

Commonly asked questions

I have ulcers on my legs, will the surgeon remove them during the surgery?

Usually, nothing will be done to the ulcers during the surgery and healing is expected to take place over the subsequent weeks after the surgery. However, if unhealthy tissue is present on the surface of your ulcers, your surgeon may offer to remove them during the surgery to facilitate the healing of the ulcers.

After the vein of my leg has been removed, how does blood from my leg return to my heart?

Human beings have two systems of veins in their legs; the superficial and deep systems. The blood from your leg will still be able to return to your heart via the deep system after your varicose veins are removed.

I dislike wearing the compression stockings as they are uncomfortable and inconvenient. Can I stop wearing them after the surgery?

You will have to continue to wear these stockings diligently for at least 4-8 weeks after the surgery. Depending on the course of your disease after the surgery (i.e. the resolution of ulcers, swelling and pain), your vascular surgeon will advise you subsequently on whether you can stop wearing the stockings.

Will the discoloration or pigmentation on my skin go away after the surgery?

Discoloration and pigmentation usually reflect a more chronic course of the disease. Unfortunately, these do not completely go away after the surgery.

Useful contact numbers

UMMC general line: 03-7949 4444

Surgical clinic: 03-7949 3771

Anesthesia clinic: 03-7949 2485



VARICOSE VEIN STRIPPING

**‘High Saphenous Vein Ligation
and Multiple Stab Avulsion’**

Vascular Unit,

Department Of Surgery,

University Malay Medical Centre

Varicose Vein Stripping

Introduction

Veins are blood vessels that transport deoxygenated blood from your legs back to your heart. In a healthy vein, blood only flows in one direction due to the presence of functioning valves that prevent back flow. When the valves are damaged, blood can flow backwards and collect in the vein due to gravity. Over time, this causes the vein to become swollen and enlarged (varicose veins).

Not all patients with varicose vein require treatment. Treatment for varicose veins are usually offered to patients if they are having pain or discomfort or if they develop complications such as leg swelling, leg ulcers, or skin discoloration and pigmentation. Occasionally, treatment may also be done for cosmetic reasons at the request of the patient.

Varicose vein ligation and stripping is a form of surgery to remove the swollen and enlarged veins from your leg.

Advantages

In addition to reducing your symptoms, surgical treatment of varicose veins offers a better long-term outcome and reduces the reappearance of ulcers on your leg when compared to using stockings alone.

Risks of surgery

Ligation and stripping may cause minor complications such as bruising, bleeding, pain and wound infection. More serious complications such as nerve damage or blood clot formation in your deep veins (deep vein thrombosis) are less commonly encountered.

Are there other options?

Endovenous ablation or sclerotherapy are other forms of recommended treatment available for varicose veins. However, not all forms of varicose veins are suitable to be treated with these methods. For further information, please discuss these options with your vascular surgeon.

Before the surgery

Pre-admission clinic procedures

Your doctors will go through the details on your health condition and your medications. You should furnish your doctors with an updated list of your medications. Also, please alert your doctors if you have any known allergies.

Preparing for admission

You should feel well prior to admission for the surgery. Please alert your doctors if you have any health concerns that arise between your last visit and the admission. Remember to adhere to the advice on the duration of withholding medications such as blood-thinners. There are no dietary restrictions for the procedure, however, please avoid traditional medications or herbs in the weeks preceding the surgery as these may predispose you to a higher risk of bleeding or wound infections. Your anesthesia doctor will advise you on fasting for the surgery. Please be reminded to bring your pair of compression stockings to the hospital as it will be used immediately after the surgery.

Arrival to UMMC

Proceed to the admission counter at the lobby (first floor) of the South building (Menara Selatan) for registration. You will be admitted to your designated ward once a bed is available for you.

Operation

The surgery can be done either under spinal (half-body) or general anesthesia. Usually, two cuts will be made on your thigh (one at your groin and another just above your knee level). Ligation: your surgeon will tie and divide the affected vein at the level of your thigh. Stripping: with the aid of a thin wire that is passed through your vein, your surgeon will remove the vein from underneath your skin. If you have other dilated veins below the level of your knee, smaller separate incisions will be made to remove these veins. Your skin will then be sutured close, and a compression bandage will be placed on your leg at the end of the procedure.

After the operation

After the surgery, you will be brought back to the ward. You may experience mild to moderate levels of pain in your leg after the surgery; this is expected. You are expected to be able to eat and ambulate once the effect of the anesthesia medications has worn off (within 6-8 hours after surgery).

After the surgery, you may need about two weeks to recover before you can get back to work. This duration may vary depending on your general health and the nature of your occupation. You will need to continue wearing your compression stockings in the weeks after the surgery.