# PM&R knowledge NOW\*

A resource on Physical Medicine and Rehabilitation (PM&R) topics developed by the American Academy of Physical Medicine and Rehabilitation (AAPM&R)

## **Venous Insufficiency**

**Condition**: Venous insufficiency is a common cause of swelling, pain or discoloration of the legs because blood is not circulating properly from the legs back to the heart.

**Background**: There are many reasons that reduce blood circulation from the legs to the heart. Enlarged veins called varicose veins, inflammation with or without clots in the veins called phlebitis, excessive body weight and pregnancy commonly contribute to this problem. People who must sit or stand for long periods of time can develop problems with blood circulation in the legs.

Risk Factors: Any condition that causes a blood clot to form in a vein is a risk factor.

**History and Symptoms:** Large veins in the legs that look "ropy," swelling, feeling of leg, ankle or foot tightness, muscle cramps, pain, dry, flaky skin, a brownish skin discoloration below the knees, a wound that does not heal are all signs that there may be a problem with your circulation.

**Physical Exam**: Your healthcare provider will look at your legs, compare the two for size and shape, may push a finger onto the front of your leg to see if the impression persists after the finger is removed, may press on the veins and calf muscles to see if there is pain or hard lumps.

**Diagnostic Process**: A referral to a Physical Medicine and Rehabilitation doctor is a good first step because they will consider all the medical conditions that need attention and can provide access to all the therapists that you may need. After a detailed physical examination, a duplex ultrasound scan can show blood flow in the legs, the shape of the valves of the veins and a blood clot, if present. After that, a comprehensive approach to management is the best way to treat the current problem and prevent problems in the future. For example, you may need referral to a physical therapist to assure that you are optimizing and correctly completing your exercises and using any devices correctly. You may need a referral to occupational therapy or lymphedema management; these recommendations are best when part of a comprehensive management plan.

**Rehab Management**: It is always best to maintain a healthy weight, eat a nutritious diet, exercise, quit smoking, and avoid prolonged standing, sitting and trauma to the legs. All the factors contributing to the circulation problem should have a workable and maintainable management plan that may include referral to specialized therapy, elastic compression garments or electrical stimulators.

**Other Resources for Patients and Families**: The U.S. National Library of Medicine offers <u>information</u> <u>about vascular diseases</u> that can help patients and their families. Other sites include medlineplus.gov; hopkinsmedicine.org; medicinenet.com and webmd.com.

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## **Frequently Asked Questions**

### What is PM&R?

Physical medicine and rehabilitation (PM&R), also known as physiatry, is a primary medical specialty that aims to enhance and restore functional ability and improve quality of life to those with injuries, physical impairments or disabilities affecting the brain, spinal cord, nerves, bones, joints, ligaments, muscles and tendons. PM&R physicians, known as physiatrists, evaluate and treat the whole body, maximize patients' independence in their daily life and are experts in designing comprehensive, patient-centered treatment plans to empower patients to achieve their goals. By taking the whole body into account, they can accurately pin-point problems, decrease pain, assist in recovery from devastating injuries and maximize overall outcomes and performance with non-surgical and peri-surgical options. To learn more, visit www.aapmr.org/aboutpmr.

### What makes PM&R physicians unique?

PM&R physicians' training focuses not just on treating medical conditions, but on enhancing the patient's performance and quality of life in the context of those medical conditions. They focus not only on one part of the body, but instead on the development of a comprehensive program for putting the pieces of a person's life back together – medically, socially, emotionally and vocationally – after injury or disease. PM&R physicians make and manage medical diagnoses, design a treatment plan and prescribe the therapies that physical therapists or other allied therapists perform or that are carried out by the patients themselves. By providing an appropriate treatment plan, PM&R physicians help patients stay as active as possible at any age. Their broad medical expertise allows them to treat disabling conditions throughout a person's lifetime.

#### Why see a PM&R physician?

A PM&R physician will thoroughly assess your condition, needs, and expectations and rule out any serious medical illnesses to develop a treatment plan. By understanding your condition and goals, you and your PM&R physician can develop a treatment plan suited to your unique needs.

#### How do I find a PM&R physician near me?

Visit www.aapmr.org/findapmrphysician or contact your primary care physician for a referral.