VENOUS SYMPTOMS CONSENSUS

Armando Mansilha MD, PhD, FEBVS

null

disclosures

• nothing to declare

CVD pathophysiology

leukocyte-endothelium interaction

Production of symptoms: activation of C Nociceptors?

CIVIQ-14 scores according to venous symptoms
why a consensus on venous symptoms

there is frequent confusion between signs and symptoms in the literature

the fact that venous symptoms are non-pathognomonic adds to the difficulty, because linking these symptoms with their etiology and their cause is still debated

the severity of the signs and the results of investigations do not always correlate with the intensity of the symptoms

why a consensus on venous symptoms

the pathophysiology of venous symptoms has not been clearly established, in particular in CVD patients

precise physiopathologic knowledge should lead to more targeted and specific treatment

objectives of the SYM VEIN consensus

- to build a reference document on “venous symptoms” reached by a consensus group, and including:
  1. definition and description of venous symptoms
  2. ascription of symptoms to chronic venous disorders
  3. pathophysiology of venous symptoms
  4. symptoms scoring
  5. investigations of venous symptoms

SYM VEIN working group

to draft this consensus statement, an international group of 23 members from 14 countries was formed, including vascular specialists (medical and surgical), dermatologists, a neurologist and a healthcare economist

| Belgium | M. DE MAESENEER, M. FLOUR |
| Brazil | S. BOUKHILA |
| Cyprus | A. NICOLADES |
| France | D. SOUHASSIKA, P. CARPENTIER, C. RAMEL DESNOS, D. BOUHASSIRA, P. LAUHOIS, M. PERREN |
| Germany | E. RABE |
| Greece | N. KAKKOS |
| Italy | M. LUDE, G. MALETTI |
| New Zealand | A. VAN RY |
| Portugal | A. MARIN |
| Russia | D. BOUHASSIRA |
| Sweden | B. EKLOF, P. NEILSEN |
| Switzerland | W. BLATTNER |
| United Kingdom | K. DARVALL |
| USA | E. LABROPOULOS, N. VASQUEZ |
**Description and Definition of Venous Symptoms**

- **Description of Venous Symptoms**
  - Pain or Aching; Throbbing; Tightness; Heaviness; Fatigue; Impression of swelling; Cramps; Itching; Restless legs; Tingling; Burning sensation/heat soreness

- **Secondary Symptoms**

- **Definition (example)**
  - **Heaviness**: patients describe this symptom as heavy legs occurring after a long-term standing or seated position.
  - **Fatigue**: This symptom is a little bit different from heaviness and is described by patients as a feeling of tiredness occurring after any kind of activity that activates lower limbs. It may occur also after a long time of an immobile position.
  - **Impression of swelling**: the symptom is different from the sign oedema that can be measured. Despite patients feel their legs are swelling, oedema is not always present at clinical examination.
  - **Cramps**: an involuntary painful contraction of muscles. Venous cramps are usually located in the calf muscles and other muscles and occur at night.

- **Ratification of Symptoms to Chronic Venous Disorders**
  - Venous symptoms that should not be described as “non-specific”:
    - Venous claudication, a clear indication of venous obstruction resulting from a venous proximal obstruction or thrombosis
    - Phlebitis/Phlebolgia and those associated with varicose veins either of large volume or location of a mild inflammatory process
    - Thrombophlebitis associated with acute hypodermatitis or congestive venous ulcers
    - Pruritus in the lower legs associated with mild to open dermatitis, or to drugs
  - Poorly documented venous symptoms:
    - “Impatient legs”, mimicking a minor form of restless legs restricted to the first part of the night and eliciting the subject to move his legs, but with no uncontrolled movements
    - Sensation of warm feet mainly in the first dozen of minutes after going to bed, much milder than true erythermalgia

- **Venous Symptoms Scoring**
  - Currently available tools
    - Quality of life tools
    - CEAP
    - VCSS, and revised VCSS (rVCSS)
    - New tool: VVSymQ® Score (symptom burden of varicose veins through research of heaviness, achingness, swelling, throbbing, and itching)

- **Symptoms Investigations**
  - If venous pathologies are excluded, and in the absence of venous signs and ultrasound anomalies, shouldn’t we investigate microcirculation with laser Doppler or cytoscanning to identify microangiopathy?
  - In case microcirculatory disorders are present, this might provide a scientific basis for the pathophysiology of patients classified as C0s, En, An, Pn.
  - In all epidemiological surveys on chronic venous disorders, this clinical class represents 20% of the patients.

**SYM VEIN Consensus**

are symptoms predictive of the disease progression?

VENOUS SYMPTOMS CONSENSUS

Armando Mansilha MD, PhD, FEBVS