## PREGNANCY AND VARICOSE VEINS

Ithough pregnancy is one of the most beautiful parts of a woman's life, there are certain destructive features which can follow.

Through this article I hope to help prevent some of the venous complications of pregnancy. Although the chance of getting varicose veins is carried about equally between men and women, ladies are more prone to get it. One of the major reasons for this is pregnancy. Ladies get pregnant and men don't!

The weight of the uterus, actual weight gain and increase in venous flow are some of the reasons. The hormonal factors however are commonly ignored. The hormonal changes during pregnancy are designed to make ligaments relax in anticipation of delivering the baby through the pelvis. Unfortunately, these same hormonal changes also affect the walls of the vein making it more lax and weak and leading to valvular incompetence. Having a domino effect, these changes lead to further valvular damage and eventually significant venous insufficiency.

## How to help reduce the risk of venous disease during pregnancy:

Since the hormones play such an important role in the production of venous insufficiency and varicose veins during pregnancy, it is advisable for a woman to start wearing compression stockings as soon she finds out she is pregnant. Pregnant women should walk frequently and avoid prolonged sitting and long periods of standing. Weight control during pregnancy is of course very important and can also help to prevent this disease

In my opinion, if a woman develops significant venous insufficiency or varicosities during pregnancy, it is advisable for her to take care of these issues prior to the next pregnancy. There is a bit of controversy regarding this. Some surgeons believe that one should treat these issues after all the pregnancies of a woman's life are completed. My opinion is different. Since our recurrence rate has been less than 3%



over the last 12 years in almost 9000 cases, I believe early treatment is probably the best way of handling this situation.

I can never forget about 2 years ago when I had an 8-month pregnant lady referred to my office with severe venous insufficiency and protruding varicosities. The stress of her venous sufficiency was evident in her face, clearly showing her agony. I must admit, not being able to offer significant treatment to help her was very hard for me. She had at least one more month left until delivery, and I had no doubt that the venous insufficiency was only going to get worse.

I advised her to return as soon as her pregnancy was completed. We treated the venous sufficiency, and she's continued to do very well. Some companies provide compression stockings with adjustable tops. These allow for increases in the girth of the abdomen during pregnancy. Although useful these are obviously not an ideal therapy for the patient.

In summary if one becomes pregnant and has parents or family members suffering from venous insufficiency, it is advisable to start wearing compression stockings right away then as soon as the baby is delivered, to seek the advice of a vein specialist.



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Kamran Goudarzi, MD is one the nation's leaders and pioneers in the scarless treatment and elimination of varicose and spider veins. One of the first surgeons in the United States to achieve board certification by The American Board of Phlebology (the study of venous disease), Dr. Kamran has now performed thousands of successful procedures in the field. With extensive training in both the US and Great Britain, Dr. Kamran has remained on the forefront of the latest breakthroughs in the treatment of venous disease.