

Abstract of paper presented to the Venous Forum of the Royal Society of Medicine, July 2002.

Foam sclerotherapy treatment of saphenous trunk varices.

*Philip Coleridge Smith DM FRCS, Reader in Surgery, UCL Medical School, London.
David Wright FRCS, Provensis Ltd, UK.
Stephen Tristram MB ChB, Basingstoke, UK.*

Aims

Ultrasound guided foam sclerotherapy is advocated as an alternative to surgical treatment for truncal saphenous varices. The aim of this study was to investigate the safety and efficacy of 1% polidocanol foam sclerosant (Varisolve®, Provensis Ltd, UK) in the treatment of truncal varices.

Patients and methods

Twenty four patients with primary or recurrent varices with sapheno-femoral or sapheno-popliteal incompetence were included in the study. Patients were examined clinically and using duplex ultrasonography to confirm the extent of their venous disease. Varisolve foam was injected into the long or short saphenous vein under ultrasound control and into superficial varices. Compression bandaging and a class II medical compression stocking were applied following treatment. Patients were followed up at 3 and 10 days, then after two months and 12 months using duplex ultrasonography.

Results

Twenty two patients, median age 49 (interquartile range 39 – 56 years) were followed up by duplex ultrasonography after one year. A total of 25 long saphenous veins and 10 short saphenous veins were occluded by the initial treatment requiring a total of 42 treatments. Superficial thrombophlebitis was seen in 14 patients. One patient developed thrombosis confined to the distal popliteal vein four weeks following treatment after an airline journey and intercurrent illness. After 12 months 2 of the long saphenous veins and 5 of the short saphenous veins showed evidence of recanalisation. All other saphenous trunks remained occluded. There was no recurrence of successfully treated varices.

Conclusions

Ultrasound guided sclerotherapy is an effective way to occlude and treat truncal varicose veins. This treatment may be complicated by thrombophlebitis.



Figure.

Pre-treatment

1 year following treatment