that are absorbed by the blood vessel, heating it to the point where it is destroyed. Following treatment, the vessel slowly clears and is re-absorbed by the body.

Pre-operative: In addition to those detailed for sclerotherapy, you must make a commitment to stay out of the sun. Sun exposure is to be avoided 3 weeks before AND 3 weeks following treatment. A total sunblock, not sunscreen, should be applied if it is absolutely impossible to comply. If there is sun exposure, there are certain complications that may occur that should be discussed fully.

Post-operative: Cold packs, Aloe Vera or other cooling topical agents may be used to ease discomfort and Tylenol is also an option. Wear support hose during awake hours for 1 week for best results. While most normal activities may be resumed immediately, avoid strenuous exercise for the first 24 hours after treatment. Sunscreen should be applied to treated areas that are exposed to the sun as long as the skin is not broken. Avoid hot baths or showers for 2 days after treatment but lukewarm is acceptable.

Side effects: Pain is generally mild. Some swelling and bruising can occur around the treatment site that usually resolves rapidly. Post treatment hyperpigmentation can be seen for 1-3 months and the incidence of hyperpigmentation increases with the size of the treated vessel. If the skin is broken or a blister appears, apply an antibiotic ointment and contact the office immediately. A soothing ointment like Aquaphor may also be applied. The area should be kept lubricated to prevent crusting or scabbing of tissue. Limiting sun exposure will greatly minimize the risk of complications.



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