

Controversies & updates in Vascular Surgery

Paris - january 21 2017

Venous session

Vulvar varicose veins during pregnancy

PATHOGENESIS

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Disclosure Speaker name : Lemasle Philippe 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) I do not have any potential conflict of interest

Pathogenesis

- anatomical structures
- varicose heredity
- specific factors related to pregnancy

Anatomical structures

The venous drainage of the vulva is double

forward
 by the lateral pudendal veins

backward
 by superficial perineal veins



Anatomical structures



Varicose heredity

- study of twins (2 060 pairs sex $\stackrel{\circ}{_{\sim}}$)
- concordance rate for varicose veins:
 - 67% in homozygous twins
 - 45% in heterozygous twins
- >> there is a genetic factor but ...
- discordance rate = 33% in homozygous twins

>> there are others factors :

environnemental, hormonal & hemodynamic

Ng MYM – Linkage to the FOXC2 region of chromosome 16 for varicose veins in otherwise healthy, unselected sibling pairs. J Med Genet 2005; 42:235-9

specific factors related to pregnancy

- hormonal factors : (specific receptors on the venous wall)
 - hyperprogesteroneemia >> relaxation of smooth muscle fibers
 - >> parietal tonicity \downarrow >> compliance \uparrow >> venous dilatation \uparrow
 - hyperoestrogenism >> capillary permeability[↑], vasodilatation [↑]
- mechanical factors :
 - impediment to venous return by pregnant uterus
 - Iumbar lordosis >> positional compression of the LRV
- hemodynamic factors :
 - \uparrow blood volume + 50%
 - fintra-venous pressure x 3
 (with placenta groth = high flow AV communicat^o)
 - flow of ovarian veins x 60

(between 8-9 months) *

(close to term) *

(from the 36th weeks) **

* Greiner M, Franceschi C. Hémodynamique veineuse physiologique et pathologique du pelvis et des MI 17 in Thérapeutiques endovasculaires des pathologies veineuses. Greiner M. – Springer 2013 ** Hodgkinson CP. Physiology of the ovarian veins during pregnancy.Obstetrics and Gynecology 1953; 1: 26-37

Draining path = Alcock's canal



Leak point = P point



* Franceschi C. Ann Vasc Surg 2005;19 : 284 – 8

Leak point

= reverse flow in an anatomical drainage pathway





left P point



varicose veins in the left labia majora







right **P** point





VARICOSE HEREDITY





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