

Louise Kelly

Louise Kelly had her first varicose vein surgery when she was 16, leaving her black and blue for weeks

I was only 16 when I had my first varicose vein surgery. It's unusual to have varicose veins so young, but both my mom and my grandmother on my dad's side had them so it was hereditary in my case.

As a teenager, I was very conscious of my veins. I had one very bad vein that ran down the front of my right leg and wrapped around the back of my calf. I was in the National Performing Arts School and I did a lot of dancing and sport which I'm told would not have caused my vein problem, but certainly would have aggravated it.

My leg started to get painful and weak when I was dancing or playing sport, so I went to my GP who explained that I had a varicose vein and that was the cause of the pain and weakness. He referred me to a consultant at St Vincent's hospital in Dublin who recommended that I have a procedure known as "stripping" to remove the vein.

My mum was a bit concerned about the idea of me undergoing surgery so young, and some doctors recommend that you wait until after childbirth, but I really wanted to have it done. Modelling was always a passion of mine and I was really keen to pursue a career in modelling.

Risks

The nurses and other patients on the ward were surprised at how young I was. I was a bit nervous but blissfully unaware of the risks of going under general anaesthetic or having an operation.

The surgery was very invasive although not as bad as it was for my mom who had 40 or 50 stitches when she had her vein stripped. There were a number of incisions, around my knee and at the very top of my leg and they basically just pulled the vein out. My leg was black and blue for weeks afterwards and I had stitches around my kneecap and the back of my calf. I was kept in hospital for five days and it took me quite some time to recover. I went back to school after two and a half weeks on crutches.

My consultant told me that because I was still so young, had not had any children and it was in my family, it was highly likely I would have problems with my veins again.

He was right. Last year, I developed a varicose vein in my left leg. I went in to Prof Austin Leahy, a vascular surgeon at Beaumont Hospital, intending to ask him to do the stripping operation again.

I had no faith in laser or any of the newer treatments I had heard about because I felt



'I was sceptical about the new treatment but it was painless'

I was such a bad case and so young. However, he ran through my options with me and explained that there was a new treatment called radiofrequency ablation that I could have done with a local anaesthetic as a day case.

The stripping treatment, although extremely invasive and painful, had actually worked.

Cosmetic purposes

Prof Leahy gave me sclerotherapy injections, first into the smaller veins around the incompetent or varicose vein to shrivel them up for cosmetic purposes. I was very

sceptical going in for the main procedure that it would work for me, but the difference between it and my first surgery was unbelievable.

The procedure, which I had done last summer, involved having a heated probe passed through the vein to destroy it. It was totally painless and I was able to walk out of the hospital that day. I had one small incision in the back of my calf and was back in the gym within two weeks. The only awkward part was having to wear an elastic stocking on my leg for six weeks afterwards.

I will more than likely continue to suffer

■ Louise Kelly: 'The nurses and other patients on the ward were surprised at how young I was.'

PHOTOGRAPH: PAUL SHARP/SHARPPIX

with varicose veins in the future, particularly when it comes to starting a family, and my consultant has warned me to start wearing elastic stockings the minute I discover I am pregnant to try to avoid my veins getting too bad but at least I know I will never have to go through a stripping procedure again.

In conversation with Michelle McDonagh

Varicose veins treatment The traditional open surgery operation known as 'stripping' is an obsolete procedure today

The traditional open surgery operation for treating varicose veins known as "stripping" is still taking place in Ireland despite being obsolete, according to a leading Irish vascular surgeon.

Prof Austin Leahy, director of Vein Clinics of Ireland and vascular surgeon at Beaumont Hospital, Dublin, says the number one way to treat the problem of varicose veins today is with minimally invasive surgery done under a local anaesthetic at a walk-in, walk-out clinic.

These unsightly, bulging and often painful veins are a very common condition, affecting up to three in 10 adults. Usually, women tend to be more affected than men.

Varicose veins occur when the wall of the vein starts to weaken and it becomes swollen and out of shape.

They are thought to trigger pain when

they bulge outward and press on adjacent nerves. Symptoms include aching legs after standing for a long time, a feeling of heaviness or tiredness, burning sensations and throbbing.

"The National Institute for Health and Care Excellence guidelines in the UK say the optimal treatment for veins is endothermal ablation (heat treatment) or endothermal laser treatment. They say open surgery should only be done where more modern types of surgery is not available," says Leahy.

"The tragedy is that today in Ireland, people are still having open surgery and having their veins cut, stripped and sewn which is an obsolete procedure."

Endothermal ablation involves heating the wall of the varicose vein using radiofrequency energy, and closing off the vein.

The energy is directed through a catheter inserted through a small incision in the leg under local anaesthetic. Patients can walk home the same day but have to wear compression stockings for six weeks afterwards.

Endothermal laser treatment involves passing a tiny laser through a catheter that has been inserted into the vein. The laser delivers short bursts of energy to heat up the vein and the seal is closed. The newer treatments are expensive and depend on the extent of the problem but are covered by health insurance.

Leahy says endothermal ablation using radiofrequency is the least painful and most effective way to treat veins today. In the very near future, he hopes to be able to offer a new treatment that uses a medical glue to close the diseased vein, rerouting

the blood through healthier veins. The advantage of this treatment is that patients do not have to wear compression stocking afterwards.

"I generally see two types of patient, those in their 20s and 30s, usually women, presenting with just varicose veins whose legs I can return to normal when treated well. The second group is people over 50 who have let their varicose veins progress to the point where they start to cause skin damage, like skin rash, staining of the skin or more serious side effects like phlebitis and ulceration. Sadly it is very difficult to get the leg back to normal once it gets to this stage."

For further information on varicose veins and other vein disorders, go to veinclinicsofireland.com