

Ligation of GSV in Sclerotherapy with Foam: Technical Notes – Personal Experience Paolo Valle

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Statement of the Problem:

The specific complications after treatment of the incompetent GSV with foam are early recanalization (13%) and superficial thrombophlebitis (7.4%).

Methodology & Theoretical Orientation:

From 1 January 2016 to today, in 79 patients (CEAP C2-C3), 85 sclerofoam treatments of GSV were performed for varicose veins of the lower limbs with: saphenofemoral reflux >3 sec, saphenous diameter >8 mm and at least 2 varicose thigh/leg collateral. To obtain the GSV, local surgical anesthesia was performed with a surgical access localized to the thigh, always above the end of the Hunter perforator and of the varicose collateral. The GSV is bound and sectioned and finally cannulated with an Arteriofix 8 mm catheter, through which, after washing with physiological solution, the sclerofoam with TDS 3% (ratio 1:4) for a maximum of 4 cc of foam according to Tessari's technique. The remaining saphenous veins are removed with the Muller technique. Controls with ecocolordoppler are expected at 1, 3, 6 months and 1 year.

Findings: Only in 4 patients (4.7%), however very thin, was found, in the first month, a superficial phlebitis of the thigh, between the surgical incision and the inguinal fold. Recanalization occurred after 1 year in only 8 patients (9.4%). In any case the diameter of saphenous veins was reduced by more than 50%, the saphenous walls were thickened, there was no reflux at the saphenofemoral junction and clinically the patients reported no disturbances. In all other patients, GSV presented with obliterated and reduced caliber.

Conclusion & Significance: From these first results we can state

that this technique that includes the ligation of the GSV makes the foam more stable than that which occurs with the direct injection of the GSV. Furthermore, a smaller amount of foam is sufficient, with no local and general phenomena and complications

Recent Publications:

1. Bountouroglou D G et al. (2006) Ultrasoundguided foam sclerotherapy combined with saphenofemoral ligation compared to surgical treatment of varicose veins: early results of a randomized controlled trial. *Eur J Vasc Endovasc Surg* 31(1):93-100.
2. Cavezzi A and Tessari L (2009) Foam sclerotherapy techniques: different gases and methods of preparation, catheter versus

Note: This work was presented in World Congress & Exhibition on Vascular Surgery which was scheduled in March 28-29, 2019 Rome, Italy

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