CONTROVERSES ET ACTUALITÉS EN CHIRURGIE VASCULAIRE CONTROVERSIES & UPDATES IN VASCULAR SURGERY JANUARY 23-25 2014 MARRIOTT RIVE GAUCHE & CONFERENCE CENTER PARIS, FRANCE

Endovenous therapies of saphenous veins, the evidence

Renate van den Bos Erasmus MC Rotterdam



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Disclosure

Speaker name:

-Renate van den Bos.....
- I have the following potential conflicts of interest to report:
- Consulting
- Employment in industry
- Shareholder in a healthcare company
- Owner of a healthcare company
- Other(s)
- x I do not have any potential conflict of interest

In several national guidelines, EVTA is recommended as first choice treatment

- Dutch guideline
- NICE guideline (UK)
- SVS and AVF guidelines (USA)

Siribumrungwong (2012) is the first large metaanalysis on GSV treatment of **RCTs only**

This study analysed:

- Efficacy
- Complications
- Postoperative pain
- Time to return to normal activities
- QoL scores

EVLA, RFA and surgery were equally effective

EVLA vs Surger	,		Events/n	
Author (year)		RR (95% CI)	EVLA	Surgery
Demedeiros (2005)		3.00 (0.13, 69.52)	1/20	0/20
Kalteis (2008)	-	2.04 (0.19, 21.77)	2/47	1/48
Darwood (2008) —	-	0.81 (0.30, 2.23)	9/71	5/32
Disselholf (2008) -		9.00 (0.50, 163.58)	4/60	0/60
Christenson (2010)		15.00 (0.87, 259.1	6) 7/10 0	0/100
Pronk (2010) -		7.67 (0.40, 145.52)	3/62	0/68
Rasmussen (2010)	-	1.48 (0.25, 8.57)	3/69	2/68
Rasmussen (2011)		1.73 (0.52, 5.77)	7/144	4/142
Carradice (2011)	-	0.39 (0.13, 1.23)	4/139	10/137
Overall	\diamond	1.47 (0.72, 3.02)	40/712	22/675
1				
0.12	11.5 15	259		
Favor EVLA Ri	sk ratio	Favor surgery		

UGFS was 10-15% less effective than surgery and EVTA



EVTA has less postoperative complications than surgery

- Less wound infections
- Less hematoma
- Lower painscores
- Shorter return to work
- No difference in venous thromboembolism

The SSV is best treated with EVTA or UGFS

- Complex treatment because of anatomy
- More sural nerve injury after surgery than after EVTA
- The puncture site in EVTA should be in the upper half of the calf

Siribumrungwong 2013; Samuel 2013; Tellings 2011; Doganci 2011

There is no evidence that EVLA wavelength matters



Malskat et al, LMS 2013

There is no evidence that EVLA wavelength matters



Malskat et al, LMS 2013

There is evidence that fiber tip influences postoperative pain and bruising by perforations









Less perforations and less pain with tulip tip than bare tip





Vuylsteke et al, EJVES 2010 and 2012





After RFA there seems to be less pain than after EVLA



Shepherd et al, BJS 2010

Conclusions

- EVTA are 1st choice GSV
- EVTA and UGFS are 1st choice for SSV
- Wavelength does not matter
- Tulip tip less painful than bare tip
- RFA less painful than EVLA
- MOCA, glue, steam: no evidence (RCTs) yet

Thank you for your attention



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