OP 75

Comparison of Endo Venous Laser Therapy (EVLT) alone or in combination with phlebectomy(MSA) or chemical ablation(ST) for long saphenous and tributary veins. Is there a difference?

S Vinojan, TD Gooneratne, CP Ediriweera, S Prasath, RA Ubayasiri

Teaching Hospital, Karapitiya

Objectives

EVLT is the treatment of choice for incompetent long saphenous veins(LSV). Tributary veins are treated either with MSA or ST as a secondary procedure. Combination of EVLT with MSA/ST at the same setting under tumescent anaesthesia(TA) is advantageous but debatable. We compared the efficacy and safety of MSA or ST of tributary veins when combined with EVLT.

Methods

A retrospectiveanalysis was conducted on 209 limbs with incompetent LSV varicose veins undergoing EVLT +/- ST or MSA. All surgeries were performed under TA, as a day surgery. Clinical and duplex assessment was performed pre-operatively and during follow-up Treatment options were decided based on pre-operative assessment. QOL outcome was assessed using venous clinical severity score(VCSS).

Results

EVLT alone, EVLT+MSA, EVLT+ST was performed on 55, 72 and 82 limbs respectively. 25/209 were recurrent disease following previous saphenous surgery.

177/209 limbs presented with complicated varicose veins(C4-C6; 84%; CEAP). The need for tributary surgery was an independent predictor for healed/active ulceration($p=0.03$).

Mean follow-up duration was 8.4 months(1-27). There were no reports of DVT, PE or skin necrosis. Minor complications of EVLT [skin blistering(1%), haematoma(3%), erythema/transient induration(5%) were equally distributed between groups. Addition of MSA was associated with an increase in skin paraesthesia and haematoma($p<0.05$), whilst ST was associated with skin pigmentation and thrombophlebitis($p<0.01$).

Majority(95%) confirmed improvement in symptoms following treatment. QOL improvement was higher in the EVLT alone group.

Conclusions

Although combining tributary procedures simultaneously with EVLT, results in a few minor complications clinical outcomes and symptom resolution are equally effective in all three modalities.