Send to printer Close window

RUNNING FOR COVER

Spider veins – hues under the skin

BROBSON LUTZ M.D.

JANE SANDERS ILLUSTRATION

They are just awful and look terrible. I hate them. They popped out years ago on my ankles and just below my knees. I cover them with dark hose in winter. In summer they keep me from wearing shorts and short dresses," says Sue Sexton, the alias of a retired nurse in Metairie who forbids me to reveal her real name.

Sexton, a grandmother more youthful than any grandmother I remember from my youth, refrains from even uttering the name of her odious concern. “They” are spider veins, common dermatologic findings like wrinkles and the russet brown spots that proliferate with advancing decades. The medical term for spider veins is telangiectasia.
Spider veins, like wisdom, typically debut as the skin’s youthful vigor and fullness fade into the sunset. This minor plague isn’t an equal opportunity malady – women victims outnumber men by at least three to one and fair skin makes them more prominent.

Spider veins are dilated tiny blood vessels the size of a hair in various hues of red to pink to blue. A few here or there are barely noticeable, but they tend to congregate as visible flat clusters of unwelcomed Technicolor. The pink and more reddish ones are filled with more oxygenated blood than the bluish ones, which are more on the venous side. Press a patch of these thin-walled blood capillaries with a finger and the area blanches, but the color rapidly returns when the pressure is released.

The thread-like distribution of spider veins on the skin’s surface resembles a zoomed-out lacelike map of the streets in Faubourg Marigny. No self-respecting spider would ever spin an asymmetrical web in such a random pattern.

They can pop up anywhere, but for women the favored habitats are thighs, lower legs and ankles. The face is a common target for both sexes, as sun exposure seems to be a risk factor. Pregnancy, minor trauma and occupations involving standing for long periods are other risk factors.

“I think they are hereditary as I had a aunt who had them in the same spots I do, but my twin sister hardly has any,” says Sexton. One theory is that tight-fitting girdles and elastic bands used to hold up stockings at a younger age are contributing causes. And something about pregnancy and hormonal shifts favors an increased frequency among women.

Spider veins cause frequent cosmetic concerns, but they’re almost never associated with physical problems or medical complications. An exception is when spider veins on the face are accentuated by rosacea, an acne-like inflammatory condition amendable to treatment with antibiotic creams. A butterfly-like distribution of spider veins and facial redness below the eyes and spreading out from both sides of the nose can also signal lupus, a potentially serious autoimmune disease, if it also attacks the connective tissue of internal organs.

If a person with spider veins on her lower extremities has pain or swelling of the ankles, some other malady coexists. As with Sexton, if spider veins on the legs or ankles become a cosmetic nuisance, it is easiest to camouflage them with stockings or cover-up makeup. Avoid any topical medications with steroids, including over-the-counter hydrocortisone creams that accelerate thinning of the skin, making the capillaries more noticeable.

Dermatologists developed a procedure called sclerotherapy in the early 1900s that still works for spider veins when camouflage alone isn’t sufficient. Today sclerotherapy remains a choice for a small patch of spider veins on the legs or thighs. Since telangiectasias aren’t associated with any medical complications, insurance companies generally don’t cover treatment.

Using a fine needle, each enlarged capillary is injected with a very small amount of an irritating solution. The next day the treated area looks like a bruise. Over the next couple of weeks the bruising disappears as the sclerosing solution irritates the thin walls of each injected spider vein, causing them to shrink, collapse and fade away. The multiple injections and search for each small venule can be never ending, and repeated injection therapies are often necessary for best results.

Over the past decade, laser therapy and other pulsed radiofrequency treatments have become therapies of choice especially for spider veins on the face. Laser is a safe and effective way to make spider veins disappear without using needles. The laser treatments can cause an uncomfortable heat sensation, but the treatments usually only last 15 to 20 minutes or so. Several treatment sessions are typically needed depending on the size of the patch of spider veins under attack.

The pulsed energy of the laser “cooks” the red blood cells in the superficial capillaries causing the spider veins to fade. It is important to get these treatments from an experienced

physician as other skin structures, including sweat glands, can be cooked in the process. Once a spider vein is destroyed, it won't grow back, but over time new ones often appear, calling for followup treatments.

Varicose veins are the big, ugly stepsisters of spider veins, what with their bulging cord-like appearance. Unlike spider veins, varicose veins can cause medical problems from pooling of the blood in an area prone to skin irritation and ulcers. Laser therapy has revolutionized treatment of large varicose veins on the legs, but the laser tip needs to be actually threaded into the wall of the varicose vein. These varicose vein treatments are more complicated than the superficial lasering of spider veins.

"When I tan my legs they don't show as much. I almost got them lasered a few years ago, but they told me it wouldn't work if I got tanned and then something more important came up," says Sexton. "I cover my face with sunblock as the last thing I need is those awful brown spots. Lying out in the sun may be dangerous, but they say you need more Vitamin D these days. If it's not one thing, it's another."