STEP BY STEP: PHLEBECTOMY

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Disclosures

• No Conflicts

What is Ambulatory Phlebectomy

- Minimally invasive, cosmetically acceptable
- Ambulatory
- Local anesthetic
- Varicose or reticular vein removal
- Utilizing hooks
- No down time, minimal discomfort and complications

Robert Muller, MD

• Swiss Dermatologist
• Reinvented and refined the technique
• Ambulatory phlebectomy
• Slow to be adopted in the 1960’s
• Slow to be adopted in the USA (now considered the benchmark for branch varicosities)

TREATMENT SET UP
Local Anesthesia

445cc of 0.9% NS (Tumescent)
• 50cc of 1% lidocaine with 1:100,000 epinephrine
• 5cc of 8.4% sodium bicarbonate

Tumescent Pump
COMPLICATIONS

• Missed varix (early stages)
• Blister formation (bandage)
• Hematoma
• Superficial phlebitis
  - Incomplete removal of the vein
• Development of telangiectasias (trauma)
• Others - extremely rare
  - Saphenous nerve, below ankle DMZ
Discharge Instructions

- Bandage off post-op day 1 Class 2 (30-40mm) compression hose – 10-14d
- Leave steri-strips on for two weeks
- Shower after 24hrs
- Resume activities of daily living
- No aerobic activity for 7 days
- Tylenol for pain
- F/U with MD, 2 weeks, 12 months