

'A NEW SET OF SEA LEGS'

Ablation procedures end throbbing pain caused by venous insufficiency

For the fun of it, Sally Pinches and her husband purchased a 38-foot sailboat, which the Central Pennsylvania natives stored at a Maryland marina. Every weekend, the couple traveled to the shore and sailed around Chesapeake Bay. They had bigger plans for the boat, however.



"It was my husband's dream to live on the boat for a year, but I developed breast cancer," recounts Sally, 73. "Once my cancer treatment was completed, we left our jobs and lived aboard our sailboat for almost 10 years.

"During the summers, we sailed up the East Coast through New York City and the New England states. Then every fall, we sailed back down the coast and spent the winters in the Bahamas. We sailed full time for 9½ years — no marinas."

Sally acknowledges their experience at sea was far more challenging than living on land, but she and her husband enjoyed the challenge. The time was very rewarding, she says, but the couple eventually returned to life on solid ground.

"Since the procedures, I've had zero pain and none of the problems I had before."
- SALLY

"We fell in love with Punta Gorda and bought a home here," Sally discloses. "We kept our sailboat out back until we sold it four years ago. Then we bought another one last year for recreational sailing. We went to the Keys for three months on that boat."

Sally still has her sea legs, but for years they were a source of discomfort. First, she was aggravated by severe leg cramps. Then in 2020, her leg pain intensified to a point where it began to interrupt her daily activities.

"I had some varicose veins, but they weren't bulging," Sally describes. "My biggest problem was that my legs just throbbed and throbbed and were very painful. They hurt so bad that it would wake me up at night, and it hurt to walk.

"Most of the time, the pain in my legs was a steady six on a scale of one to 10. But at night, it went up to a nine. It was so bad I couldn't sleep. There were what looked like broken blood vessels on the surface of

my skin, so my legs were all blotchy. They also felt fatigued and heavy, and there was a little bit of swelling."

Sally felt discouraged until she heard about Joyce Vein & Aesthetic Institute, the Punta Gorda practice of Douglas H. Joyce, DO, FACOS, FACPh, a board-certified cardiovascular surgeon who specializes in treating venous disease with minimally invasive procedures.

Dr. Joyce, who addresses all stages of the disease from spider veins to venous ulcers, began his treatment of Sally with a thorough examination that revealed a condition called *venous insufficiency*.

Using Laser Energy

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 saphenous veins.

Leg veins contain one-way valves that prevent blood from flowing backward and pooling. If these valves are weakened or damaged, blood flows back in the veins instead of toward the heart, which is venous insufficiency. As a result, blood collects in the legs, causing swelling and discomfort. It can also result in the formation of varicose veins.

"Sally did not have the major visible signs of venous insufficiency: bulging varicose veins or significant swelling of her legs," Dr. Joyce reports. "She has some minor external veins, but mainly she experienced substantial discomfort in her legs, especially at night.

"Anytime there is nighttime cramping or throbbing, restless legs, heaviness or fatigue, that typically indicates venous insufficiency. I confirmed this through a venous ultrasound mapping of her leg veins.

"The ultrasound showed significant venous insufficiency in Sally's long veins — the great and small saphenous veins — and in her perforator veins. We advised treating all of her diseased veins until she no longer had any venous dysfunction."

To achieve that goal, Dr. Joyce performed two minimally invasive procedures to close the affected veins: *standard laser ablation* and *single-needle laser ablation*, the latter a technique pioneered by Dr. Joyce.

"During standard laser ablation, we slide a laser fiber into and along the length of the vein and use laser energy to seal the entire vein," Dr. Joyce explains. "Blood flow is then rerouted to other healthy veins."

During single-needle laser ablation, Dr. Joyce takes a specifically designed



Sally says her legs are now "perfect," with no pain and none of the problems she had before treatment.

needle and, using ultrasound guidance, places it into the targeted vein, which is typically 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.

"First, Dr. Joyce performed a procedure where he went from my groin to my knee on each leg," Sally recalls. "Then, he went from my knee to my ankle on each leg, so there were four separate little surgeries. I didn't experience much pain with the procedures, and Dr. Joyce guided me the whole way. It was a wonderful experience."

Once Dr. Joyce completes the necessary procedures, he orders another ultrasound to make sure the blood is flowing the correct way and there's no more abnormal venous flow.

"That's our ultimate goal," says Dr. Joyce, who adds that individuals who are concerned about their legs because they have visible or invisible signs and symptoms have nothing to lose by having their veins evaluated.

"We will perform the ultrasound exam," Dr. Joyce states. "If nothing is identified on the scan, we can rule out venous insufficiency as the cause of the symptoms and begin looking elsewhere. But if leaking veins are discovered, we can fix them and make a big difference in the person's life."

"Perfect" Legs

It's been nearly two years since Sally underwent standard ablation and single-needle laser ablation at Joyce Vein & Aesthetic Institute. She achieved a positive outcome that has passed the test of time.

"My legs are perfect," Sally enthuses. "Since the procedures I've had zero pain and none of the problems I had before. The throbbing and discomfort at night are gone. I sleep with no trouble, and I

can walk for miles. And there's absolutely no swelling. Dr. Joyce wasn't sure if the blotchiness on my legs would disappear, but it did.

"My results are amazing. It's like Dr. Joyce gave me a new set of legs. Even though it's been a couple of years since my treatment, I still have no issues with my legs at all."

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**

Sally is just as excited about the physician and staff that provided the care that made such a huge difference in her life.

"Dr. Joyce is wonderful and compassionate," she raves. "He sat down with my husband and me and explained everything. I trusted him implicitly because he knew what he was talking about. I can't say enough good things about him. He changed my entire life because I don't have pain in my legs anymore.

"The staff at Joyce Vein & Aesthetic Institute is wonderful as well. They know me by name when I walk in the door. I highly recommend Dr. Joyce and his practice to anybody that has vein issues."

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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.

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