Therapy of varicose veins in patients with severe comorbidities

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Disclosure

Speaker name:

**Beatrix Cucuruz**

I have the following potential conflicts of interest to report:

- [ ] Consulting
- [ ] Employment in industry
- [ ] Stockholder of a healthcare company
- [ ] Owner of a healthcare company
- [ ] Other(s)

- [x] I do not have any potential conflict of interest
Aim of the study

Outcome of patients with

• varicose veins CEAP C4 – C6
  +
• severe comorbidities
Difficulties

Treatment of patients with severe comorbidities conservative? (CAVE: PAD)
Difficulties

Treatment of patients with severe comorbidities

conservative? (CAVE: PAD)
surgery? (CAVE: comorbidities)
endovenous?
Methods

30,040 patients

01/2003 - 03/2017
Methods

30,040 patients

01/2003 01/2009 03/2017

Group I  Group II
Follow up

Follow up: mean: 26.3 months (1 mth – 14 yrs)
Results

30,040 patients

821 (2.73%) patients with > 4 comorbidities
Results

30,040 patients

821 (2.73%) patients with > 4 comorbidities

656/821 (79%) with PAD
Results

N = 821 patients

757/821 (92%) conservative
64/821 (8%) surgery
Results

N = 64 patients treated with surgery

- 42 patients from 2003 – 01/2009 (group I)
- 22 patients from 01/2009 – 03/2017 (group II)
N = 64 patients treated with surgery

31/ 42 (74%) vein ligation and stripping (group I)
4 /22 (18%) vein ligation and stripping (group II)
Results

N = 64 patients treated with surgery

P = 0.001

P = 0.02
Results

RFA under **oral anticoagulation**: 5 patients
1/5 (20%) postoperative haematoma
Conclusion

• RFA is a safe and an effective treatment option in patients with severe comorbidities

• low risk of hematoma and wound healing complications.
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