Our experiences with EVTA in Novo mesto

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Abstract

Purpose: Endovenous thermal ablation (EVTA) is one of the most accepted treatment option for varicose veins. The aim of this study was to investigate the efficacy of the endovenous vein ablation with a 1 month follow-up in our institution between January 2016 and December 2018.

Materials and methods: In this retrospective study, 515 patients with symptomatic varicose veins secondary to great saphenous vein (68,7 %), small saphenous vein (13,2 %), accessory saphenous vein (8,5 %), perforator (2,9 %) insufficiency treated with 1470-nm endovenous laser ablation (EVLA), radiofrequency ablation (RFA) or catheter directed sclerotherapy (CDS) were studied. The venous disease was categorized according to the clinical, etiological, anatomical, and pathological classification. Diagnosis of venous insufficiency was made by color Doppler ultrasonography prior surgery. Clinical and color Doppler ultrasonography follow-up at four weeks was performed. The primary efficacy endpoint of the study was ultrasonographically proven elimination of venous reflux in the treated vein after one month.

Results: Follow-up could be completed in all patients. In all treated varicose veins, occlusion with elimination of reflux could be demonstrated immediately after the procedure. After one month 94,5 % of the treated veins were still occluded. The suffusion or hematoma was the most common minor complication (5.9 %). No major complication such as deep venous thrombosis and pulmonary embolus occurred.

Conclusion: Endovenous ablation procedures of great saphenous, small saphenous and accessory saphenous veins are minimally invasive, safe, and efficient treatment option with low recanalization rates during 1-month follow-up.

Keywords: venous intervention, endovenous vein ablation, endovascular treatment, chronic venous insufficiency