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— THE PATIENT'S HANDBOOK

Varicose Veins Laser Treatment walk in, walk out.

A clear guide to endovenous laser treatment (EVLA) for varicose veins — how faulty leg veins cause aching, swelling and bulging, and how a keyhole laser procedure closes them gently, with no long incisions and a quick return to your feet.

Endovenous Laser (EVLA)

Day-care procedure

No vein stripping

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What this handbook is for

You have **varicose veins**, and laser treatment — **endovenous laser ablation (EVLA)** — has been suggested. This guide explains why varicose veins happen, why they are more than a cosmetic issue, how the laser closes the faulty vein through a tiny entry point, and how you recover. The goal is a confident, informed decision.

Why do varicose veins form?

Veins in your legs carry blood **upward, back to the heart**, against gravity. They rely on tiny one-way valves to stop blood flowing backward. When these valves weaken and fail, blood pools in the vein, which stretches and becomes the bulging, twisted **varicose vein** you can see. This backward flow is called **reflux**.

Day-care

home the same day

One

tiny entry point, no cuts

Local

anaesthesia, awake &
comfortable

Days

back to routine*

More than a cosmetic problem

Varicose veins can be uncomfortable and, if left untreated, sometimes progress. Treatment is considered not just for appearance but when they cause symptoms or complications:

Common symptoms

Aching, heaviness or throbbing legs, swelling around the ankle, itching, night cramps, and tiredness that worsens after standing.

If left untreated

Skin darkening or eczema near the ankle, hardening of the skin, bleeding from a vein, or in some cases a leg ulcer that is slow to heal.

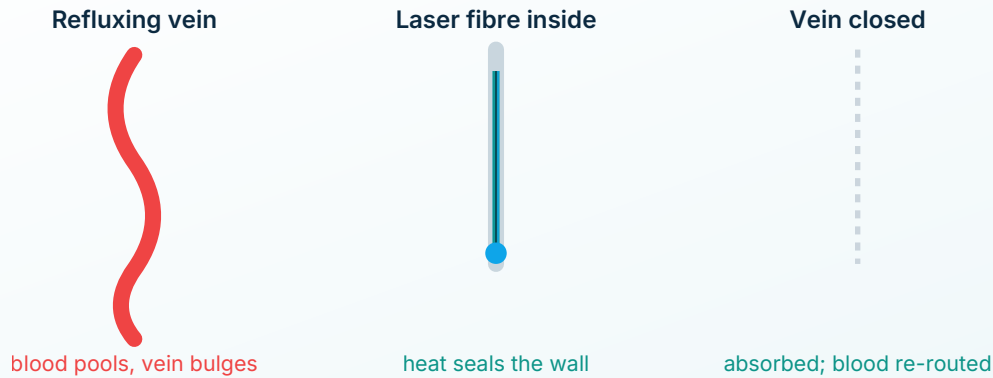
i How the problem vein is found

Before treatment, a **Doppler ultrasound scan** maps your leg veins and shows exactly which vein is refluxing. This painless scan is essential — it lets the treatment target the faulty vein precisely and plan the procedure for your specific anatomy.

How laser treatment works

Rather than surgically stripping the vein out (the older method), **EVLA closes the faulty vein from the inside**. Under ultrasound guidance, a very thin laser fibre is passed into the vein through a tiny entry point — no cuts or stitches. Laser energy gently heats the vein wall so it seals shut. Your body then naturally reroutes blood through healthy deep veins, and the closed vein is gradually absorbed.

SEALING THE VEIN FROM WITHIN



The faulty vein is sealed from within; healthy deep veins take over the work.

Laser (EVLA) vs traditional vein stripping

Endovenous laser (EVLA)

- ✓ One tiny entry point, no incisions
- ✓ Local anaesthesia — awake, comfortable
- ✓ Day-care — home the same day
- ✓ Less pain & bruising
- ✓ Quick return to walking & work
- ✓ Little to no scarring

Traditional stripping

- ✗ Cuts in the groin & leg
- ✗ Usually general anaesthesia
- ✗ More pain & bruising
- ✗ Longer time off work
- ✗ More scarring
- ✗ Still used in selected cases

i Treating the visible veins too

Once the main faulty vein is closed, smaller surface varicosities can be dealt with in the same or a later sitting — for example by tiny punctures to remove them, or injections (sclerotherapy). Your plan is tailored to your legs and discussed with you beforehand.

BEFORE THE DAY

Preparing for your procedure

1 Consultation & Doppler scan

Your legs are examined and a Doppler ultrasound maps the faulty veins, confirming that laser treatment is right for you and planning it precisely.

2 Medication review

Tell us about all medicines, especially **blood thinners**. Most can be managed simply; we'll give you clear instructions.

3 Compression stockings

You'll be advised to have **graduated compression stockings** ready — these are an important part of recovery and help the result.

4

On the day

Wear loose clothing. Because EVLA is usually done under local anaesthesia, eating and fasting instructions are simpler — these will be confirmed for you.

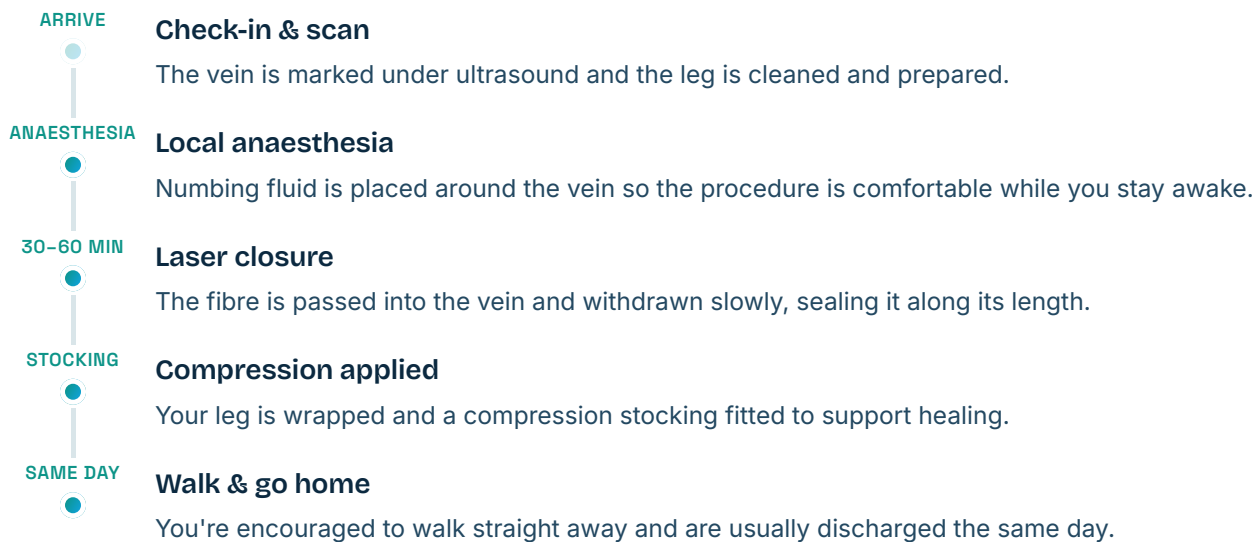
✦ Bring with you

- ✓ Previous reports & any Doppler scans
- ✓ A list of current medications
- ✓ Insurance / cashless card details
- ✓ Your compression stockings
- ✓ Loose trousers & comfortable shoes

✦ Good to know

- ✗ Usually done awake, under local anaesthesia
- ✗ You can walk immediately afterwards
- ✗ Most people go home the same day
- ✗ Walking is encouraged, not rest

On the day

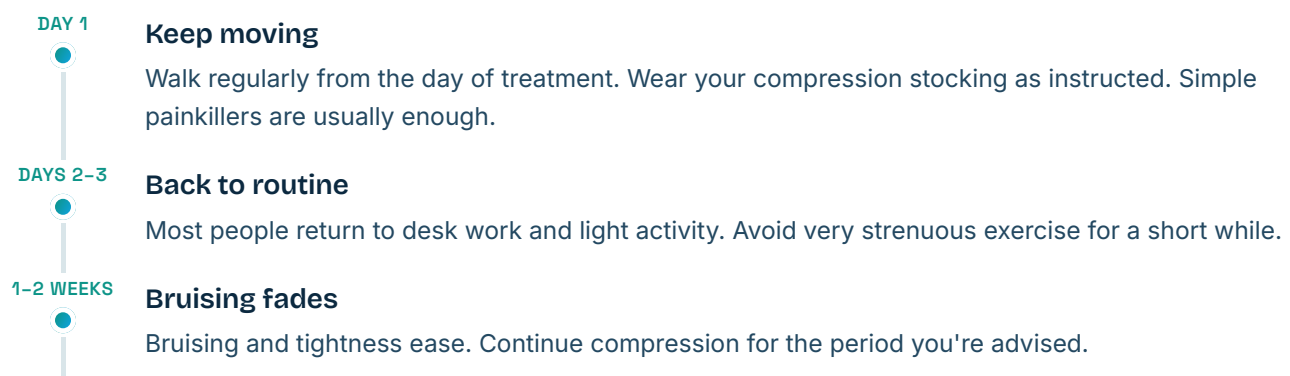


RECOVERY

After your procedure

Recovery is quick, and **walking is the key to it**. Most people return to normal daily activity within a day or two. You may notice mild bruising, tightness or a pulling sensation along the treated vein for a couple of weeks — this is normal and settles as the vein is absorbed.

Your recovery timeline



WEEKS+

Vein settles

The closed vein is gradually absorbed and symptoms improve. A follow-up scan may confirm the vein has sealed.



Do

- ✓ Walk regularly, several times a day
- ✓ Wear compression stockings as advised
- ✓ Take simple painkillers if needed
- ✓ Keep the leg moving when sitting
- ✓ Elevate the leg when resting
- ✓ Stay well hydrated



Avoid

- ✗ Long periods of standing still
- ✗ Sitting motionless for hours
- ✗ Very strenuous exercise at first
- ✗ Hot baths & saunas early on
- ✗ Long-haul travel immediately after
- ✗ Skipping the compression stocking

Why compression & walking matter so much

Compression stockings and frequent walking keep blood moving through the healthy deep veins, reduce bruising and swelling, and lower the small risk of clots. They are not optional extras — they are a core part of a good result. Wear the stocking for the full period you're advised.

SAFETY

Risks & when to seek help

EVLA is a safe, well-established treatment with far fewer problems than traditional stripping. Serious complications are uncommon, but it helps to know what is normal and what needs attention.

Generally minor & common

- Bruising along the treated vein
- Tightness or a pulling sensation
- Mild tenderness or numbness of skin
- Temporary lumpiness over the vein

Uncommon, discussed with you

- Skin burn or infection (rare)
- Inflammation of the vein (phlebitis)
- Deep vein clot (uncommon)
- The vein not fully closing
- New veins appearing over time

Contact us or go to A&E if you have:

- A hot, red, increasingly painful or swollen calf
- Sudden breathlessness or chest pain (call emergency services)
- Fever or spreading redness around the entry point
- Severe pain not eased by simple painkillers
- Bleeding from the treatment site that won't settle

✓ Your follow-up

You'll have a review, often with a repeat scan, to confirm the vein has sealed and your symptoms are improving. This is also the time to plan treatment of any remaining surface veins. Bring your questions written down.

Common questions

Is it painful?

Most people feel little during the procedure thanks to local anaesthesia, and only mild discomfort afterwards — far less than with vein stripping.

Will the varicose veins come back?

The treated vein is permanently closed. However, vein disease can be progressive, so new veins can develop over time — good habits and follow-up help. Some people need a top-up treatment later.

How soon can I go back to work?

Many people return to desk work within a day or two. Jobs involving long standing may need a little longer, with good compression.

Is it covered by insurance?

When varicose veins cause symptoms or complications, treatment is often covered by health insurance, subject to your policy. Purely cosmetic treatment may not be. The insurance desk can check your cover.

Tired, aching legs?

Bring any previous reports or scans to a consultation. Your legs will be examined and scanned, and you'll get an honest opinion on whether laser treatment will help.

SURGEON

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This handbook is for general patient education only and does not constitute medical advice, diagnosis or treatment. Suitability for laser treatment depends on assessment including ultrasound; techniques, risks, benefits and outcomes vary by individual and will be discussed with you by your own surgical team. Individual recovery times and results vary. Always follow the instructions given to you by your own surgical and anaesthetic team. © 2026 Dr Prashant Philip Das.