

Endoluminal treatment of varicose veins

Which treatment option for which patient?

Disclosure

Speaker name:

Anina Lukhaup

I have the following potential conflicts of interest to report:

Consulting Pfizer, Bayer, Daiichi-Sankyo

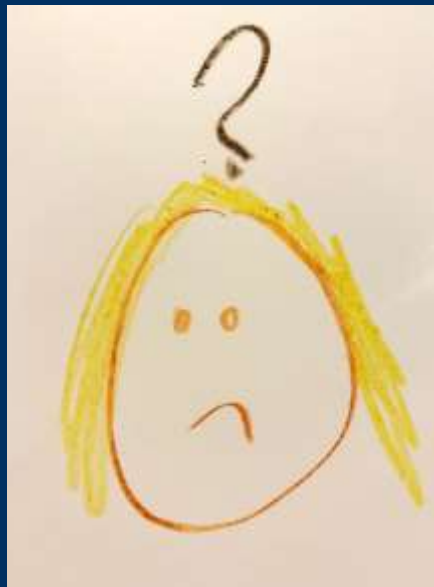
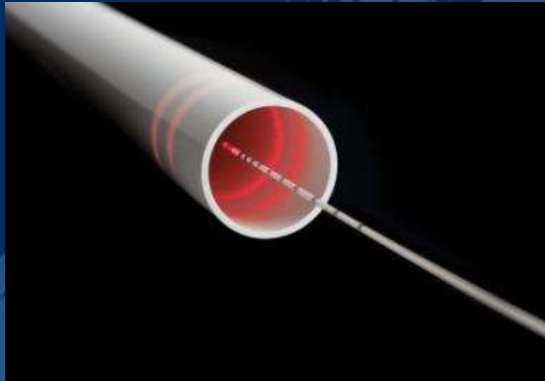
Employment in industry

Stockholder of a healthcare company

Owner of a healthcare company

Other(s)

I do not have any potential conflict of interest



Variety of treatment options

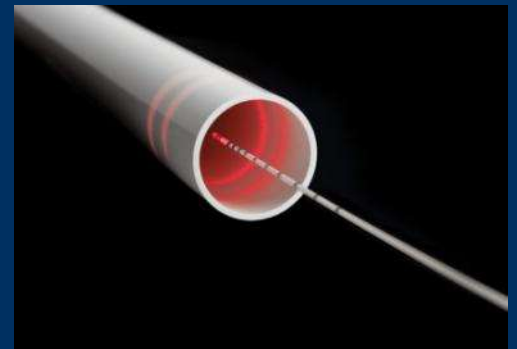
Radiofrequency ablation

- Segmental thermal ablation
- Katheter tip heat 120°C
- Tumescant anesthesia
- Ultrasound guided positioning
- 7F sheath



Laser

- Thermal treatment
- Tumescant anesthesia
- Ongoing development
 - radial laser
 - two ring laser fiber
 - slim laser
 - wavelength



Two-ring radial laser Biolitec®

Glue

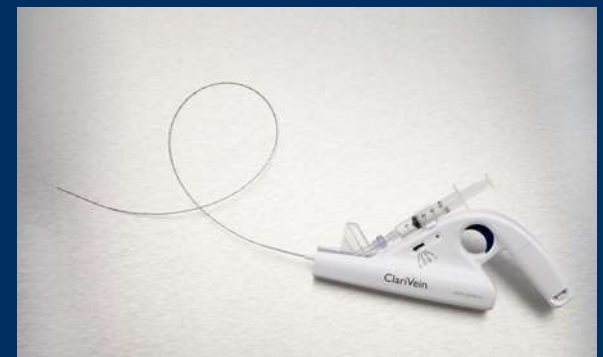
- Non-thermal
- No tumescent anesthesia
- Endovenously inserted medical adhesive
 - 1-2 ml Cyanoacrylate



Venaseal Medtronic®

MOCA

- Mechanochemical ablation
- Non-thermal
- Mechanical induced vasospasm prior to insertion of Aethoxysklerol®
- Lack of long term results



ClariVein Merit Medical®

Foam

- Aethoxysklerol[®] Kreussler[®]
- Well established treatment for smaller veins
 - Side branches
 - Vein recurrence
 - Variceal bleeding
- Lower okklusion rates in stem vein treatment



How to choose?

- Vessel anatomy?
 - vessel diameter
 - tortous or straight vein
 - Intrafascial, epifascial or superficial vein
- Former inflammation or thrombosis?
- Risk of nerve injury?
- Tolerance of compression?

How to choose?

	RF	Laser	Slim laser	Glue	Foam
Large vessel diameter	✓	✓			
Tortuos vein			✓		✓
Postthrombotic vein			✓		✓
Vein recurrence	(✓)				✓
Large side branches	✓			(✓)	
No risk of thermal lesion				✓	✓
Superficial vein		(✓)	✓	✓	✓



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