

Information on ligation and stripping of varicose veins

What is Ligation and Stripping of Veins

Ligation (tying off) and division of a vein above a varicosity (swollen vein) and removal of varicose veins (stripping) are carried out on enlarged tortuous veins that cause great discomfort. The procedure will prevent oedema, ulceration, pain and fatigue in the affected leg.

The procedure will generally take 40 to 90 minutes and is usually under general anaesthetic.

Preparing for the Procedure

You will be advised of your admission date by the secretary. Most patients are admitted on the day of the procedure or rarely you may be admitted the night before.

You will be provided with admission forms for the relevant hospital and asked to complete them and return them to the hospital.

Prior to your date of surgery, the relevant hospital will contact you to confirm your time and date of procedure as well as relevant details.

Prior to your surgery the anaesthetist may either contact you by phone, see you in preoperative clinic or just prior to surgery.

Prior to surgery you will be instructed on the importance of early ambulation, frequent walking, avoiding sitting for long periods and elevation of the limbs to prevent venous stasis.

You will be asked to fast for 6 hours prior to surgery.

If you are taking an anticoagulant (blood thinner), ie Warfarin/ Plavix, you will be advised when to stop taking them. Any other medications can be continued as per usual, unless otherwise ordered.

If needed, a vein mapping will be performed. This is when the veins are mapped by guided ultrasound, and marked on the leg with a felt tip pen. This is to aid the surgeon to identify the veins to be operated on. This may also be done prior to surgery by the surgeon whilst you are in the standing position. Some varicosities may appear less prominent and more difficult to locate when lying down without the markings.

If you are being admitted the night before you will be asked to present yourself to the hospital between 2pm & 4pm the day before. If you are being admitted on the day you will be asked to present yourself to the hospital 2 hours prior to beginning of the operation list. This will enable the nurses, anaesthetist and surgeon to do final confirmations and prepare you for surgery.

You will be advised to contact the doctors rooms after discharge to make a follow-up appointment in 2 weeks.

On admission

- Asked to remove your jewellery, glasses and dentures etc.

- You will be asked to change into a gown before your procedure.
- Your hairs will be clipped at the site of the surgery prior to being taken into the operating theatre. DO NOT wax or shave the area prior to admission.
- You may be given a sedative prior to being taken into the operating theatre.
- You will be asked to empty your bladder before the procedure.
- You will be instructed as to what to expect when you wake up after surgery.

After surgery

Immediately following surgery you will be kept lying flat with the foot of the bed elevated, for 4 hours.

Your leg will be bandaged, usually in 3 layers.

You will usually have 2 large incisions, either in the groin, behind the knee or ankle. You will also have numerous small incisions to remove small branches. These will be covered with small tapes.

There will be no sutures to be removed normally. They will be under skin and dissolve naturally.

You will be encouraged to ambulate on the day of surgery and short frequent walks everyday after discharge.

The bandages will be kept on for 24 to 48 hours and then replaced with special compression stockings recommended by the surgeon. You would have been measured on the ward for these stockings.

Wear the elastic stockings at all times when standing, sitting or mobile. You can remove the stockings at night, after the first week. The stockings should be worn for at least 4 weeks to reduce bruising, lumps and to prevent clots from developing in veins deep inside.

Do not wear constricting garters, pantyhose or girdles.

It is common to get oozing from the wounds and this usually only needs reinforcing with more dressings and elevation of the leg. Very rarely readmission to hospital is needed. Contact the hospital if there is any concern.

Keep wounds clean and dry. This reduces the chance of infection. Do not wet incisions for at least 72 hours. After this time, keep the tapes dry by waving a hair dryer over them after each shower. The tapes will fall off within 10 – 14 days.

Lumps in the groin, thigh or leg are normal where you have been cut, especially in the groin. This will resolve completely with time, usually about 6 weeks. Bruising may also be extensive but will always resolve with time.

Occasionally swelling of the ankles occurs. And will resolve completely with time. The elastic stockings will help prevent this during the day.

There is no restriction to any activity after discharge, including driving, and you can return to normal activity as soon as you feel comfortable to do so. Activity and walking is encouraged and advisable for at least 15 minutes a day. Activity helps with rapid resolution of bruising, induration (lumps) and swelling at the sites of surgery, ankle and foot.

You can return to work when you feel comfortable. One week leave is usually given. Examine your job: get up and walk for several minutes every hour. Frequent ankle exercises while sitting. Avoid standing or sitting for long periods. Have legs up while sitting.

Make sure that you make a follow up appointment for 2 weeks. It is very important Dr Sieunarine assesses the wound after surgery.

If you have any problems, such as redness, signs of infection and excessive pain, contact your doctor or organise an earlier appointment. Pain relief can either be with Panadol or Panadeine if needed.

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'State wide, evidence based
comprehensive vascular
solutions'

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*Information for patients under the
care of Dr Kishore Sieunarine*

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