

Evidence Discussion (PVI.202.A)

Treatment of Varicose Veins

For patients with symptomatic varicose veins (≥ 3 mm in diameter), and documented reflux in the varicosities, treatment of the varicosities is indicated after episodes of bleeding from the varicosities, associated ulceration or failure to obtain relief from a trial of compression therapy. Treatment of underlying saphenovenous reflux should be performed prior to or concurrently with treatment of the varicose veins to improve outcomes, decrease risk of recurrent varicosities and decrease need for additional intervention.

Treatment of the varicosities is accomplished by surgical phlebectomy or sclerotherapy. Due to the superficial location of the tributaries, endovenous thermal or non-thermal techniques carry an increased risk of skin burns, hyperpigmentation or induration and should be avoided.

References

1. Gloviczki P, Lawrence PF, Wasan SM, Meissner MH, Almeida J, Brown KR, Bush RL, Di Iorio M, Fish J, Fukaya E, Gloviczki ML, Hingorani A, Jayaraj A, Kolluri R, Murad MH, Obi AT, Ozsvath KJ, Singh MJ, Vayuvegula S, Welch HJ. The 2023 Society for Vascular Surgery, American Venous Forum, and American Vein and Lymphatic Society clinical practice guidelines for the management of varicose veins of the lower extremities. Part II: Endorsed by the Society of Interventional Radiology and the Society for Vascular Medicine. J Vasc Surg Venous Lymphat Disord. 2024 Jan;12(1):101670. doi: 10.1016/j.jvsv.2023.08.011. Epub 2023 Aug 29. PMID: 37652254