



CASE REPORT: IS SCLEROTHERAPY APPROPRIATE FOR TREATING VARICOSE VEINS...?

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ABSTRACT

When the length and size of the veins especially in the leg region gets enlarged, it is referred to as varicose vein. Varicose veins generally appear to be twisted and forms bubble structure at certain points. Thus, any vein that gets twisted and enlarged is known as varicose vein. A 60 years old male patient was brought to general medicine department with chief complaints of multiple swelling on the medial sides of the lower limb and appearance of enlarged veins in the form of cords over the lower limbs since 2 years. Patient was also treated with non-surgical approach to shrink the varicose veins by injecting 1.3mh/ml of polidocanol solution into the varicose veins at a frequency of once in a day. The therapeutic outcomes are clearly represented in the figures 1 and 2. Varicose veins are most commonly seen in rural population, which may be due to their heavy physical activities in fields and especially in farmers. From the study it was clear that non-surgical approach for varicose vein is an excellent approach for treating varicose vein in patients with less pain and expense. The sclerosants which are used in sclerotherapy procedure includes drugs like polidocanol and Hypertonic saline which are most effective drugs for making the veins to shrink and get to its normal size.

INTRODUCTION

When the length and size of the veins especially in the leg region gets enlarged, it is referred to as varicose vein. Varicose veins generally appear to be twisted and forms bubble structure at certain points[1]. Thus, any vein that gets twisted and enlarged is known as varicose vein[2]. This is mostly seen in people whose life style includes standing and walking upright for major time of their life, which results in pressure over the veins especially in the lower parts of your body making the veins weak and enlarged in size[3]. In most of the cases varicose vein does not cause any pain. Self diagnosis of varicose vein includes, dark purplish coloration of veins and twisted and bulding of veins which appear like cords in the lower parts of the body[4]. In some cases, varicose vein may be painful which includes, achy or heavy feeling in the legs, burning, throbbing, muscle cramping, swelling in lower legs, difficulty in movement like sitting and standing,

itching around the veins, skin discoloration may also be seen[5].

CASE STUDY:

A 60 years old male patient was brought to general medicine department with chief complaints of multiple swelling on the medial sides of the lower limb and appearance of enlarged veins in the form of cords over the lower limbs since 2 years. Patient also represented with pain in the limbs on long standing posture since 6 months. Patient has a history of ulcers. And was a known case of diabetes, known case of hypertension. Coming to his life-style, he is a chronic smoker since 20 years. On examination the patient was presented with varicose vein over the medial of right lower limb with bulging at a approximate size of 5 X 4 Cms. From the above findings the patient was diagnosed to have varicose veins, and the treatment approach was made for the same.

Table 1: Treatment approach in the patient

Drugs	Dose	R.O.A	Freq	Days Of Treatment				
				1	3	4	5	6
Inj.Ceftriaxone	1gm	IV	BD	-	-	+	+	+
T.BComplex	-	PO	OD	+	+	+	+	+
Inj.tramadol	100mg	IM	BD	-	-	+	+	+
Inj.Pantoprazole	40mg	IV	BD	-	-	+	+	+
T.Ifá	325mg	PO	OD	+	+	+	+	+
T.Serratio	10mg	PO	BD	-	-	+	+	+
Inj. Polidocanol	1.3mg/ml	IV	OD	+	+	+	+	-

Fig 1:Before treatment



Fig 2: After treatment



DISCUSSION:

Patient was made to stay in the hospital for about 6 days. Treatment for varicose veins includes both surgical and non-surgical procedures. Surgical procedure includes cutting down of the enlarged veins followed by stretching of veins at their appropriate lengths and treating with antibiotics for prophylaxis. The patient was prescribed with Injection ceftriaxone at a dose of 1gm to be used intravenously at a frequency of two times a day for 3 days, tablet B complex for vitamin supplementation, Injection Tramadol at a dose of 100mg to treat pain and swelling, Injection antaprozole to prevent stomach ulcer at a dose of 40mg to be used intravenously at frequency of twice daily, oral use of iron folic acid to treat anemia at a dose of 325mg once daily dosage, oral use of serratiopeptidase at a dose of 10mg to treat inflammation and pain, as represented in the Table 1.

Patient was also treated with non-surgical approach to shrink the varicose veins by injecting 1.3mh/ml of polidocanol solution into the varicose veins at a frequency of once in a day. The therapeutic outcomes are clearly represented in the figures 1 and 2.

CONCLUSION:

Varicose veins are most commonly seen in rural population, which may be due to their heavy physical activities in fields and especially in farmers. From the study it was clear that non-surgical approach for varicose vein is an excellent approach for treating varicose vein in patients with less pain and expense. The sclerosants which are used in sclerotherapy procedure includes drugs like polidocanol and Hypertonic saline which are most effective drugs for making the veins to shrink and get to its normal size.

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