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### Vulval Varicosities (and other varicosities)

“Progesterone relaxes the smooth muscles of the veins and results in sluggish circulation. The valves of the dilated veins become inefficient and varicosities result. Varicose veins may occur in the legs, anus and vulva. The midwife must be aware of mothers at risk, for example, those with a family history of varicose veins and those doing work which demands long periods of standing or sitting. Exercising the calf muscles by rising onto the toes or making circling movements with the ankles will help the venous return. In the early days of pregnancy, resting with the legs vertical against the wall for a short time will drain the veins. Support tights increase comfort and should be put on before rising or after resting with the legs elevated. The avoidance of constipation by fiber in the diet and adequate fluids will reduce exacerbation of hemorrhoids. If appropriate, topical applications should be recommended and medical advice sought. Vulval varicosities are rare and very painful. A panty-girdle or sanitary pad may give some support. The midwife should listen and offer appropriate advice. She should also be aware of the risk of hemorrhage from a ruptured vein during delivery.” *Myles Textbook for Midwives, Bennett and Brown, ppg. 120-121*

“Varicosities may occur in the labia or the legs. Hemorrhoids are one form of varicosity, and the tendency to varicosities is partially familial. During pregnancy, progesterone relaxes venous walls, and the venous return from the lower extremities is compromised by the growing uterus, so the venous system is under increased pressure and varicosities may flourish. Excess weight, heavy lifting, and constipation may also play a part in the formation of varicosities. Varicosities predispose the woman to thrombus formation. After delivery, the varicosities will improve, though with the next pregnancy, they will return and may worsen.

#### Management:

1. Provide the following comfort suggestions and advice: Wear maternity support hose or ace wraps applied in the morning after the legs have been elevated. Avoid constructive clothing. Avoid crossing the legs. When possible, sit with legs raised rather than standing. Engage in mild exercise such as walking. Avoid long periods of standing. Spend time lying in the left later position, which removes the weight of the uterus from the inferior vena cava, improving return to the heart from the legs. Several times a day, lie on the floor with legs elevated against the wall, and if vulvar varicosities are present, elevate hips as well. For a woman with vulvar varicosities: wear a foam rubber pad held in place with a maternity belt or two sanitary napkins on a sanitary belt for support. Ice packs decrease swelling.
2. Teach the woman the signs and symptoms of deep vein thrombosis and to avoid injury to the varicosities that may cause thrombus formation.

3. During delivery, avoid laceration to the vulvar varicosity that may result in hemorrhage. Progressive ambulation should occur soon after delivery.
4. Complementary measures:
  - a. Homeopathy: some experts suggest homeopathic remedies for varicosities.
  - b. Chinese medicine: Acupuncture and shiatsu have been used with success in the treatment of varicosities.
  - c. Nutritional suggests: Vitamin C is suggested by many herbalists. Vitamin E is also suggested (not more than 400 IU/day). Bioflavonoids are said to strengthen capillaries. Raw garlic and onions are considered powerful stimulants of circulation that improve elasticity of vessels. Okra, buckwheat, oats, wheat germ and dark leafy vegetables are believed to strengthen the circulatory system as a whole.
  - d. Herbs: Comfrey can be used in a compress for varicosities. Comfrey is contraindicated during pregnancy because of its hepatotoxic effects except in small doses for limited period of external use only. Horse chestnut may be taken internally to strengthen the venous walls and may also be used in a compress. Nettle leaf tea (1 cup/d) is high in vitamin C and bioflavonoids and increases the elasticity of the vessels.”

*A Midwife's Handbook, Sinclair, Constance pps. 45-46*

Shonda Parker, *The Naturally Healthy Pregnancy*, pg. 147-148

“Nutritional Supplement Recommendations:

1. Topical treatment can provide temporary relief while mom is changing to healthier dietary habits. A witch hazel bark infusion can be used by soaking gauze in the infusion and applying to hemorrhoids.
2. An ointment or infusion (for compresses) made of Horse chestnut, mullein, white oak bark and yarrow is beneficial to help shrink hemorrhoidal tissue. The cream Cellu-Var by Enzymatic Therapy may be used as well as the capsules per recommendation by Dr. Michael T. Murray, N.D. during a phone conversation.
3. The liquid TincTract Circulatone by Mother's Choice b Liquid Light is a formula containing Bilberry, Rose Hips, Cleavers and Ginkgo to enhance circulation and decrease varicosities.
4. Rutin supplements can help to shrink and tone blood vessels. 500 mg daily (NOT for use in the first trimester).
5. Butcher's broom has been termed a “phlebotherapeutic agent”—used to treat circulatory disorders especially varicose veins and hemorrhoids. Studies confirm this definition with patients improving when treated with Butcher's Broom. Butcher's broom raises the blood pressure making it useful for those with low blood pressure. Broom gently raises the blood pressure by constricting the peripheral blood vessels resulting in an overall decreased blood volume. Although there are no safety restrictions on butcher's broom during pregnancy, there may be a safety concern due

- to decreased blood volume. The standard dosage is two 250-500 mg capsules two to three times daily.
6. Bilberry has been shown in a study of pregnant women to reduce varices and various blood problems while exhibiting no side effects in mother or baby. Two 450 mg capsules three times daily.
  7. Mom can apply calendula lotion by putting the lotion on a cotton swab and applying to sore tissue around or in the rectum after bowel movements.”

Weed, Susan *Wise Woman Herbal for the Childbearing Year*, ppg 29-30  
“Commercial preparations such as Preparation H, Americaine and Anusol should not be used during pregnancy because they contain local anesthetics and mercury which are absorbed through the skin and can be harmful to the fetus.

#### Diet for Varicosities:

- Raw garlic, onions and lecithin (especially the liquid form) help vein maintain or regain elasticity. Eat them daily.
- Okra, buckwheat, oats, wheat germ and green leafy vegetables nourish and strengthen the entire circulatory system.
- Food rich in vitamins A, C, E, and B complex (B6 especially) are recommended for all circulatory problems.
- Beets, grated and steamed, cleanse the liver and promote easy elimination, thus relieving stress on hemorrhoids.
- Vitamin E supplements are helpful in preventing and reducing varicosities; up to 600 IU daily is considered safe during pregnancy..
- Avoid all spices, especially Cayenne and Black Pepper and hot sauces and curries. These increase congestion in the offending vein often causing bleeding from the hemorrhoids.

#### Herbs for Varicosities:

- Oatstraw tea or infusion is useful to strengthen the capillaries. Drink one or two cups daily; there is no known overdose.
- Nettle leaf infusion improves the elasticity of the veins. Use at least one cup per day throughout pregnancy and lactation
- Parsley raw or as a tea is beneficial to the veins. Use it abundantly in salads or drink up to a half cup of tea daily.
- Avoid internal use of Aloe vera products, and tea of Yellow or White Sweet Clover, as these herbs draw blood to the lower half of the body and can increase the problem. (Red Clover tea doesn't)

#### First Aid for Varicose Veins

- Apply Witch Hazel with a plant mister or a saturated cloth. The astringency is pain relieving and helps tighten the tissues and reduce the swelling.
- Prepare an infusion or fresh poultice of Comfrey, Yarrow, or Mullein leaves and apply as a compress to ease achiness and tighten veins.

- Wash varicosities with Oak bark infusion or apple cider vinegar to soothe pain.
- Homeopathic Hamamelis 30x
- Herbal Sitz baths. Witch Hazel is undisputedly the best herb for this, but Plantain leaves, Comfrey root, white oak bark, sea grape leaves/bark or other strong astringents may be substituted. Prepare an infusion of the herb, making 8 cups (4 ozs. Of dried herb in a half gallon of boiling water, steeped for 8 hours). Separate the liquid from the herbs and pour it into a shallow basin or pan. Sit in this for 15 minutes at least twice a day. “

Frye, Anne *Holistic Midwifery, Vol 1* ppg 1057-1058

“Varicose veins are enlarged blood vessels that have weakened valves.

Varicosities are most commonly found in the legs, vulva or vagina. However, they may more rarely develop on the torso or breasts as well as elsewhere on or within the body. They are by far the most common vascular disorder that occurs during pregnancy. The valves normally help in directing blood flow; if they weaken, pooling of blood and subsequent enlargement of the vessels can occur. Pregnancy accentuates this problem due to the expansion of the blood volume in combination with the indiscriminate hormonal relaxation of muscles. Additionally, as pregnancy advances, the weight of the uterus impedes blood flow from the lower extremities. These factors increase venous distention, which is further aggravated if veins are not given proper support.

As pooling increases, clots may form, causing firm lumps and heat in the area. If they persist, redness, tenderness and swelling may occur. Blood stasis may lead to infection or thrombophlebitis (blood clots). Moist hot packs may be applied to problem areas, but under no circumstances should vessels be massaged. This could break up clots and cause an embolism. Exercise such as walking and swimming will keep the blood moving and minimize clot formation. Women need to engage in light activity after birth to prevent blood pooling in the veins.

Women who are prone to clots should know that airline travel encourages their formation. Shepherd’s Purse tincture should not be used in these women; it may lead to such an increase in coagulation ability that clots form more easily.

Vulval and vaginal varicosities may only be apparent during pregnancies. Large vulval varicosities can be supported by wearing a sanitary pad with a sanitary belt; this will provide counterpressure and reduce discomfort. Trauma to vulval and vaginal varicosities may occur during birth. If one ruptures, a hematoma will be the likely result; if there are lacerations, sewing around a varicosity can be tricky. Some therapies that may minimize varicosities, regardless of location, are:

- Nettle infusion (1-2 cups daily) or freeze dried Nettles in capsules (start with 3 daily). Nettles heals the vascular and renal systems and is a nutritive herb. There are no contraindications to its use.
- Collinsonia Root tincture or tablets (available through Standard Process Labs) can be used. Start with 1 tablet 3 times daily and see if the veins improve. Increase up to 6 tablets a day, if needed. (Contraindicated in women with a history of kidney problems.)

- An abdominal support may help prevent further damage and minimize discomfort.
- Vitamin C with bioflavonoids (at least 500 mg and up to 3 grams daily); Rutin (a bioflavonoid) 50 mg (not in first trimester)
- Vitamin E, 400 to 1000 IU daily
- Hawthorne Berry extract (1/4 tsp 2-3 times daily)
- Moist towels applied daily (5 minutes with hot towels alternating with 1 minute of cold towels)
- Avoiding heavy lifting
- Avoiding constipation with plenty of fluids and fiber in the diet.
- Avoidance of restrictive pants or stockings which go part way up the leg.
- Witch Hazel bark infusion (1 oz. herb to 1 pint boiling water, steeped for 10 hours) can be used on cloths to apply to the veins.
- If a vein is an open sore, soaking the area in a combination of comfrey and plantain infusion twice daily and following the vitamin recommendations above. The woman should also have it checked by another practitioner.
- Vulval varicosities can be supported with old-fashioned sanitary napkins worn securely against them and held in place with a sanitary belt.”

1: [Obstet Gynecol.](#) 1996 May;87(5 Pt 1):786-8

## **Treatment of vulvar varicosities by injection-compression sclerotherapy and a pelvic supporter.**

[Ninia JG, Goldberg TL.](#)

Department of Obstetrics-Gynecology, State University of New York at Stony Brook, Stony Brook School of Medicine, USA.

Injection of vulvar varicosities with a 1% solution of sodium tetradecyl sulfate and subsequent compression therapy with a pelvic supporter was used to treat five women with symptoms of vaginal pressure, swelling, and pain. Three patients were premenstrual, and the two others were approximately 8 weeks post-vaginal delivery. Physical examination was performed in the upright as well as the dorsal lithotomy positions, and injection was given in the supine position. All patients noticed marked improvement in symptoms after treatment. We conclude that this technique has potential as a simple, effective way to treat symptomatic vulvar varicosities. PMID: 8677087 [PubMed - indexed for MEDLINE]

Anecdotal:

‘After hearing that Sylyna (either on this group or on SageFemmes) wrote about Noni juice, and her success with it and varicosities, I decided to try it. I also did some online research and found more positive statements. Sylyna said her clients bought the stuff at Walmart, so I assumed that perhaps a better quality might give

even better results. Not always the case I know, but I thought I'd try. I have a number of clients who suffer from varying degrees of varicose problems.

I ordered the capsule form on Noni from Nature's Sunshine and gave it to my two present clients. One called me overjoyed, excited, just plain beside herself. She had already begun having pain at 14wks into this pregnancy. She had begun taking the Noni on Sunday evening, and by Thurs, she had no more pain from the pressure in her veins. I've not talked to the other client yet.”