Is It Safe To Do GSV Ablation, Phlebectomy And Cosmetic Sclerotherapy All At Once?

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what is Safe?
- Free from harm or risk
- Varicose vein surgery
- Haematoma
- Cellulitis
- Minor neurological disturbance
- Major neurological disturbance
- Deep venous thrombosis
- Pulmonary embolism
Slide 3

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Slide 4

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Before surgery
- Physical Exam
- CEAP classification
- Duplex scan
- What we can do?
- What do they dream about?

Surgery protocol:
- Laser 1470 nm – 5-7W continuous mode
- LEED 80-100 J/cm
- 6 F sheath
- Radial fibre 600 µ
- Tumescent infusion – selective
- Ultrasound Guided ablation
- Spinal cord and Local anaesthesia technique

Phlebectomy
- Liquid sclerotherapy
- Foam sclerotherapy
- Transdermal Laser

Surgery protocol:
- Prophylactic low-molecular-weight heparin
- Dose 40 mg enoxaparine
- Surgical 35 mmHg socking – 48 hrs
- Day hospital – 06-08 hrs patient discharge

Last 03 years (2015-18):
- Varicose veins surgery - 2531
- Endolaser - 539 (21.2 %)
- Female - 76.6%
- Mean age - 53 years
- CEAP - C2 – C4 97.2%

Follow up – duplex ultrasound selective
- Pulmonary embolus – 0.18%
- Vascular physiotherapy – post operative

Varicose veins surgery - more than 16,000 surgeries - 1993-2018
Between 2009 and 2018, 196 veins treated—spinal and general anesthesia in 170 cases, local anesthesia with sedation. Almost same protocol.

Endolaser – 366
Maijor neurologic disturbance – NO
Deep venous thrombosis – 1.1%
Pulmonary embolus – 0.27%

Conclusion: This study suggests that our current strategy and technique have a low rate of negative outcomes.

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Conclusion: This technique, is usually applied in our country, Brazil, and has a very low rate of complications.

THANK YOU

PIRANGI BEACH – NATAL - BRAZIL