CONDITION

Spider veins

Spider veins are small, widened blood vessels visible through the skin.

WHAT IT IS
Small widened blood vessels visible near the skin

BODY SYSTEM
Skin, veins and circulation

MAIN SYMPTOMS
Visible branching vessels, aching, itching, burning

WHAT CAUSES IT
Widened surface vessels, often from several factors

HOW IT IS DIAGNOSED
Skin and vein examination

MAIN TREATMENT
Reassurance, sclerotherapy, laser or light treatment

CAN IT BE CURED?
Sometimes - individual vessels can be closed

IS IT AN EMERGENCY?
No - clot symptoms need separate urgent care

LONG-TERM OUTLOOK
Usually harmless, though new vessels may appear

Overview

Spider veins are tiny blood vessels that can be seen through the skin. They often look like fine red, blue or purple lines. The lines may branch out like a web or form a small cluster.

The medical term is telangiectasia . Spider veins are most common on the legs and face, but they can appear elsewhere. They lie closer to the skin than varicose veins and are much smaller.

Spider veins are usually harmless. For many people, the main concern is how they look. Some people also notice aching, itching, burning or heaviness around affected areas, especially on the legs.

Leg spider veins can be linked to pressure within the veins. Veins carry blood back toward the heart, and small valves help keep that blood moving in the right direction. If pressure rises or

the valves do not work as well, surface vessels may widen. However, having spider veins does not always mean that you have a significant circulation problem.

Spider veins are different from spider angiomas . A spider angioma has a central red spot with fine vessels radiating from it. Spider angiomas have different causes and are assessed differently.

Symptoms

The main sign is a group of visible vessels just under the skin. They may be:

Leg spider veins commonly appear on the thighs, behind the knees, around the ankles or along the sides of the feet. Facial spider veins often occur around the nose, cheeks or chin.

Most do not cause physical symptoms. When symptoms occur, they may include mild aching, throbbing, burning, itching or a feeling of heaviness. These feelings may be more noticeable after standing for a long time.

Marked leg swelling, severe pain, open sores or major skin changes are not typical of simple spider veins. Those symptoms can point to another vein condition and should be assessed.

- Red, purple or blue
- Straight, branching or web-shaped
- Flat rather than raised
- Limited to a small patch or spread across a wider area

Causes and risk factors

Spider veins form when small blood vessels near the skin widen and remain visible. There is not always one clear cause.

Family history matters. You may be more likely to develop spider veins if close relatives have them. Age also plays a part because vessel walls and vein valves can become less effective over time.

Other factors associated with leg spider veins include:

Pregnancy can increase blood volume and pressure in the leg veins. Hormonal changes may also relax vessel walls. Some pregnancy-related spider veins become less noticeable after birth, while others remain.

On the face, long-term sun exposure can make small surface vessels more visible. Rosacea, a

condition that causes facial redness and sensitivity, can also lead to visible vessels. Skin injury and some medical treatments may contribute.

Rarely, widespread visible vessels occur as part of an inherited or medical condition. This is more likely to be considered if they appear in unusual places or occur with repeated nosebleeds, easy bleeding, liver-related symptoms or a strong family history of similar problems.

- Pregnancy and hormonal changes
- Long periods of standing or sitting
- Previous injury or surgery to the leg
- Varicose veins or increased pressure in deeper surface veins
- Higher body weight, which can increase pressure on leg veins

Diagnosis

Spider veins can usually be identified by examining the skin. A healthcare professional may ask when they appeared, whether they cause discomfort and whether you have swelling, varicose veins, skin changes or a history of blood clots.

No blood test is needed to confirm ordinary spider veins.

An ultrasound is not routinely needed for a small, symptom-free patch. A duplex ultrasound may be considered if you also have significant pain, swelling, varicose veins or skin damage, or if veins return after treatment. This painless scan shows blood flow and checks whether vein valves are allowing blood to flow backward, known as venous reflux.

Facial vessels may be assessed for rosacea, sun damage or another skin condition. A sudden or widespread change may lead to further questions or tests based on your other symptoms.

Treatment and management

Spider veins do not have to be treated if they are not causing problems. Reassurance is a reasonable option because the vessels are usually harmless.

If your legs feel uncomfortable, regular walking and avoiding very long periods in one position may help with circulation. Raising your legs when resting may reduce heaviness. Compression stockings can help some people with leg symptoms, particularly when another vein problem is present. They should fit correctly, and they do not remove existing spider veins.

Procedures are available if appearance or persistent discomfort is affecting you.

Sclerotherapy is commonly used for leg spider veins. A trained professional injects a solution into the vessel. This irritates its inner lining, causing the vessel to close. The body gradually absorbs it, and the visible line fades over the following weeks or months. More than one session may be needed.

Temporary effects can include stinging, bruising, swelling, darker skin marks or a network of very fine new vessels called matting. Less common complications include skin injury, inflammation, allergic reactions or a blood clot. A treatment assessment should cover your health history and the expected benefits and risks.

Laser or light treatment sends focused energy through the skin to heat and close small vessels. It may be useful for very fine leg vessels and is often used for facial vessels. Treatment can feel like brief snaps or stings. Redness, swelling, crusting and temporary colour changes can occur. Changes in skin colour are more important to consider in darker skin tones, so experience with your skin type matters.

Larger feeding veins may need attention before tiny branches are treated. Closing only the visible vessels may give a disappointing result if pressure from an underlying vein continues.

Creams, supplements and home devices do not close established spider veins. Cosmetic camouflage or body makeup can cover them without a procedure.

Complications

Spider veins themselves rarely cause serious medical complications. They do not usually turn into varicose veins, although both can occur because of shared risk factors.

A surface vessel can occasionally bleed after the skin is cut or injured. Firm pressure usually controls minor bleeding. Bleeding that does not stop needs urgent medical attention.

Discomfort attributed to spider veins may actually come from larger veins or another leg problem. Ongoing swelling, skin thickening, brown discolouration around the ankles or an open sore suggests more advanced vein disease rather than simple spider veins.

Treatment can cause complications as well as temporary side effects. These include persistent pigmentation, small scars, skin ulceration, new fine vessels and, rarely, a blood clot. A clinician carrying out the procedure should explain how these risks apply to the treatment being considered.

Prevention

Spider veins cannot always be prevented. Family history, ageing and hormonal changes cannot be controlled, and new vessels may appear even after successful treatment.

Movement supports blood flow in the legs. If you sit or stand for long periods, taking regular walking or movement breaks may reduce prolonged vein pressure. Regular physical activity and maintaining a weight that is healthy for you may also support general vein health, but they cannot guarantee prevention.

Compression stockings may help manage symptoms in some people. They have not been shown to permanently remove spider veins, and they may not prevent every new vessel.

Protecting your face from excessive sun exposure may limit sun-related vessel damage. Shade, protective clothing and sunscreen can also reduce other forms of skin damage.

Living with it and what to expect

Untreated spider veins often remain visible for years. They may stay much the same or gradually increase in number. They do not usually restrict work, exercise, travel or everyday activities.

Symptoms can change with circumstances. Leg aching may be more noticeable after prolonged standing, during warm weather or during pregnancy. New vessels can develop as you age, even if earlier ones have been treated.

After sclerotherapy or laser treatment, veins do not disappear immediately. They usually fade gradually over weeks or months. Some remain visible, and several sessions may be needed. Treated vessels may stay closed, but treatment does not stop different vessels from forming later.

Follow-up after a procedure is generally routine. You may be asked to return so healing and results can be checked. Contact the treatment service sooner if you develop increasing pain, marked swelling, spreading redness, a skin wound or another unexpected reaction.

Most people with spider veins continue their usual lives without medical limitations. Whether to have treatment is usually a personal choice based on symptoms, appearance, cost, procedure risks and the likelihood that new veins may appear.

When to get medical help

Arrange a routine appointment if:

Seek urgent medical care for sudden swelling, pain, warmth or redness in one leg. These can be symptoms of a deep vein thrombosis, which is a blood clot in a deeper vein. Spider veins do not usually cause this, but the symptoms should not be assumed to come from visible surface vessels.

Call emergency services for sudden breathlessness, chest pain, coughing up blood, collapse or fainting. These can be signs of a blood clot that has travelled to the lungs.

Get urgent help if a vein is bleeding and firm, continuous pressure does not stop it.

- The veins cause persistent aching, itching or burning
- You also have leg swelling, larger varicose veins or ankle skin changes
- A patch changes quickly or many vessels appear without a clear reason
- You have recurrent nosebleeds or a family history of unusual bleeding
- You are considering a cosmetic procedure and want the veins assessed

Common questions

Are spider veins dangerous?

Most are harmless and mainly affect appearance. They do not usually interfere with circulation. Painful swelling, skin damage or sudden one-sided symptoms are not typical and need separate assessment.

Will spider veins go away on their own?

They often remain once they have formed. Some that develop during pregnancy may fade after birth. Established vessels can be closed with procedures, but new ones may appear later.

What is the difference between spider veins and varicose veins?

Spider veins are small, flat vessels within or just under the skin. Varicose veins are larger, often raised or twisted veins. Varicose veins are more likely to cause heaviness, swelling and complications related to poor vein function.

Can creams get rid of spider veins?

Creams cannot close or remove an established vessel. Makeup can hide the colour, and skin products may help related facial redness, but procedures such as sclerotherapy or laser treatment are used to close the vessels themselves.

Does spider vein treatment hurt?

Sclerotherapy can cause brief needle discomfort, stinging or cramping. Laser treatment may feel like repeated hot snaps against the skin. The level of discomfort differs by treatment area

and method, and soreness is usually temporary.

Do spider veins come back after treatment?

A successfully closed vessel may remain closed, but other vessels can become visible. Underlying vein pressure, hormones, ageing and inherited tendencies can all contribute to new spider veins.

Sources

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