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# Natural Approaches to Heal Varicose Veins- A Review

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#### ABSTRACT:

Varicose veins are among the most common of the many illnesses that people nowadays suffers. Varicose veins are enlarged, engorged blood vessels that bulge beneath the skin's surface. When vein walls are weak and valves aren't working properly, blood backs up in veins, creating blue and purple bulges. A twisted, blue or purple vein beneath the skin's surface, as well as heavy or unpleasant legs, are the telltale signs of varicose veins. People are unaware that varicose veins can cause bleeding, irritation, or discolouration of the skin if left untreated. The superficial veins in the legs are under a lot of pressure, and it is more common in women than in males. The symptoms of venous insufficiency might be alleviated by using herbal treatments. Although allopathy and ayurveda can be used to treat varicose veins, this study will focus on herbal therapies for this condition because they are readily available and have less adverse effects.

KEYWORDS: Herbal remedies, Varicose veins, Allopathy, Ayurveda.

## INTRODUCTION:

The Latin word "varix" (meaning "twisted") is where the word varicose originates. The phrase "chronic venous disorders" can be used to describe both varicose veins and chronic venous insufficiency (CVI). Large, twisted veins beneath the skin's surface are known as varicose veins. It happens when the veins and valves malfunction, resulting in inadequate blood circulation and venous pooling.

Millions of people throughout the world suffer from these illnesses, which can lower quality of life by causing cosmetic issues in addition to pain and discomfort. Discover a range of vital minerals, supplements, and herbal remedies that are useful in the treatment and avoidance of varicose veins in "Natural Approaches To Heal Varicose Veins."

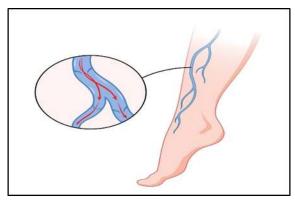


Fig.no:01 Varicose Vein

## SIGN AND SYMPTOMS:

- Aching
- Heaviness
- Cramping
- Throbbing

- Restlessness
- Discoloration and
- Swelling in the legs.

#### RISK FACTORS:

#### A. Hemodynamic and structural factors include:

- Venous valve incompetence, which causes reflux and elevated venous pressure (venous hypertension). In the majority of varicose veins, this is the primary proximal mechanism.
- > The function of the valves is further deteriorated by chronic venous hypertension, which is caused by reflux or obstruction and causes the vein wall to stretch and dilate.
- A history of deep or superficial venous thrombosis, such as Deep vein thrombosis (DVT) or post-thrombotic syndrome, might harm valves and impede blood flow.
- May-Thurner syndrome is an example of an anatomical/positional compression that results in secondary venous insufficiency and outflow blockage.

#### B. Predisposing factors that are inherent

- > Genetic and family susceptibility: defects of the valves and heritable connective tissue raise the risk.
- Age: vein wall and valve degradation over time increases incidence.
- Female sex, pregnancy, and exogenous estrogen (such as oral contraceptives) alter the venous wall and connective tissue, which leads to valvular dysfunction.

## C. Lifestyle and external factors that can be changed

- Obesity causes reflux and venous dilatation by raising intra-abdominal and venous pressure.
- > Prolonged standing or sitting (occupational/static posture) causes venous stasis and hinders the calf muscle pump.
- Low physical activity and a sedentary lifestyle lower the efficiency of venous return.
- > Smoking: causes inflammation and vascular damage, which exacerbates the severity of chronic venous illness.
- > Repeated pregnancies and parity: venous dilatation is made worse by hormonal and volume changes as well as elevated pressure.

#### D. Cellular and Biochemical Contributors

- The vein structure is weakened by oxidative stress, extracellular matrix remodelling, and dysregulated matrix metalloproteinases (MMPs) due to chronic inflammation within the venous wall.
- > Pathology of the valves and walls is caused by endothelial dysfunction and abnormal shear signalling.

## **PATHOPHYSIOLOGY**

Varicose veins occur due to venous valve incompetence and venous hypertension. Normally, valves prevent backflow, but when deformed or weakened, they allow retrograde flow (venous reflux). This increases venous pressure, especially in the lower limbs.

Prolonged standing, obesity, or sedentary lifestyle further raise hydrostatic pressure, worsening valve failure and creating a vicious cycle.

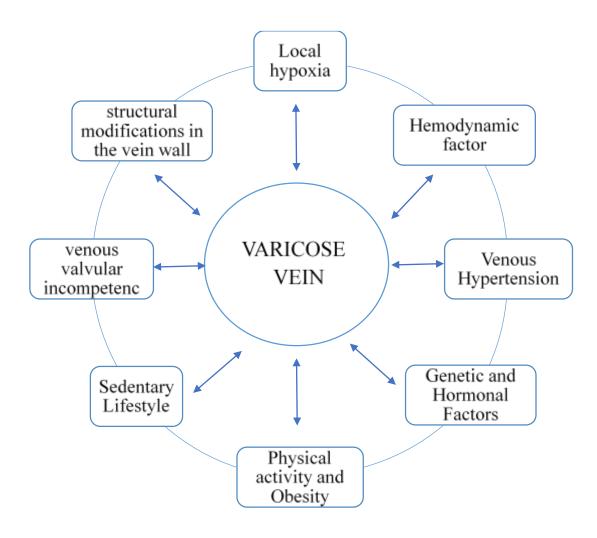
Structural changes occur: degradation of elastin and collagen weakens the venous wall, while smooth muscle atrophy reduces contractility, leading to dilation.

Inflammation contributes by causing endothelial dysfunction, increased permeability, edema, and skin changes such as hyperpigmentation or ulceration.

Hemodynamic disturbances like venous stasis and altered shear stress promote further endothelial activation and wall damage.

Genetic and hormonal influences (e.g., pregnancy, estrogen) weaken vein walls and reduce venous tone, explaining higher prevalence in women.

Overall, the interaction of valve failure, venous hypertension, wall remodeling, inflammation, and lifestyle/genetic factors leads to progressive varicose veins—dilated, tortuous, and incompetent superficial veins.



### ALLOPATHY TREATMENT:

Allopathic treatments work well for moderate to severe varicose veins, but lifestyle modifications are still necessary for long-term prophylaxis.

Surgery, sclerotherapy, or mechanical compression are the usual treatments for varicose veins. Lightweight hosiery is used to treat tiny, slightly symptomatic varicose veins with compression therapy. More complex circumstances call for a more substantial elastic support stocking. In addition to being painful and inconvenient, mechanical compression has low compliance.

## Injection Sclerotherapy

Eliminates undesired superficial veins by using chemical irritants. Small nonaxial varicose veins that are smaller than 6 mm in diameter are the main candidates for sclerosing. Sclerotherapy may be recommended for symptomatic or even asymptomatic varicose veins for aesthetic reasons. In order to treat varicose veins, a number of sclerosing agents have been developed. Polidocanol is frequently used to treat spider and reticular veins that are 1 to 3 mm in diameter and less than 1 mm. Higher concentrations (0.5 versus 1 %) are used to treat the spider veins, and the injections should be repeated in a period of one to two weeks. Recently, the most common and recommended method of treating chronic venous insufficiency with varicose veins has been the application of cyanoacrylate glue. The brief length of this minimally invasive surgery and the absence of anesthetic induction are only two of its many benefits.

## **Conservative Medical Interventions**

The majority of patients find that leg elevation, prescription painkillers, and progressive compression stockings provide sufficient symptom alleviation. The suggested graduation for compression rates is 20–30 mmHg, and in more extreme situations, it may be increased to 30–40 mmHg. For people who do not want surgery, stockings are the best option when worn on a daily basis. Although they are effective, heat and hot weather can make people less compliant.

#### **Surgical Intervention**

The larger saphenous vein was tied off and stripped during traditional surgical treatment, which involved avulsion of tributary veins. Vein ligation and/or removal are part of surgical procedures; however, the choice of treatment depends on the extent, location, and size of venous involvement, whether or not venous reflux is present. When both limbs are involved, unilateral surgery is advised to reduce the possibility of intolerance and post-operative difficulties. Complete skin exposure and careful hygiene considerations are respected when it comes to saphenous vein stripping.

#### Phlebectomy by Ambulance

The process entails making many skip incisions to remove and avulse the affected superficial vein. A combination of the treatment and saphenous inversion is one of the techniques available for controlling varicose veins. An 11-blade scalpel or an 18-gauge needle are used to make punctures. The target vein is punctured next to it. Avulsion and ligation are performed on successive venous segments. Direct pressure and limb elevation are used to control post-procedural bleeding. Both laser and radiofrequency-based catheter-based endovenous ablations have been widely employed for EVTL. Local anesthetics are preferred when performing the surgery. However, for individuals who are anxious, oral anxiolytics may be administered. A few centimeters away from the saphenofemoral or saphenopopliteal junction, a catheter is inserted antegradely. There is total anesthesia throughout the catheter's journey via the saphenous vein. After that, during the catheter withdrawal, the saphenous vein would be destroyed using either radiofrequency or thermal energy.

#### **Drugs for Varicose Vein Treatment**

Patients may also apply the elastic bandage too tightly, which could result in a tourniquet effect. Bandages can quickly loosen and lose their effectiveness, even when applied correctly. All severity levels of primary varicose veins can be treated with injection sclerotherapy. Sclerotherapy aims to cause fibrosis, which will damage the vein. When the vein is drained of blood, a 1% solution of sodium tetradecyl sulfate is injected, damaging the vein's intima and resulting in irreversible fibrosis.

#### HERBAL REMEDIES

## 1.Gotu kola (வல்லாரை)

Scientific Name- Centella asiatica Family-Umbelliferae

According to the 19th-century Indian Pharmacopoeia, it can treat a number of skin conditions, including psoriasis, eczema, leprosy, and varicose ulcers. Pentacyclic triterpenes, primarily asiaticoside, madecassoside, and asiatic and madecassic acids, are among the distinctive components of gotu kola. A substance known as the triterpenic fraction of *Centella asiatica* (TTFCA) is found in gotu kola. Because it promotes the synthesis of collagen and elastin, it is especially helpful for varicose veins. The treatment of varicose veins was positively impacted by its anti-inflammatory properties. It enhances blood flow and helps to lessen edema.

MODE OF ACTION: Anti-inflammatory, diuretic, laxative, antiseptic, stimulant, improves memory, cures wounds and ulcers, and improves capillary permeability, ulcers, fever, sluggish digestion, leprosy, skin eruptions, and varicose veins.



Fig.no:02 Gotu kola

## 2. Horse chestnut (குதிரை-கஷ்கொட்டை)

Scientific Name- Asculus hippocastanum Family- Hippocastanaceae

In Germany and Europe, horse chestnut seed extract was used to treat chronic venous insufficiencies. Unprocessed or crude seeds are avoided since they may be harmful to one's health. Aescin, the most active component of horse chestnut seeds, makes up 16–20% of the extract's contents, which also include tannins, flavonoids, quinines, sterols, and certain fatty acids, coumarins, and scopolin. This active ingredient, aescin, treats the vascular permeability of the veins and capillaries. It works by reducing the veins' hyperpermeability as well as edema and inflammation, which improves blood flow and venous pressure. Additionally, the extracts' antioxidant qualities aid in vein toning, vascular permeability reduction, and venous return enhancement. In the veins, the hydroxyl coumarin has an anti-thrombin effect.

MODE OF ACTION: Astringent, decreased capillary wall permeability caused by pathology, and improved vascular resistance.



Fig.no:03 Horse chestnut

## 3.Grape Seed Extract (திராட்சைவிதைகள்)

Scientific Name-Vitis vinifera Family-vitaceae

Proanthcyanidin is a polyphenolic substance found in the extract. The substance, which is derived from red grape seeds, is classified as an oligomeric flavonoid chemically. It is claimed that proanthocyanidin has vasodilating, anti-inflammatory, and antioxidant properties. The medication aids in capillary permeability, blood vessel dilatation, and bringing blood pressure back within normal limits. According to an evaluation of proanthocyanidin's effects, the medication could lessen pain, heaviness, and itching. Additionally, it was found to be beneficial in lowering the edema brought on by varicose veins.

MODE OF ACTION: Reduce venous edema and increase blood flow.



Fig.no:04 Grape Seed Extract

## 4. Butcher's Broom (பட்சர் புரும்)

Scientific Name-Ruscus aculeatus Family- Liliaceae

Steroid saponins based on ruscogenin and neoruscogenin, including ruscoside, ruscin, deglucoruscoside, and deglucoruscin, are the distinctive components of butcher's broom extract. A butcher's broom can help ease the pain and suffering associated with varicose veins. Because of its anti-inflammatory and anti-elastase properties, this herb contains substances called ruscogenins that help reduce inflammation while narrowing the veins. Its nutrients will increase blood flow up the legs and help to tighten, strengthen, and reduce irritation in the veins.

MODE OF ACTION: anti-inflammatory, anti-hemorrhagic, and vasoconstrictor



Fig.no:05 Butcher's Broom

## 5. Cayenne pepper (சிவப்பு மிளகாய்)

Scientific Name- Capsicum annuum Family- Solanaceae

The most potent component of cayenne is capsaicin. It inhibits the factors that cause blood clots to develop and promotes fibrinolytic activity. For varicose veins, cayenne pepper is regarded as a miracle remedy. Rich in bioflavonoids and vitamin C, it improves blood circulation and reduces the discomfort of swollen, clogged veins.

MODE OF ACTION: Promote circulation and lessen varicose vein discomfort.



Fig.no:06 Cayenne pepper

## 6.Ginger(**இஞ்**年)

Scientific Name- Zingiber officinale Family-Zingiberaceae

In this situation, ginger is a lifesaver. Ginger, which is well-known for its anti-inflammatory properties, can be used to treat varicose veins because it increases blood circulation and breaks down fibrin in the blood vessels.

MODE OF ACTION: Relief from bronchitis, migraine headaches, upper respiratory tract infections, menstruation pain, rheumatoid arthritis (RA), osteoarthritis, and diabetes.



Fig.no:07 Ginger

## 7.Amla (நெல்லி)

Scientific name-Emblica officinalis Family- Phyllanthaceae

Because of its high vitamin C, iron, and calcium content, it possesses strong antioxidant or free radical scavenging properties that protect the skin. Ulcers and other potential infections are prevented in this way. Additionally, it has the ability to regulate hypertension and treat the related problems. By recycling the sugar moieties, the low molecular weight hydrolyzable tannins provide defense against the damaging effects of free radicals. Amla's activity depends on its chemical components, including pedunculagin, punigluconin, and emblicanin A and B. Because of its high ascorbic acid content, it is also claimed to have anti-inflammatory properties. Capillary fragility can be improved with vitamin C.

MODE OF ACTION: By reducing swelling and promoting healthy circulation, its anti-inflammatory, anti-thrombosis, anti-coagulant, and antioxidant qualities improve blood flow and vascular health.



Fig.no:08 Amla

## 8. Garlic (பூண்டு)

Scientific name- Allium sativum Family- Amaryllidaceae

Because of its many therapeutic uses and health benefits, garlic has been used as a traditional medication to diagnose a variety of illnesses. Garlic's primary active ingredients include allicin, allin, ajoene, S-allycysteine, diallyl polysufides, vitamins, minerals, and amino acids. Garlic's allicin content aids in preventing blood clots from causing irritation. It has anti-inflammatory properties and improve blood circulation. Garlic also eliminates the poisons that are in the body and enhances general wellness. The anti-oxidant qualities of garlic make it beneficial for lowering blood pressure.

MODE OF ACTION: Improve blood circulation, lower blood pressure, treat rheumatism, arthritis, gout, fluid retention, obesity, and diuretics.



Fig.no:09 Garlic

## 9. Witch Hazel (வட அமெரிக்க புதர்ச்செடிவகை)

Scientific Name-Hamamelis virginiana L Family- Hamamelidaceae

Among Witch Hazel's distinctive components are tannins, particularly gallotannins, and, to a lesser degree, flavonoids, such as procyanidins, catechins, and flavanols. Witch hazel helps lessen the symptoms of varicose veins because it is a very efficient herb for strengthening blood vessels. In addition to being an astringent, it also contains gallic acid and a number of essential oils that can help lessen discomfort and swelling.

MODE OF ACTION: Astringent, styptic, irritates mucosal membranes, causes venous laxity, congestion, bleeding hemorrhoids, varicosities, heals wounds, and decreases local inflammations.



Fig.no:10 Witch Hazel

## 10. Marigold (சாமந்தி)

Scientific Name-Calendula officinalis Family-Asteraceae

Cis-ocimene, (E)-oscimene, l-limonene, (E)-tagetone, b-caryophyllene, and dl-limonene were determined to be the main constituents. Rich in flavonoids and vitamin C, the lovely marigold flower promotes collagen synthesis and helps with cell division and repair. Additionally, it enhances blood flow, which helps reduce a number of varicose vein symptoms.

MODE OF ACTION: Treat chronic fevers, diarrhea, dysentery, urinary tract infections, and uric acid and arthritis.



Fig.no:11 Marigold

## **CONCLUSION**

The research concludes that herbal medications play a crucial role in managing varicose veins as an alternative treatment approach. The study highlights that Ayurveda offers a promising avenue for providing potential relief and therapeutic benefits for patients suffering from this condition. Herbal Treatment Efficacy: The ten herbal remedies discussed in the study (including Gotu kola, Horse chestnut, Grape seed extract, Butcher's broom, Cayenne pepper, Ginger, Amla, Garlic, Witch hazel, and Marigold) demonstrate significant therapeutic potential for varicose vein management.

Traditional Medicine Advancement: The research acknowledges that advancements in traditional drug formulations have introduced new methodologies and approaches for controlling varicose veins, making these treatments more accessible and effective. The review presents a comprehensive review that supports the use of natural approaches as viable alternatives to conventional allopathic treatments, while maintaining scientific caution about the need for more rigorous clinical validation of these herbal interventions

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