



VENOUS SYMPOSIUM 2018

PREVIEW CASE PRESENTATION · JANUARY 2018 VOLUME



A powerhouse in **venous education**



^{9th} ANNUAL
Venous Symposium
New York



APRIL 5-7, 2018 NEW YORK, NY
SHERATON NEW YORK TIMES SQUARE HOTEL

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VENOUS SYMPOSIUM**

PATIENT PRESENTS

A **62 year old female** presented with bilateral lower limb varicose veins. Her symptoms include achiness, heaviness, and fatigue. She is also complaining of left limb cramping.



Saphenous Trunk
Varicosities

PERTINENT SYMPTOMS

Saphenous Trunk
Varicosities

- Her symptoms are more pronounced with **prolonged standing**, and relieved with **leg elevation**.
- Her symptoms interfere with work.
- She has not used compression stockings.

PATIENT HISTORY

Sapheoous Trunk
Varicosities

Medical History:	Hypertension
Social History:	Non-smoker, social drinker
Family History:	Her mother had varicose veins
Allergies:	None
Medications:	Amlodipine-Valsartan

PHYSICAL EXAM

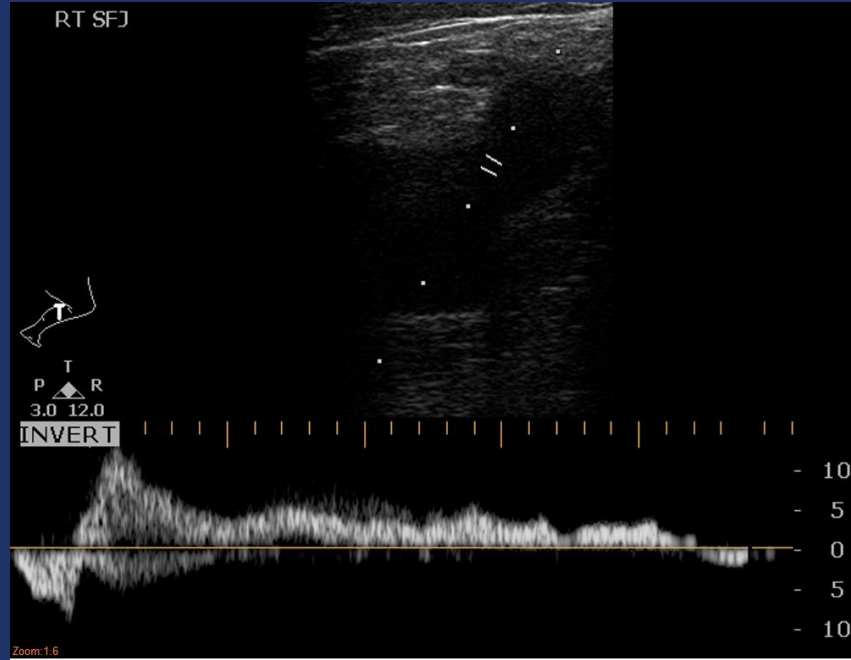
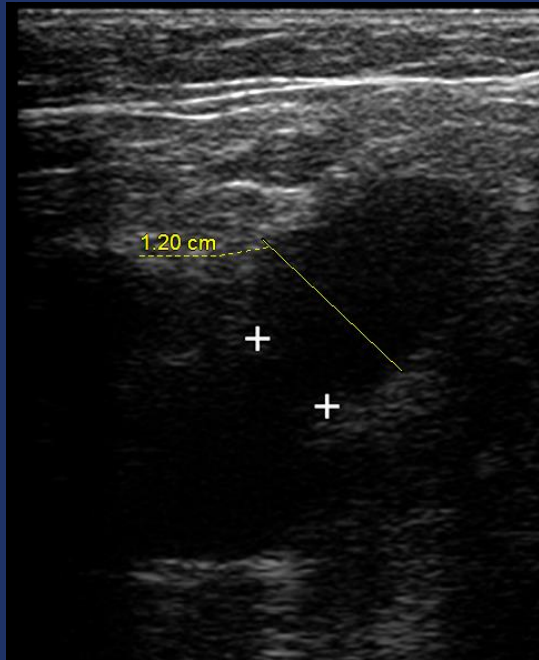
Saphenous Trunk
Varicosities

- Both lower limbs were warm and well perfused
- Distal palpable pulses
- **Prominent varicosities on the left anterior calf and right medial and lateral calf.**
- No skin changes or ulcers. No edema.
- Motor and sensory were intact

IMAGING

Right SFJ Reflux

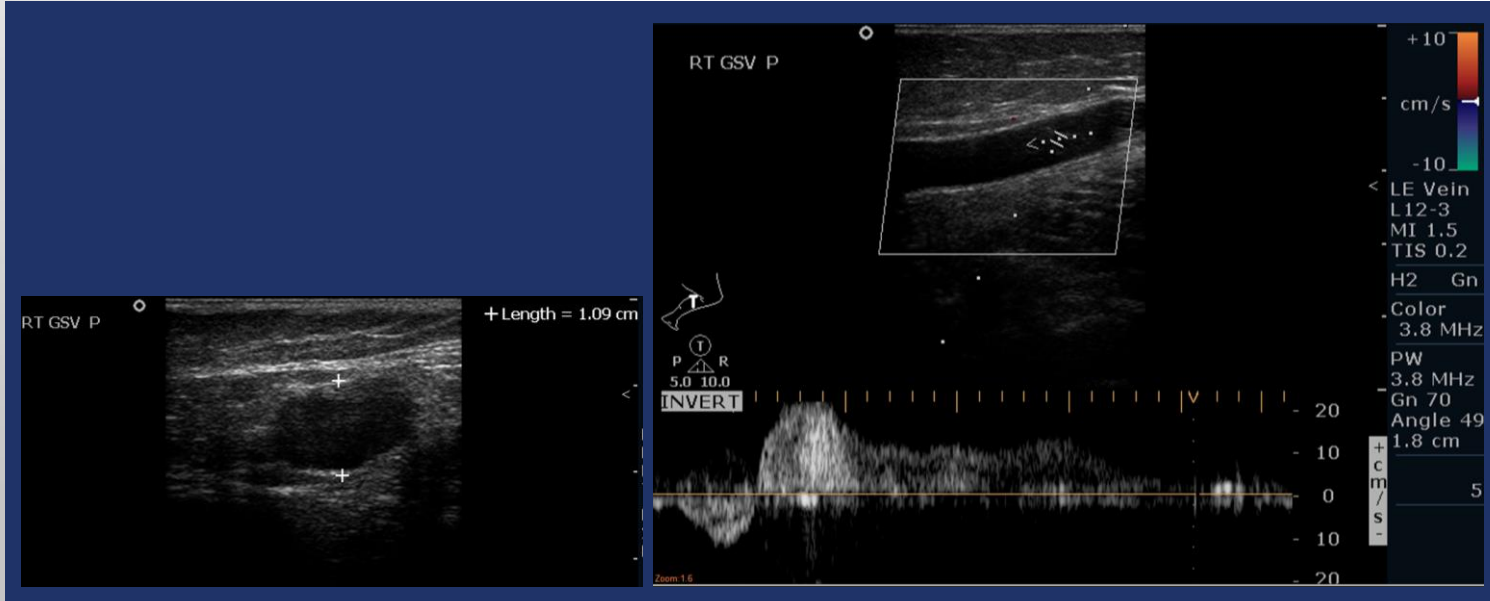
Sapheoous Trunk
Varicosities



IMAGING

Right Great Saphenous Vein – Proximal Thigh

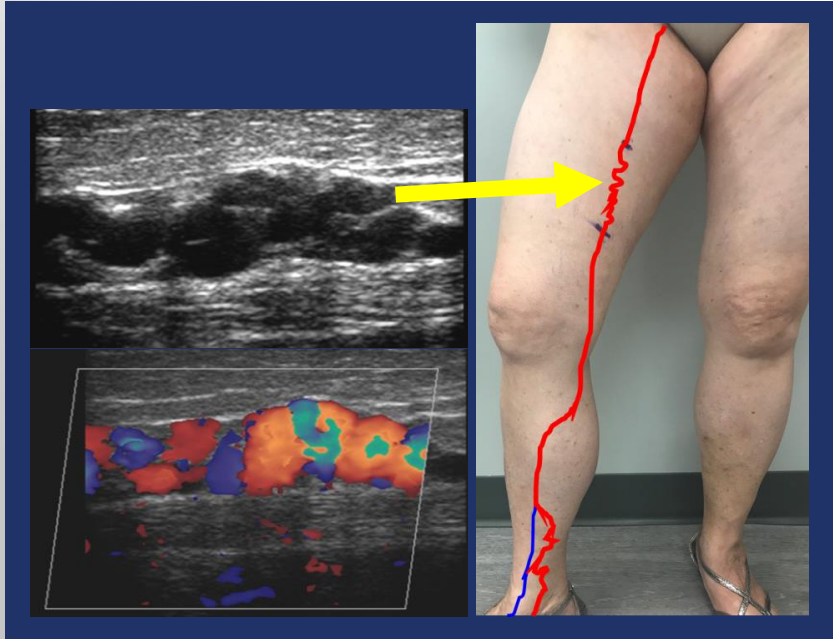
Sapheoous Trunk
Varicosities



IMAGING

Right Great Saphenous Vein – Mid Thigh
Saphenous Trunk Varicosities

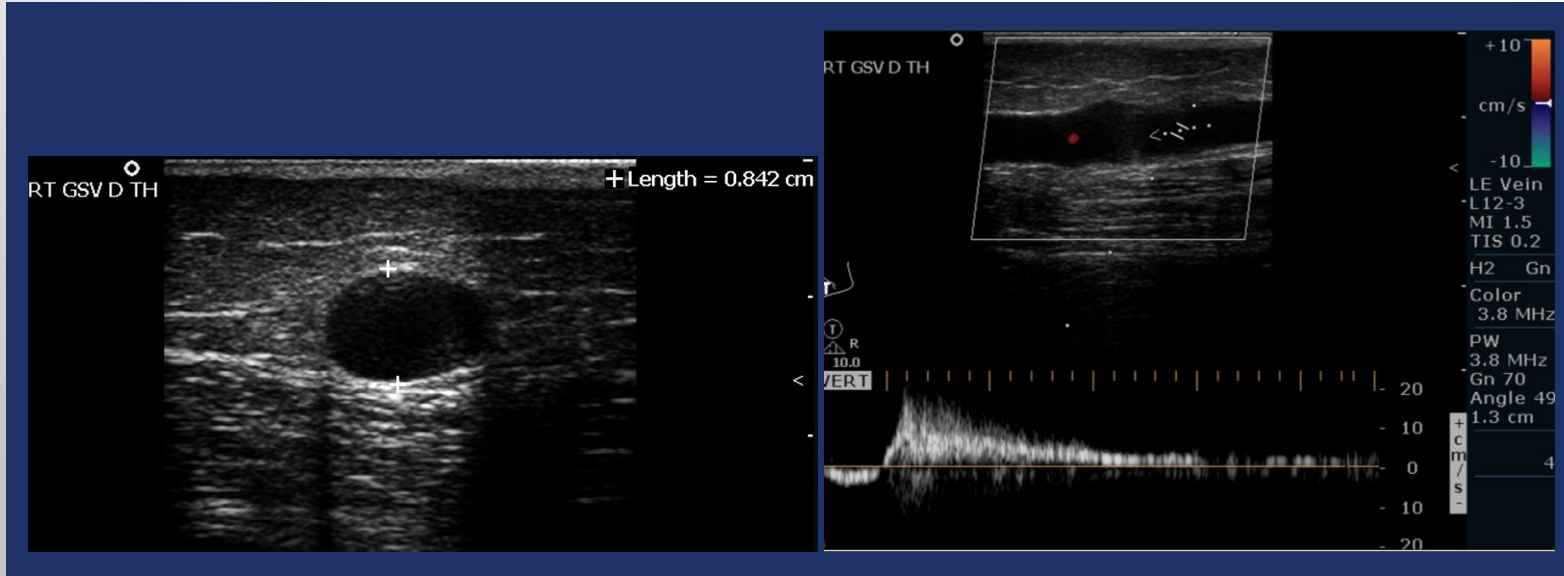
Saphenous Trunk
Varicosities



IMAGING

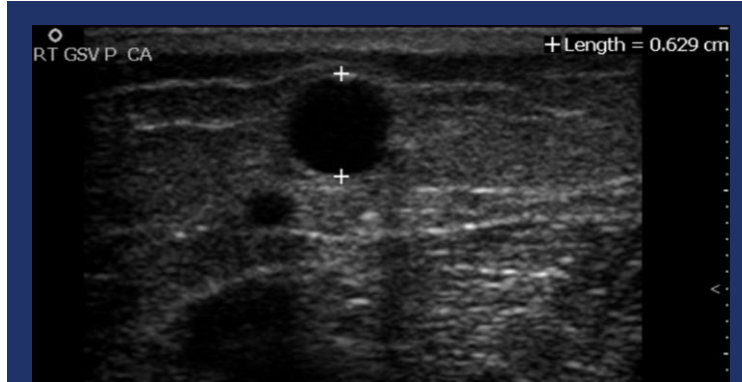
Right Great Saphenous Vein – Distal Thigh

Sapheoous Trunk
Varicosities

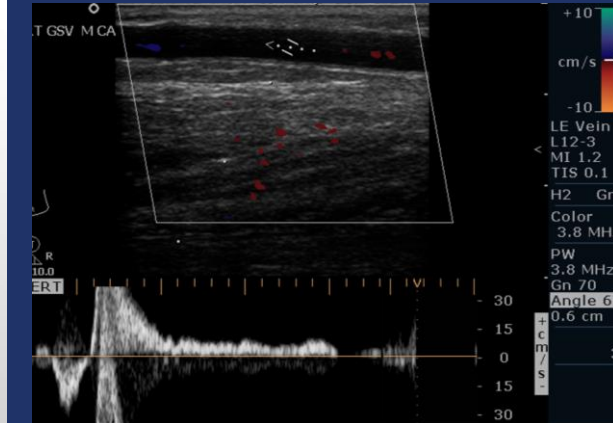


IMAGING

Right Great Saphenous Vein
Proximal Calf



Right Great Saphenous Vein
Mid Calf



Sapheoous Trunk
Varicosities

CLINICAL CLASS/SEVERITY

Saphenous Trunk
Varicosities

Right limb
Left limb

C2s Ep As Pr
C2s Ep As Pr

VCSS
VCSS

Right Limb 4
Left Limb 4



TREATMENT OPTIONS

What would be the best treatment option at this point?

- A. Continue with compression stockings, ultrasound guided sclerotherapy, and stab**
- B. Plan for endovenous laser ablation of GSV of the along with ultrasound guided sclerotherapy, and stab avulsion phlebectomies.**
- C. Plan for RFA of GSV, stab avulsion phlebectomies, with ultrasound guided sclerotherapy.**
- D. Plan for ultrasound guided sclerotherapy and stab avulsion phlebectomies.**

TREATMENT PLANNING

Sapheoous Trunk
Varicosities

The decision was made to proceed with **EVA of GSV, stab avulsion phlebectomies, with ultrasound guided foam sclerotherapy.**

TREATMENT

Dual Access via Proximal and Distal GSV

Saphenous Trunk
Varicosities





DISCUSSION

A prospective study including patients with primary venous reflux, CEAP classes C2-C6 was studied. The varicose segments prevalence in the GSV and SSV trunks was small. These segments were usually located in the thigh, calf, and the knee. Also, varicosities were found more often in the GSV than in the SSV. The average length of the varicose trunk was around 4cm.

Labropoulos N et al . The distribution and significance of varicosities in the saphenous trunks. J Vasc Surg 2010;51:96-106.

CONCLUSION

Saphenous Trunk
Varicosities

In this study, it was found that the **prevalence of saphenous trunk varicosities was <7%**. The saphenous varicosities were defined as 2 or more dilatations in continuity.

Dilatations were identified as venous diameters 1.5-3 times the baseline adjacent diameter.

It was found that the **saphenous veins diameters increased with CEAP class**. This supports the association between saphenous diameters and subsequent reflux. However saphenous trunks with normal or even small diameter may have reflux.

IMPLICATIONS

For Clinical Practice

Saphenous Trunk
Varicosities

Regarding EVA procedures, these findings indicate that negotiation of wires and catheters through the saphenous trunks should be **relatively easy in >95% of patients.**

In patients where the wire or catheter cannot cross a varicose trunk then a **double puncture technique** is used as shown in this clinical case.

The saphenous trunks could still be used in many patients requiring bypass as in the **vast majority the varicosities are found in the tributaries.**

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