Treatment Tips for Varicose Veins in Pregnant Women
Changes in Diet, Exercise and Wardrobe Can Help

For many women, pregnancy is a period of anticipation and preparation for a new baby—but it is also a time of great change in a woman’s body. The worsening of often harmless but frequently bothersome or painful varicose veins is an experience shared by many pregnant women. During pregnancy the volume of blood in a woman’s body increases while the flow of blood from the legs to pelvis decreases. This change in flow brings support to the growing baby but also can enlarge varicose veins. With some conservative changes, women can prevent and treat this unwanted symptom of pregnancy.

Some women may experience symptoms of or notice the presence of their varicose veins for the first time during pregnancy. It is common for women to experience pain and growth of varicose veins during late pregnancy as the uterus expands and exerts greater pressure on the veins in their legs. “A woman’s mother and grandmother may have suffered the same condition. But pain and growth of varicose veins can be managed and treated by following some simple guidelines,” said Dr. John Flanagan, M.D., F.A.C.S.

Women can follow these simple guidelines to lessen the pain and growth of varicose veins during pregnancy:

1. Rest frequently. The less physical exertion a woman puts on her body, the less pressure she will put on her veins.
2. Sleep on the left side. The largest vein in the body is the vena cava and carries the largest amount of blood through the body. Because it is located on the right side of the body, lying on the left side will decrease added pressure on the vein.
3. Elevate the feet often to increase blood flow from the legs to the heart. When the legs become fatigued and sore, sit with feet propped up on a table, chair, or pillow above the level of the heart.
4. Wear maternity support hose. It is advised that women put them on before standing up and getting out of bed in the morning. This prevents blood from pooling in the lower legs.
5. Exercise. This increases blood flow from the legs.

Larger or more deeply rooted veins may need more specific medical treatment such as surgery or sclerosant, which is injected near the problem veins. Sclerosant causes these problem veins to close up and become non-functional and invisible to the eye. Treatment of varicose veins is usually delayed until after the pregnancy.

Most women report that varicose veins subside somewhat after childbirth, but if the problem persists, it is best to speak with a primary care physician or a vascular surgeon in order to prevent potential complications like painful skin conditions (ulcers) or phlebitis (clotting of the varicose veins).

To learn more about varicose veins and other vascular diseases, visit www.PhillyVeins.com, or call 610-933-2444