

Tired of covering up those varicose veins?

Welcome to SBH Bronx Health Talk produced by SBH Health System and broadcasted from the beautiful studios at St. Barnabas Hospital in the Bronx. I'm Steven Clark.

Those varicose veins in your legs not only may look unattractive but they also may be a sign of a more serious problem. With us today to discuss this is Dr. B. Bobby Chiong, the chairman of the Radiology Department at SBH Health System.

Welcome Dr. Chiong!

*Thank you, Thank you, pleasure to be here*

I'd be remiss in saying not only is Dr. Chung an outstanding interventional radiologist and diagnostician but also arguably the best karaoke singer in SBH history.

*Thank you*

I won't ask you to sing it but tell us if you have a go-to song

*You know it's funny because at the hospital I try to keep it a little more PG, pg-13. I really enjoy Eminem, dr. Dre and a lot of West*

*Coast rap is kind of my go to outside the hospital.*

And in the hospital??

*in the hospital I'm pretty much known for Lincoln Park at the last barbecue and before that in the cafeteria, I did, it'll come back to me*

okay, of course dancing is a big part of it too I mean that's part of the spectacle of when you do it we're looking forward to the next event.

In any case getting back to business, what exactly are varicose veins?

*so veins are, I mean the job title that I had before being chairman of Radiology was vascular and interventional radiologist. A lot of times we're called interventional radiologists but my full training is in vascular and interventional radiology so veins and arteries are just fascinating to me.*

*Varicose veins are what happens when the veins can no longer do what they were designed to do. The valves in the veins have failed and when blood goes to your legs to your arms to whatever*

*it's carried there by the arteries that's pumped by the heart but in order to get back to the heart there's nothing pumping so for example in your legs the muscles have to contract and the valves are what allow the blood to go up up up once those valves fail then the blood starts to back up and it can cause unsightly varicose veins. It can also cause feelings of heaviness, it can cause skin changes, it can even start to cause skin breakdown which we call venous stasis ulcers so it's one in a long list of things that can happen when your veins start to fail.*

Now does this happen progressively or do you just wake up one day and bang you look and there they are?

*so like everything it's progressive a lot of people sometimes maybe just will one day notice them but it's going to develop over time and there's a lot of risk factors to varicose veins there's a big genetic component, if you know people in your family had varicose veins you're more prone to them, being a woman makes you more prone to them and the job that we do, the job that I do working in health care makes us more prone to them because most of us spend all of our time or most of our time standing and*

*standing up, the further your heart is above your legs the more pressure the bigger the column of blood on those on those veins*

so if you're a waitress for example you're also likely to be at risk?

*Yea, waitress, cashier Clerk, factory worker and anything where you are standing upright*

and do they tend to get worse as you age?

*yeah over time just that chronic weight of the blood that pushes down on the valves and like most things in the body, age makes things worse and breakdown*

and I guess they're fairly common too right?

*yeah depending on whose estimates you look at in the adult population it's anywhere from 20 to 40 % of people suffer some kind*

*of venous symptom, some kind of symptom of venous insufficiency. Varicose veins about 20 to 40 %. If you include spider veins which are just kind of those tiny red lines that some people can get especially if you're a very pale skinned then I've seen estimates up to 80%.*

now they're not terribly attractive but also you may want to get them checked out for other reasons as well right?

*Correct, so like I said there's a spectrum varicose veins in and of themselves aren't usually dangerous. they can be unattractive. they can set you up for life threatening issues such as deep vein thrombosis so if you have a superficial vein is a varicose vein but if that clots because the blood there doesn't move and that clot goes to a deep vein then that can go to your lungs which would call this a pulmonary embolism which is something that um like Serena Williams when she was pregnant she had a pulmonary embolism so it's important to get your veins checked out because they can they can lead to life-threatening complications*

what do they look like which would indicate maybe it's time to check them out?

*well I think at any point if you have varicose veins you should probably at least get a ultrasound study to check the degree of reflux and then to check the deep vein system. Especially because if we can show a major superficial vein most varicose veins aren't going to be named veins but if there was one of the major vessels with a name we can ablate them there's different kind of therapies we have to take care of that which can help prevent complications down the road and can also improve just appearance with a lot of people don't like the way they're there*

Well, Dr. Chiong how does it start out if someone comes to the radiology clinic to have them have a diagnosis what happens?

*so generally we see patients in in our clinic myself or Dr. Steve Epstein who's our other interventional radiologist who actually ran a vein clinic of his very own before he came here so he brings alot of of his experience to the table for our evaluation treatment of veins so we'll see the patient in our clinic either that day or very soon afterwards we'll do a ultrasound study and the ultrasound shows what the veins look like and it also shows if the valves are working and which valves are working and the way we do that is by either having a patient kind of it's called a Valsalva where they kind of like breathe and then kind of bear down and that can force*

*the blood towards the feet which if we show that that means that the valves aren't working correctly and then if we show that that means that we can try to treat that vein and try to shunt that towards the deep vein but before we shunt that towards the deep veins ,we have to make sure make sure the deep veins, those valves are working*

okay so let's say you find that there is an issue here and you mentioned that you yourself had an issue and you basically solved it by wearing compression socks, so it can be conservatively handled correct?

*that's generally the first means for treatment. I'm wearing compression socks right now, you know I wrote that article I'm not sure when it's going to be published about my own experience. the first time I got varicose veins was when I was 12 years old I broke my leg and I was on one leg for six weeks –eight weeks and you know as soon as I could walk on both legs again those veins disappeared and then doing this job I'm standing up all day I'm wearing a lead protection for the fluoroscopy procedures that I do and my wife noticed a varicose vein coming up so I started wearing compression socks. I know a lot of people in the hospital wear them it's amazing they both help shunt the blood normally*

*so it takes a little pressure off the valves it gives your valves in your veins a chance to relax and because it squeezes all that blood kind of out of the veins it gives you it actually gives you more energy. I never would have believed this until I started wearing compression socks if I don't wear them I feel you know I'm dragging and I just need that extra so for me that was mostly prevention but I was starting to get a little bit and for people in general just if they come to us that's generally the first therapy that we're going to offer is compression stockings*

so let's say after a certain period of time the compression socks don't do the trick then what?

*so if the reflux gets worse generally it starts with distension the veins varicose veins then it can lead to skin changes, can lead to hair loss it can lead to discoloration and then what we really don't want is skin breakdown and then sometimes patients come to us with what's called venous stasis ulcers because the pressure on the skin gets to be so great that the skin breaks down so if the compression stockings aren't halting that progression then we can do an ablation and the ablation we typically do we have a laser which is a endovenous laser so we put in medication to numb the skin and superficial structures we put a needle in we put a wire and we use that wire to guide the laser catheter and the laser catheter kind of cooks the vein and again we have to make sure*



*that there are veins that work deeper and once we cook the vein the blood that drains from your leg will go that those deeper veins and that will generally halt the progression of these venous reflux changes*

this is done under anesthesia?

*usually under local sometimes we give a little bit of just sedation and you know we don't want to put people to sleep for this. The lidocaine works very well some people are a little bit nervous so we can give a little to relax them but very quick procedure*

how long typically?

*typically takes about half an hour after we you know cook the vein then we then you have to wear compression socks for at least a couple days straight which is usually the kind of a little bit annoying thing but we just want to make sure that the vein stays kind of pressed together just to so it heals shut and then generally you would wear compression stockings at least while you're upright for the next few weeks I mean you know I do that every day for the past few years so*

what's the success rate for the surgery?

*success rate is about high 90s usually I quote about 98% you know patient selection like I said we have to do the ultrasound evaluation we have to make sure that the vein that were shutting down has another vein that works well otherwise we will make everything worse but with a good patient selection about 98% success rate*

does insurance cover this? I mean it is a cosmetic procedure

*well it's like I said a lot of people consider this a cosmetic procedure but for most people even if they don't realize that there are health implications of this people often don't realize that you know they were having heavy aching pains until they're treated and they're like oh my god I feel so much better so the insurance does cover it for many indications I mean not for cosmetics but for pain for skin changes and definitely for alterations and skin breakdowns*

there was an older procedure that preceded this correct that wasn't as painless or as clear-cut right?

*so a lot of people think of treating varicose veins with vein stripping which is where it would go they would try to put an instrument all the way down the course of the vein kind of hook and then kind of pull the whole vein out in one go which worked but was very traumatic kind of a messy procedure that required general anesthesia and had a lot of bleeding and had much more complications than what we can offer now. I mean it's still that's not really used so much anymore it's generally if you can ablate it with thermal ablation quote and quote cook the vein then we do that sometimes we have to do a stabs phlebectomy which is a much more used, it looks like a crochet hook to just kind of rip out, I hate to say rip but remove a small portion of vein and cook the rest*

But typically that's not common right?

*so typically socks and then ablation and then other than thermal ablation for like tiny veins, sometimes we use an injection of a sclerosant which is a chemical that again kind of cooks the vein kind of scars it*

it's a same day procedure and your home that day?

It's a same day procedure some people go to work you know that afternoon.

So the recovery period is minimal?

*Correct*

okay is there a number someone could call if they want more information about this

*so generally the best way to reach me and to reach anyone on radiology is just our front office number 718-960-6162 and they'll be able to direct you to me or make an appointment for my clinic or get whatever radiology studies that need to be done*

Okay thank you very much Dr. Chiong for joining us on SBH Bronx Health Talk. Again, for more information on treating varicose veins or other services available at SBH health system visit [www.SBHNY.org](http://www.SBHNY.org).

Thank you for joining us and we'll see you next time, thank you!