

# Ablation Elation

Pair of minimally invasive techniques heal painful, chronic venous ulcers

Clint McGeachy has worked in restaurant kitchens for many years, most recently as the kitchen manager for two eateries in Florida. The long hours of standing took a toll on his legs, however, and the long workdays kept him away from his family. So, he concluded that he needed a new job.



DOUGLASH H. JOYCE, DO, FACOS, FACPh

“A guy I cooked with became a machinist. He was making a lot more money and got to be home with his family in the evenings and on weekends,” Clint recounts. “I thought, *Instead of working 16-hour days, I could work eight-hour days*, which is a lot better, and I could spend more time with my wife and son.

“Then COVID struck, and my kitchen job was essentially eliminated because the hours got taken away. The restaurant wasn’t even allowed to be open. That clinched my decision.”

To become a machinist, Clint enrolled in a one-year training program at Suncoast Technical College in Sarasota. Following graduation, he completed a monthlong internship and began working as a full-time machinist in early July.

“Machinists work on objects made of metal,” he explains. “Clients ask us to make metal parts for them. They could be car parts or even missile parts. Anything you see that’s metal we’ve had something to do with it.”

Switching careers was not enough to eliminate the issues with Clint’s legs, however. Over the years, he developed painful ulcers that didn’t heal with routine treatment or even wound care.

“When the first wound appeared four years ago, I didn’t know what it was, but it wasn’t going away,” Clint reveals. “It got big, so I went to the hospital. They sent me to wound care, which closed that wound. But then another one opened on the other side.

“Eventually, I had a whole bunch of sores on both legs. There were wide-open sores between my ankles and heels, and some just above my ankles. That’s where they seemed to fester. If I wasn’t in double leg wraps, I was in compression socks with a lot of medicine underneath trying to control the drainage from the sores.

“My legs were discolored as well. And I couldn’t swim in the pool with my son because of the open wounds.”

When staff at the wound care

center couldn’t heal Clint’s ulcers, they suspected a problem with his veins and referred him to Douglas H. Joyce, DO, FACOS, FACPh, a board-certified cardiovascular surgeon at Joyce Vein & Aesthetic Institute in Punta Gorda.

Dr. Joyce specializes in treating venous disease with minimally invasive procedures. He addresses all stages of the disease, from spider veins to venous ulcers.

He began his treatment of Clint with a thorough examination.

“We evaluated Clint with ultrasound and venous mapping and discovered that the sores were forming and refusing to heal because of a significant number of incompetent veins in his legs,” the doctor recalls.

## Birth of an Ulcer

There are two vein systems in the legs: the high-pressure *central vein system* deep in the muscles and the low-pressure *superficial vein system* just below the skin. The superficial system drains into the central system through *perforator veins* and the *saphenous veins*.

“There are valves in perforator veins that make sure high-pressure blood doesn’t leak out to the low-pressure skin system,” Dr. Joyce explains. “If the valves don’t work properly, high-pressure blood shoots through to the skin. With the intense pressure that results, the arteries can’t push enough oxygenated blood into the area. The skin cells die and an ulcer forms.

“Clint’s incompetent veins included his greater and lesser saphenous veins as well as many perforator veins. These veins were not functioning correctly, which is why he was having so much trouble with ulcers. There was just too much back pressure in his perforator veins.”

Once Clint’s incompetent veins were identified, Dr. Joyce performed two minimally invasive procedures to close them: *standard laser ablation* and *single-needle laser ablation*, the latter a technique developed by Dr. Joyce.

“We used standard ablation to close Clint’s saphenous veins because they were really enlarged and severely incompetent,” Dr. Joyce details. “During this procedure, we slide a laser fiber into and along the length of the vein and use laser energy to seal the entire vein. Blood flow is then rerouted to other healthy veins.”

Clint McGeachy

During single-needle laser ablation, Dr. Joyce takes a specifically designed needle and, using ultrasound guidance, places it into the targeted vein, which is usually a perforator vein. He applies an anesthetic, then turns on the laser for 15 to 20 seconds, which spot-welds the area of vein being treated.

“Our aim has always been to identify everything that’s wrong in the legs and then fix it,” the doctor maintains. “We close veins in the legs, but we only close those veins that are nonfunctional and not contributing to drainage out of the leg. What we do is make the drainage more efficient. And when we do that, time and again patients get better.”

Clint initially arrived at Joyce Vein & Aesthetic Institute in February. At the time, he was still in school and without medical insurance. But Dr. Joyce didn’t turn him away. He worked out an arrangement whereby Clint would pay him what he could afford over time.

“We always do that when patients are challenged financially,” Dr. Joyce states. “We can’t let them go out the door with a venous ulcer without fixing it.”

## “No Open Wounds”

Clint greatly appreciates the doctor’s benevolence. He was also impressed with the plan to treat his leg wounds.

“I was afraid that I might be walking around with those sores forever, but Dr. Joyce really helped me out financially, and now, the wounds on my legs are all closed,” Clint enthuses. “For the first time in four years, I have no open wounds on my legs.

“I do have some scarring where the open wounds were, and I still have a little bit of skin discoloration, but all of that is getting better. And thanks to Dr. Joyce, I don’t have any of the pain that I used to have either.

## Get Help From An Expert

To learn how Dr. Joyce can remove venous disease from your life, call or visit his office in Punta Gorda at:

25092 E. Olympia Ave.  
Suite 500  
(941) 575-0123

“Every now and then, my legs might bother me a bit, but I wear compression socks, which help keep me in balance. I can swim in the pool again, so I’ve been doing that lately and whatever else my son wants to do.”

With healthy legs and a new job that allows him more time with his son, Clint is enjoying life again. He doesn’t discount the role Dr. Joyce played in that.

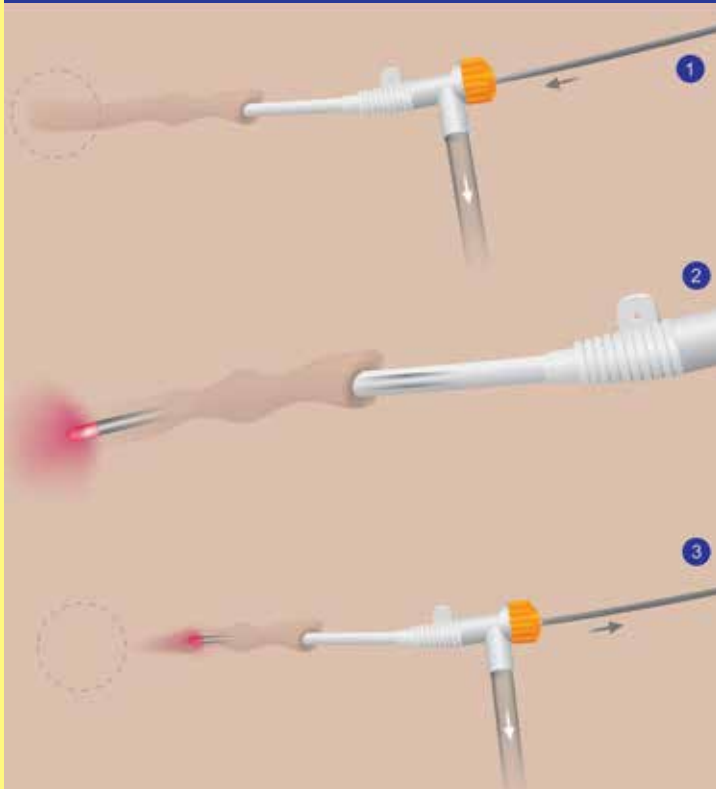
“I really appreciate everything he’s done for me,” Clint concludes. “He’s a great doctor and a really nice guy. In fact, all the people at Joyce Vein & Aesthetic Institute are nice. I highly recommend them.”

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**Douglas H. Joyce, DO, FACOS, FACPh**, is board-certified in phlebology (venous disease), cardiothoracic and vascular surgery, and general surgery. After receiving his doctorate from the Michigan State University College of Osteopathic Medicine in East Lansing, Dr. Joyce completed his internship and surgical residency at Lansing General Hospital. He went on to receive several fellowships, including a surgical fellowship in cardiovascular and thoracic surgery, a special fellowship in cardiopulmonary perfusion from the Cleveland Clinic Foundation and a fellowship in congenital and adult cardiovascular-thoracic surgery from Deborah Heart and Lung Center in New Jersey. Dr. Joyce is a diplomate of the American College of Phlebology, American College of Osteopathic Surgeons and International College of Surgeons. He also is a former assistant clinical professor of surgery for Michigan State’s Department of Osteopathic Medicine and the Rutgers-Robert Wood Johnson Medical School in New Jersey.

During standard laser ablation, a thin laser fiber is inserted along the length of the compromised vein. Laser energy is then used to seal the entire vein, and the fiber is removed.

## Varicose Vein Laser Ablation



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