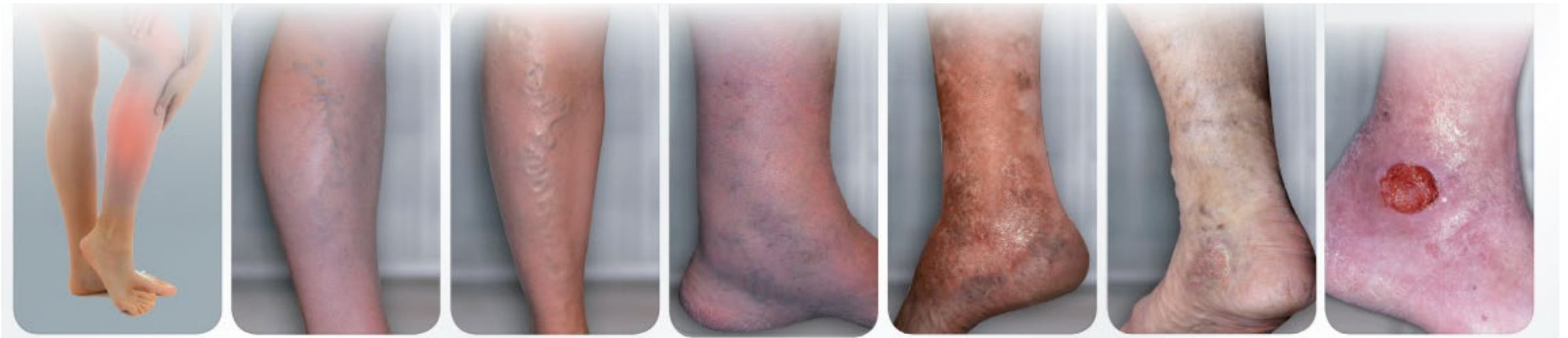


Φλεβικές Παθήσεις

Venous Insufficiency – Varicose Veins – Deep Venous Thrombosis

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What is Venous Insufficiency?

Disorder involving stasis of blood in lower extremities as a result of venous obstruction and/or reflux (primary or secondary) of venous valves...



42 year old female
Retail sales



My legs swell, I feel them
heavy and tired

35 year old female
Office worker



My legs burn, and I have
cramps

55 year old male
Health professional

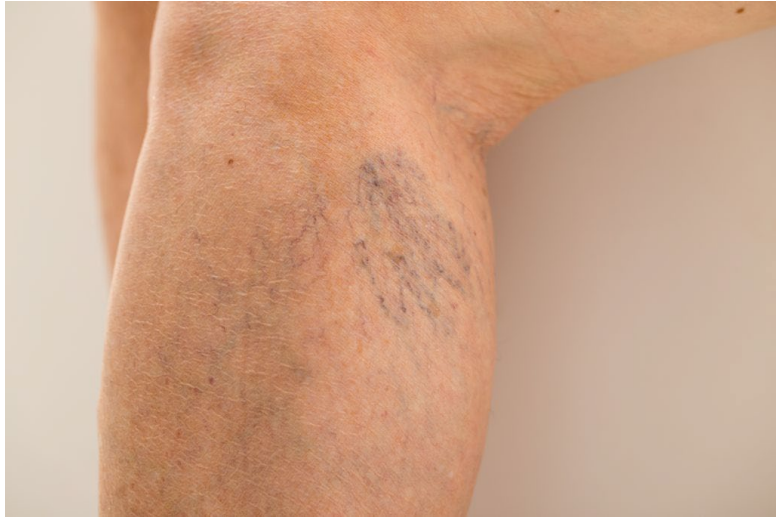


My legs get tired and heavy
when I walk

68 year old male
Retired



My legs have discoloration
and I get ulcers on and off



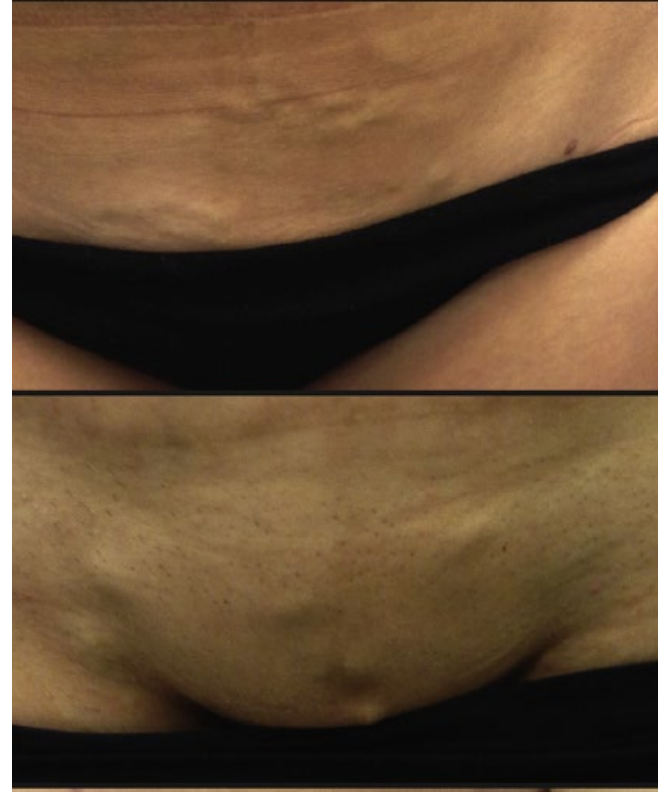
«Spider Veins» - «Varicose Veins»



Pelvic Disease/
Iliac Vein Stenosis

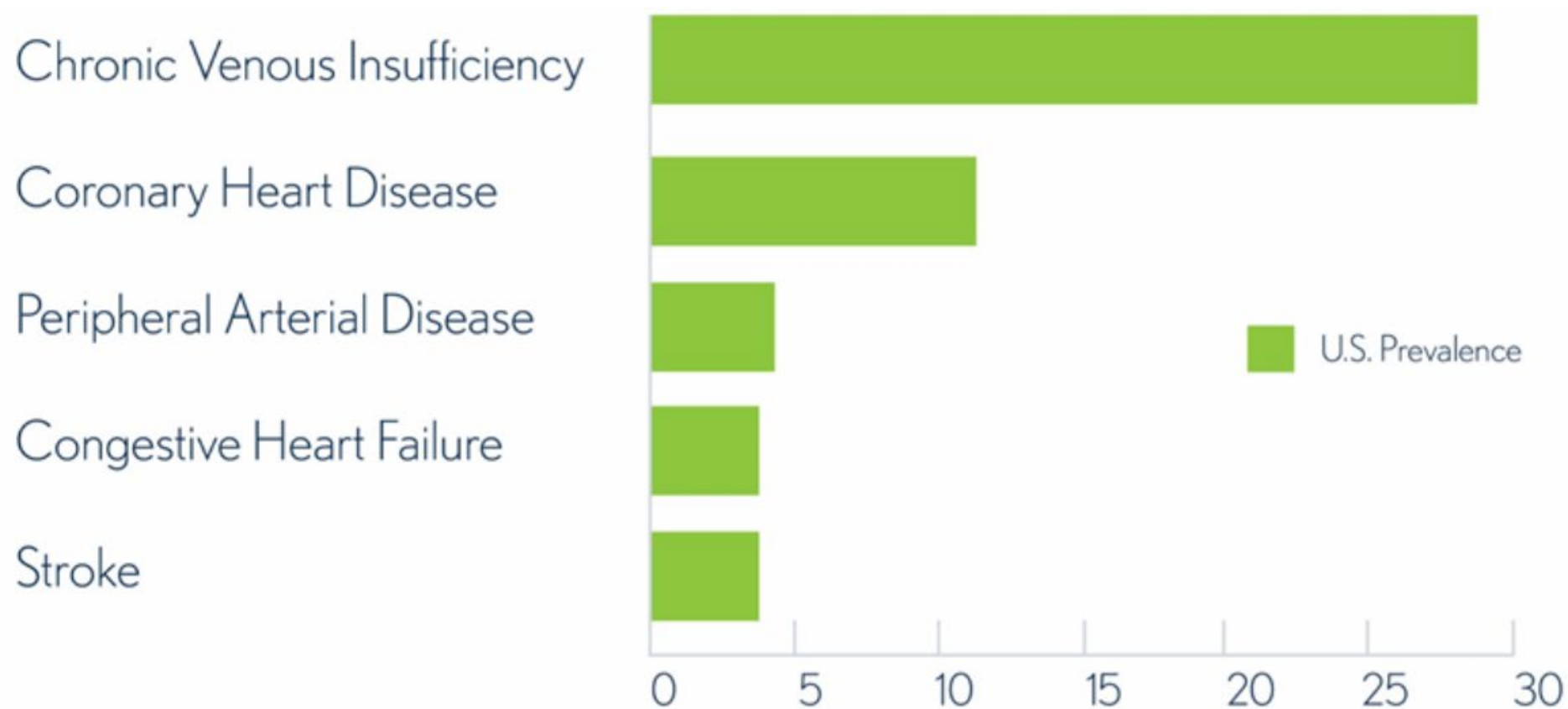


Post-thrombotic
Syndrome



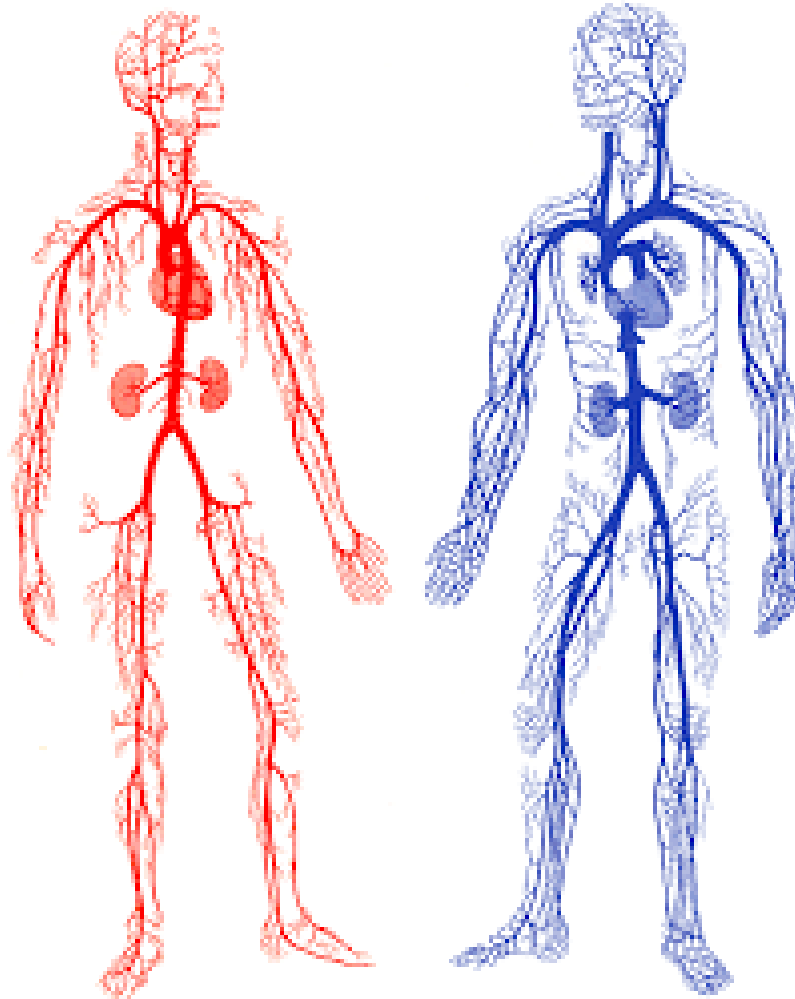
Pelvic Congestion

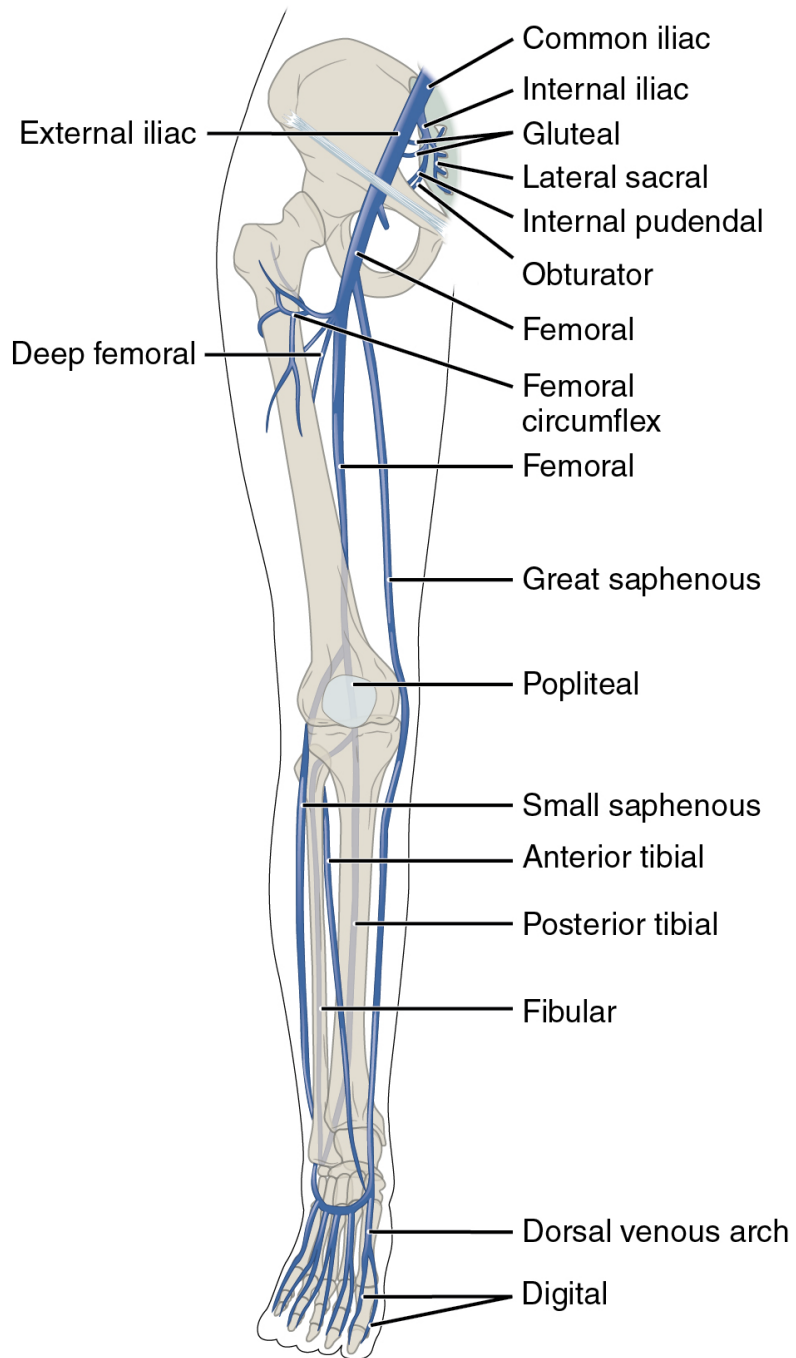
Chronic Venous Insufficiency (CVI) is 2x more prevalent than Coronary Heart Disease (CHD) and 5x more prevalent than Peripheral Arterial Disease (PAD)¹



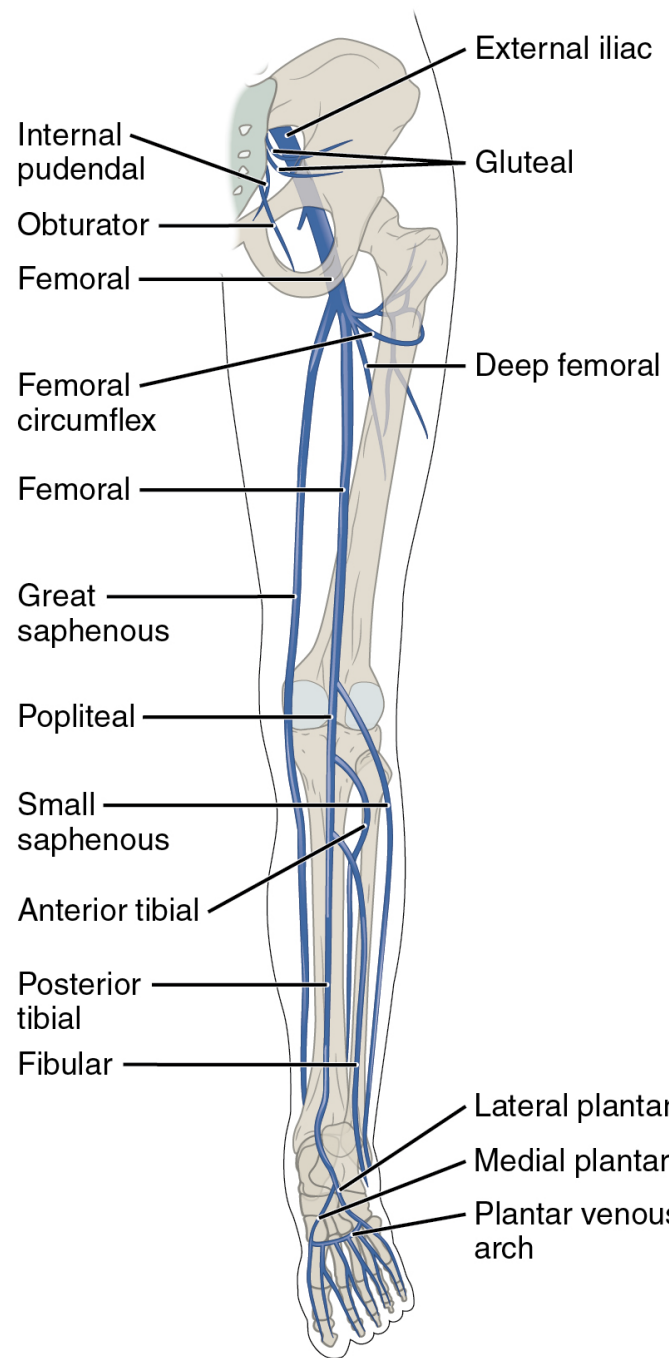
1. J Epidemiol Community Health 1999;53:149-153 doi:10.1136/jech.53.3.149

Quick Anatomy and Physiology Class

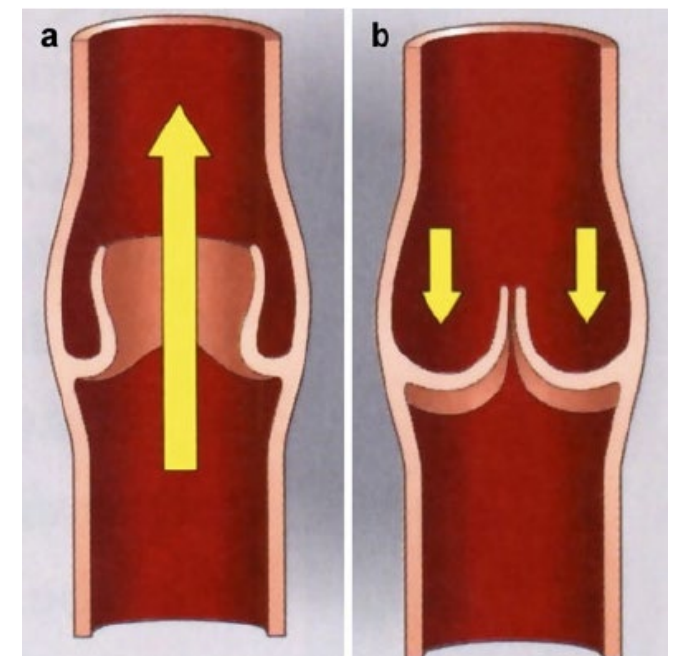
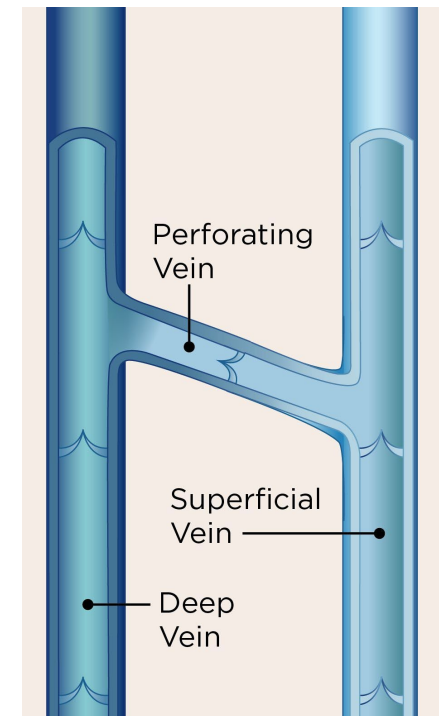




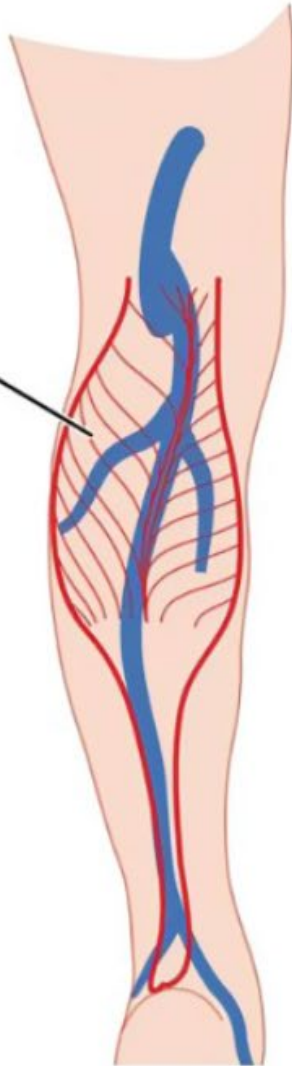
Anterior view



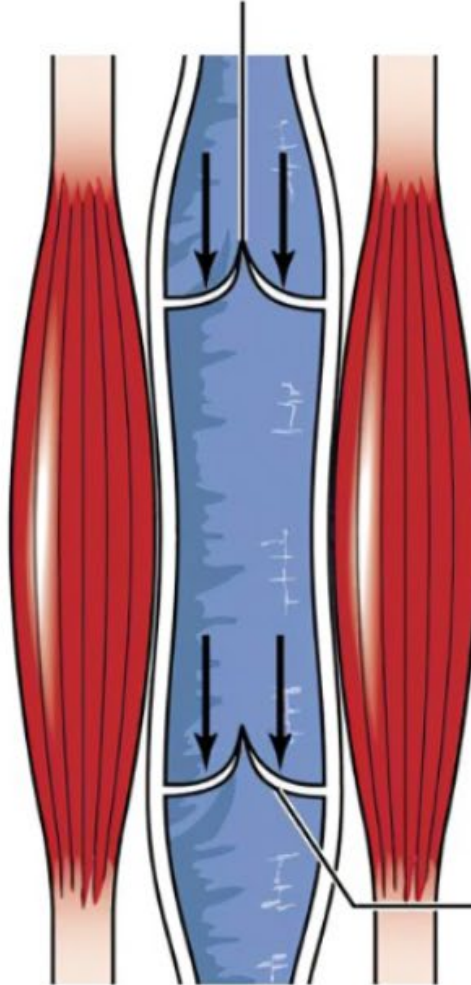
Posterior view



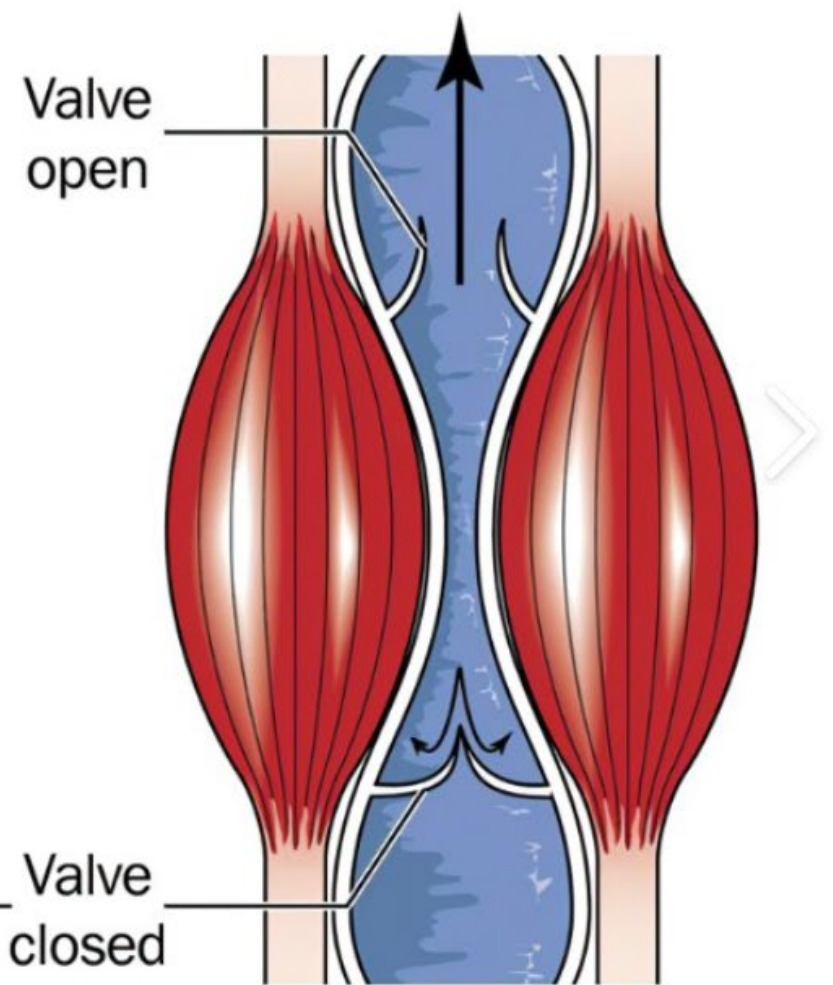
Calf muscle
acts as
pump for
deep leg
veins



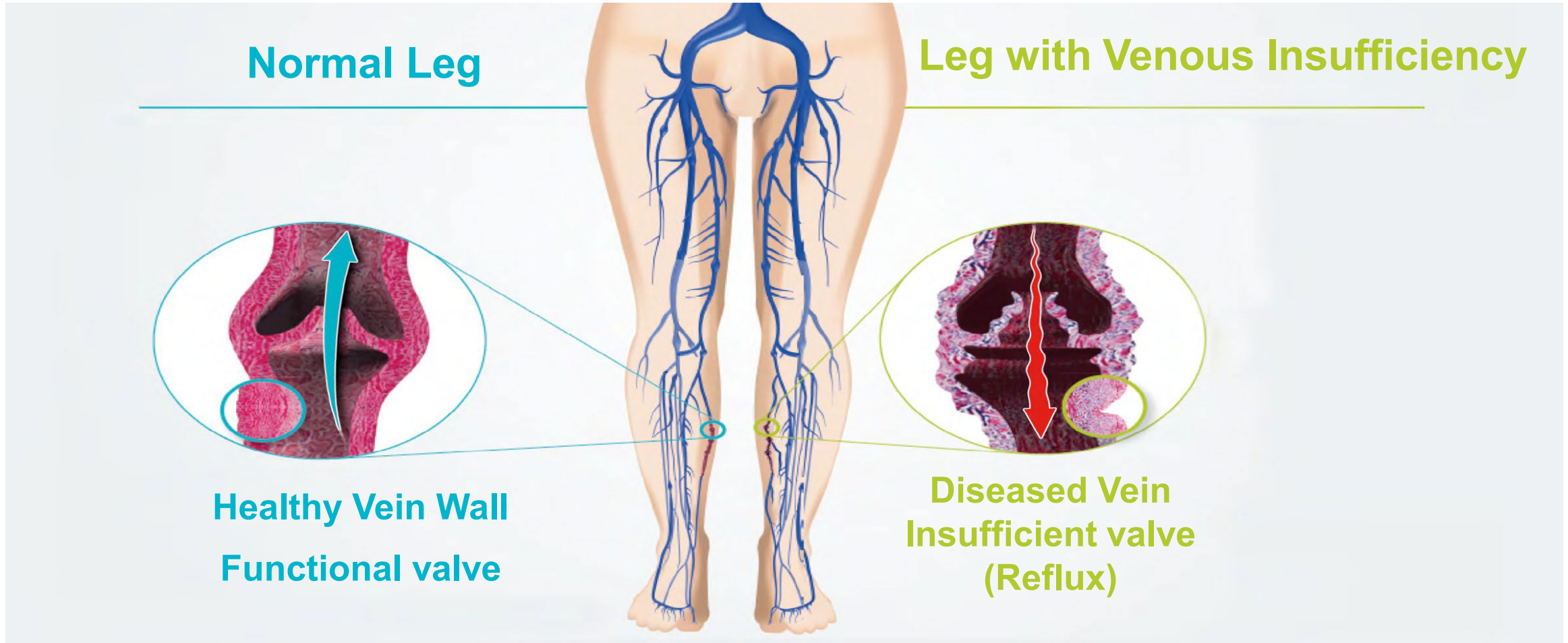
Valves prevent
backflow



Blood flow caused by
muscle contraction

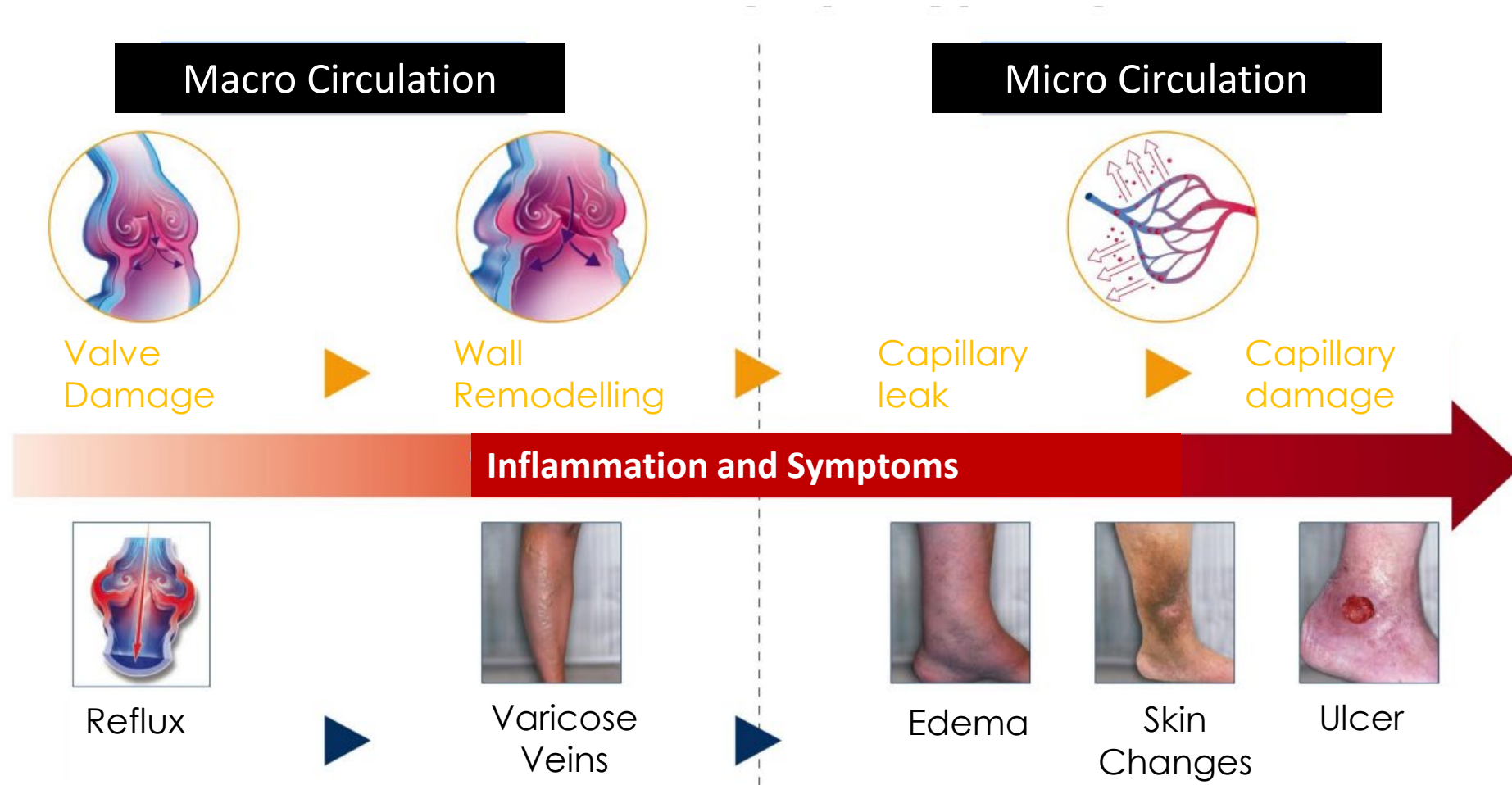


Quick Anatomy and Physiology Class

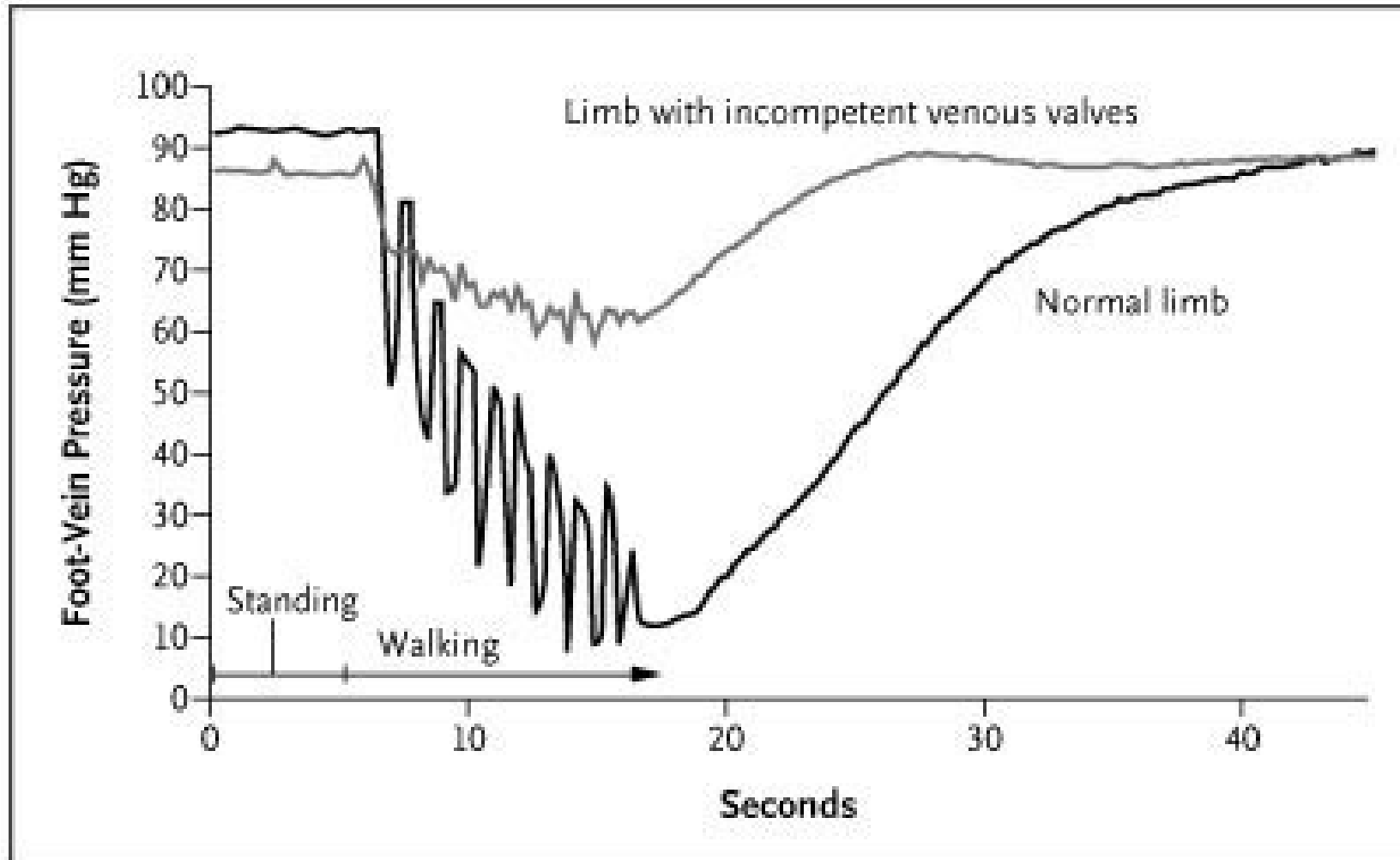


Quick Anatomy and Physiology Class

Reflux and Venous Hypertension Generate Inflammation

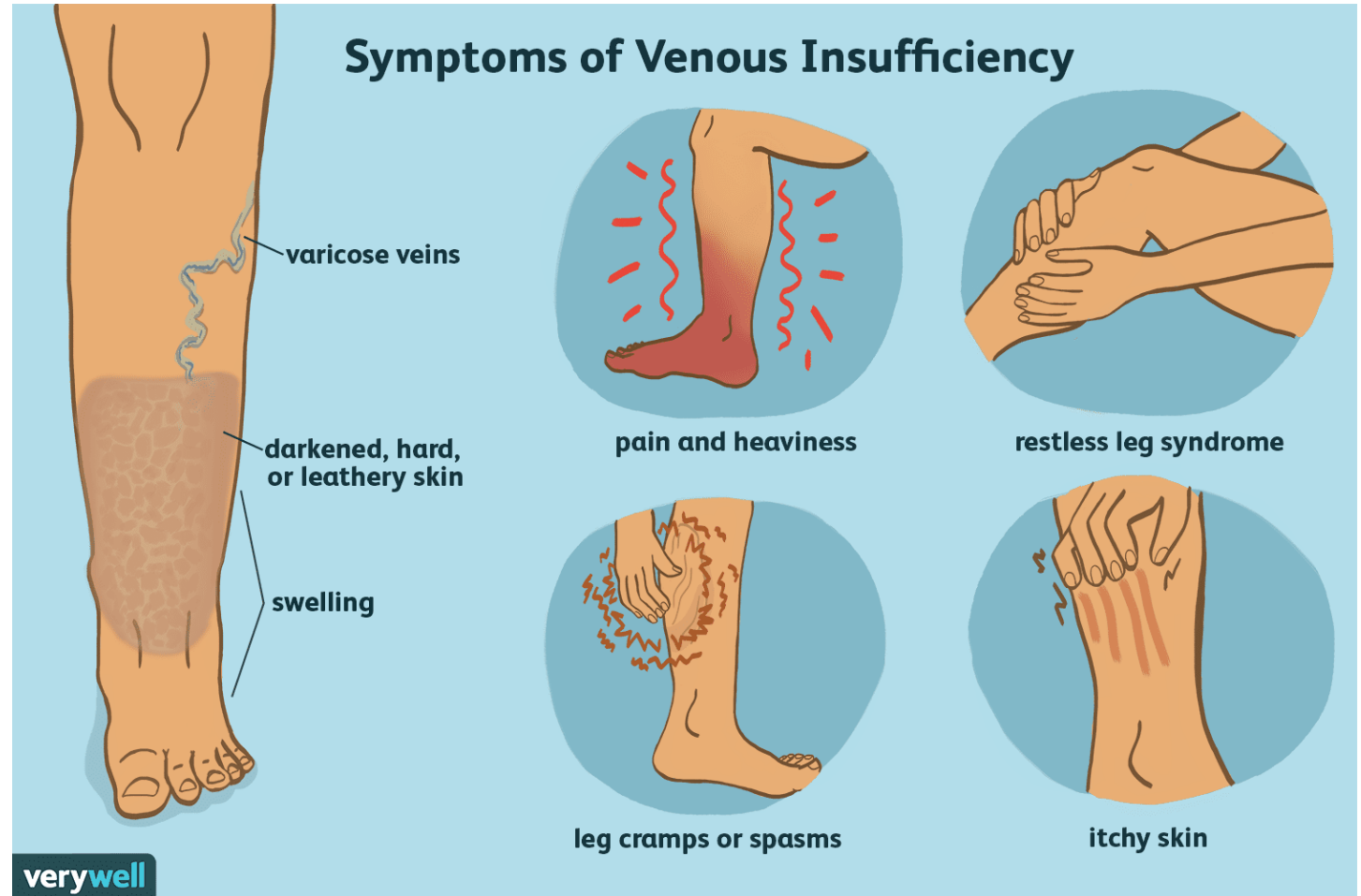


Quick Anatomy and Physiology Class



Symptoms of Venous insufficiency

Heaviness
Pain
Sensation of swelling
Swelling (Edema)
Paresthesia
Restless legs
Nighttime cramps
Tiredness
Throbbing
Itching

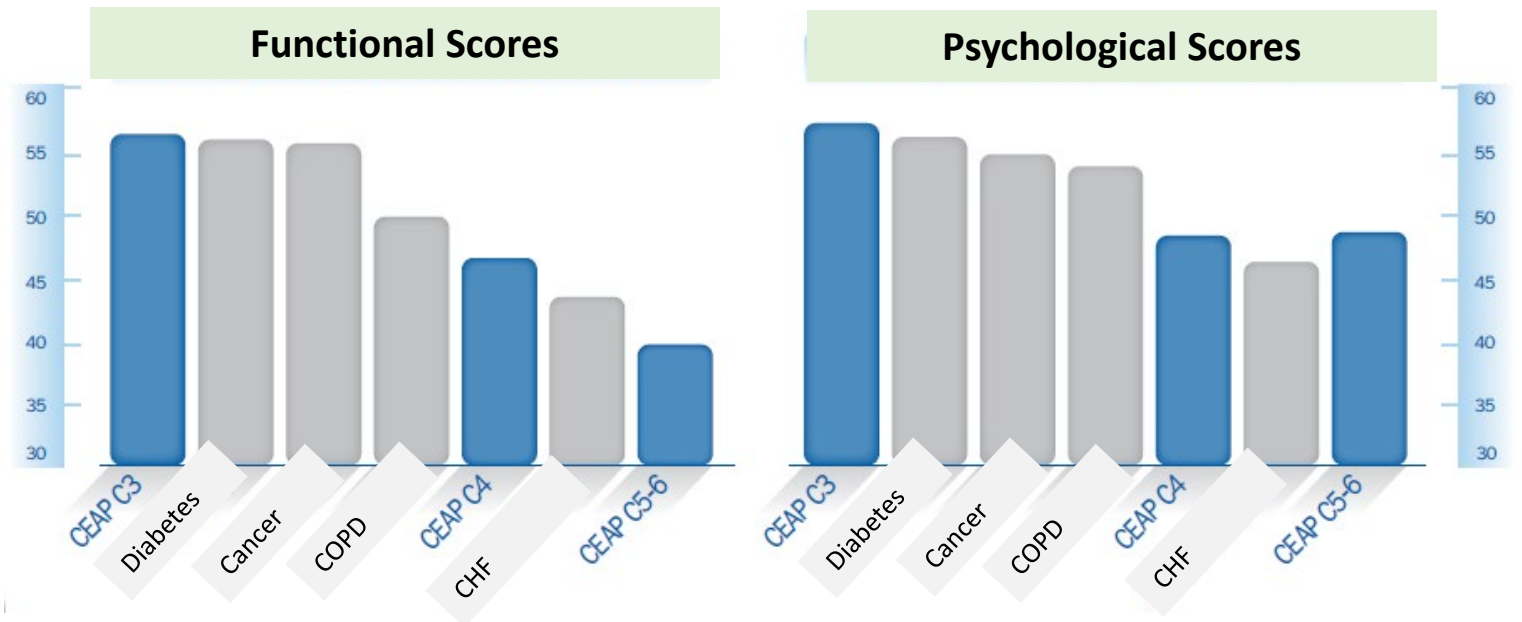


Signs & Symptoms - Clinical Classification (CEAP)

Συμπτώματα	Τηλεαγγειεκτασίες ή ευρυαγγείες	Κίρσοι	Οίδημα	Δερματικές αλλοιώσεις	Επουλωμένο φλεβικό έλκος	Ενεργό φλεβικό έλκος
						
C0s	C1	C2	C3	C4	C5	C6

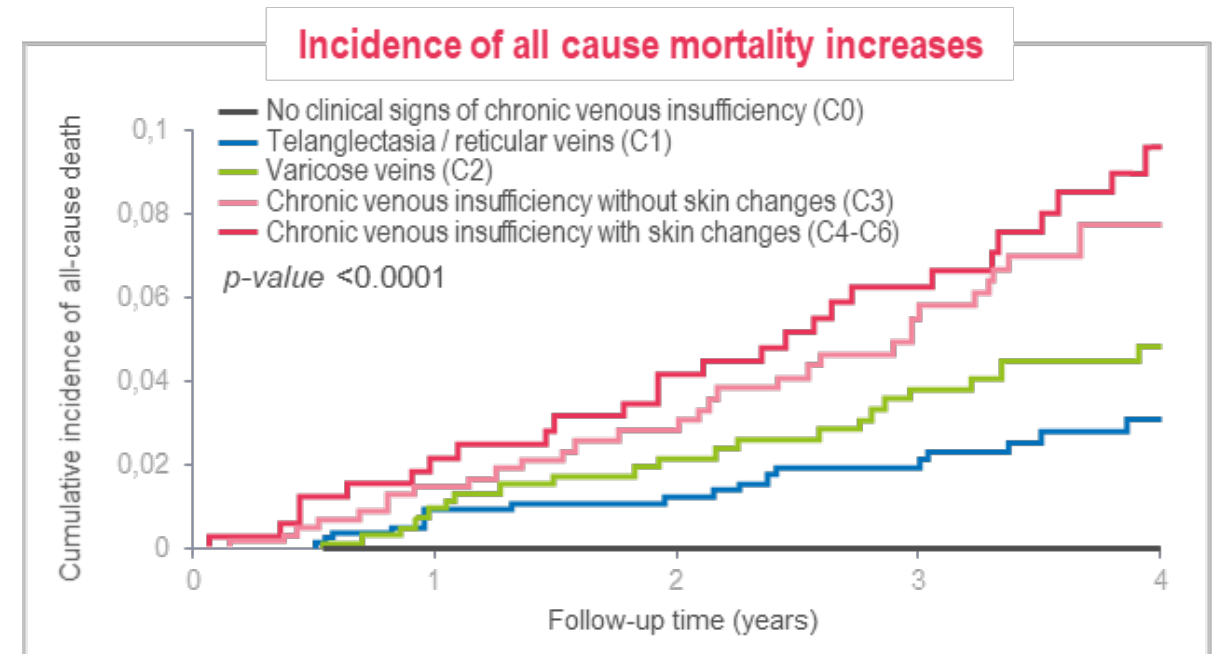
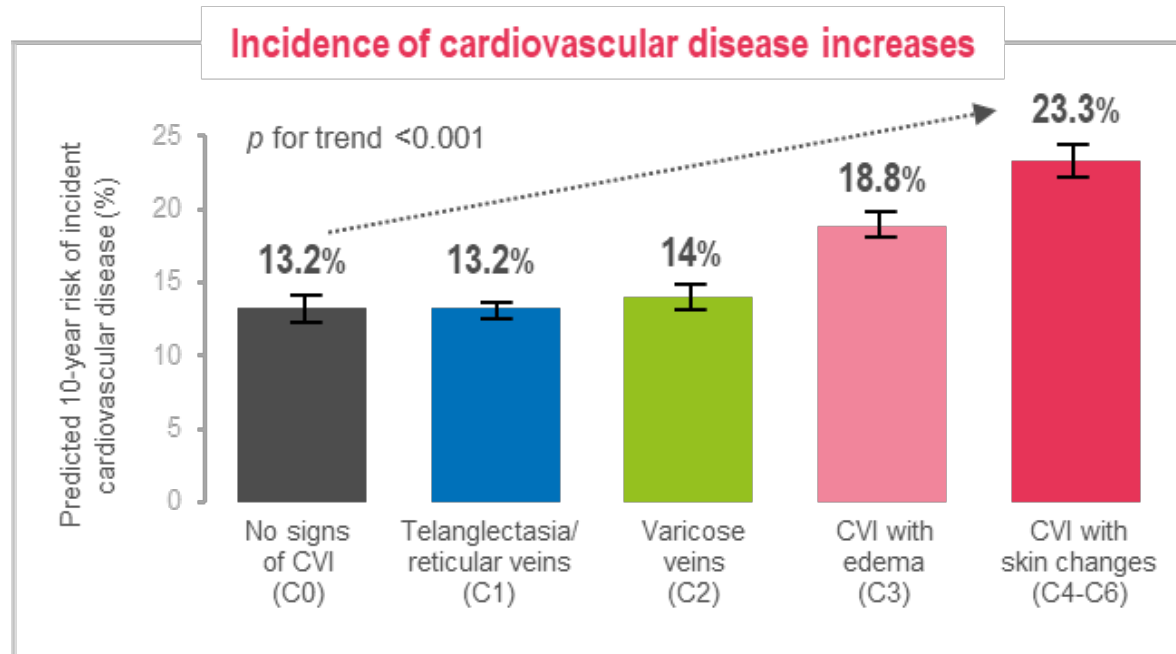
CVD affects Quality of Life >>> than we Think

- Venous Insufficiency is not a cosmetic problem – it is a disease
- Quality of life is affected similarly to other chronic diseases (diabetes, cancer, COPD)



Chronic Venous Disease and Cardiovascular Mortality

* Data 12.423 CVD Patients (2012-2017) *Gutenberg Health Study*

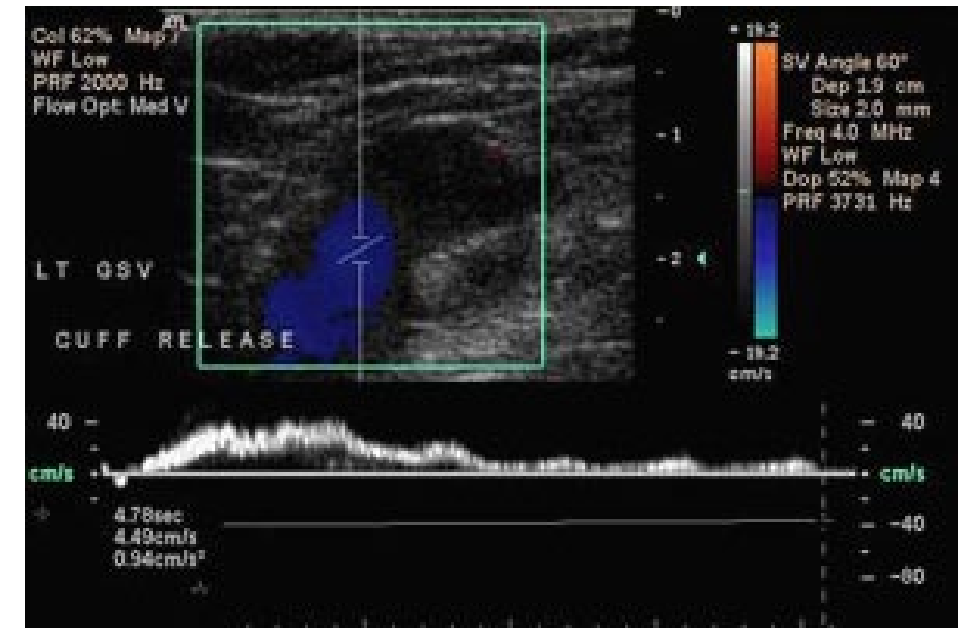


Risk Factors

- Genetics
- Disease of Gravity
 - Long standing
 - Tall
- Obesity
- Sedentary lifestyle
- Pregnancy
- Thrombosis



Diagnosis with Duplex Ultrasound in Standing Position



Chronic Venous Disease Treatments



Lifestyle



Compression



Venoactive Drugs

Skin Care



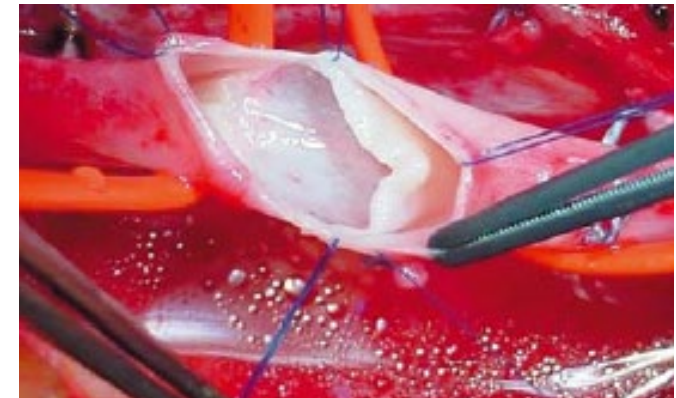
Ablation



Venoplasty



Valve Reconstruction




Take Away Messages

- Chronic Venous disease is the most prevalent vascular disease
- It is the result of venous reflux or venous obstruction leading to venous hypertension
- Chronic venous disease affects patient's quality of life
- Advanced stages are associated with cardiovascular mortality
- Clinical diagnosis and venous duplex
- Treatment: lifestyle changes, compression, minimally invasive treatments

Acute DVT Epidemia

DVT and PE affect 900,000 people in the U.S. every year

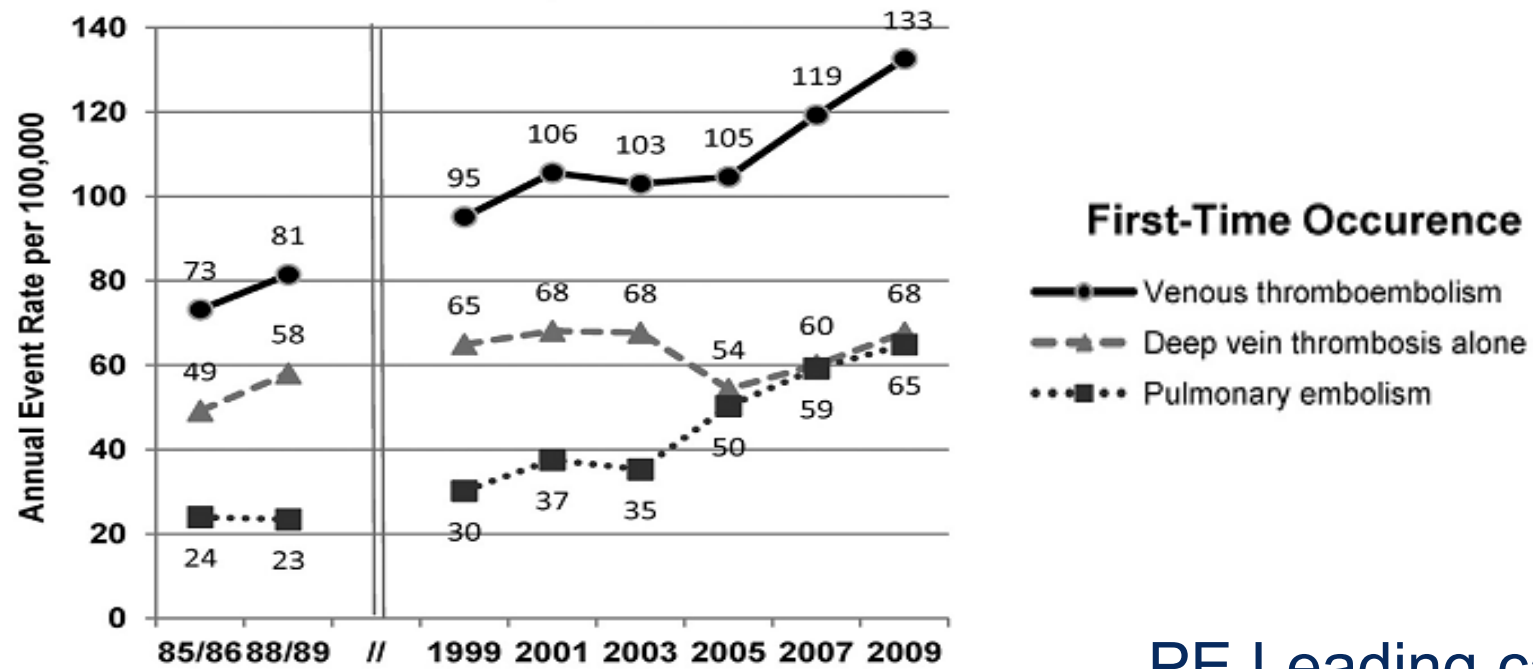


**UP TO 1/3 OF DVT
PATIENTS DEVELOP A
PULMONARY
EMBOLISM (PE)**

**50%+ CAN DEVELOP
POST THROMBOTIC
SYNDROME**

Source: sirweb.org

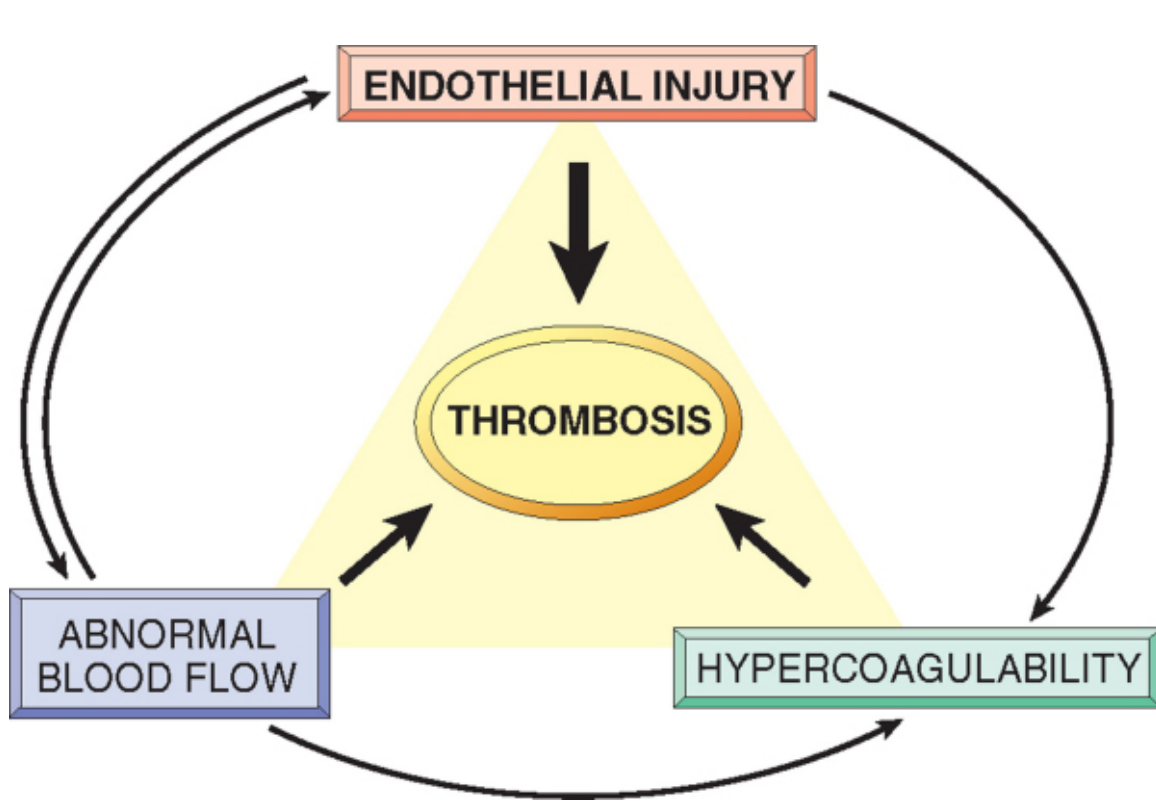
Acute DVT Epidemia



PE Leading cause of preventable in-hospital mortality

Huang et al - Am J Med 2014

Acute DVT Risk Factors



Acute DVT most often occurs in hospitalized patients, particularly those with cancer or following surgical procedures, but also occurs in the general public...



DVT Treatment Goals

- Prevent pulmonary embolus & associated mortality
- Prevent limb loss (venous gangrene)
- Alleviate acute symptoms
- Prevent post-thrombotic syndrome



From acute DVT to PTS (Post-thrombotic Syndrome)

35-50% of IF DVTs will progress to PTS
15% Severe PTS

Chronic Deep Vein Changes



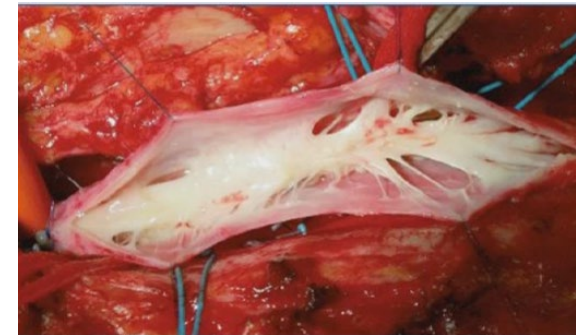
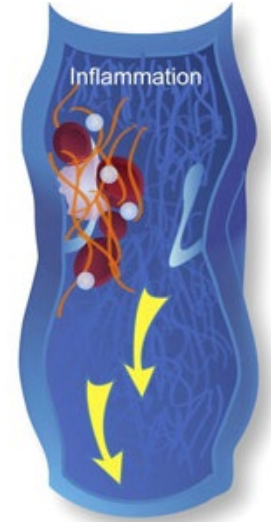
3 months



1 year



2 years



From acute DVT to PTS

35-50% of IF DVTs will progress to PTS
15% Severe PTS

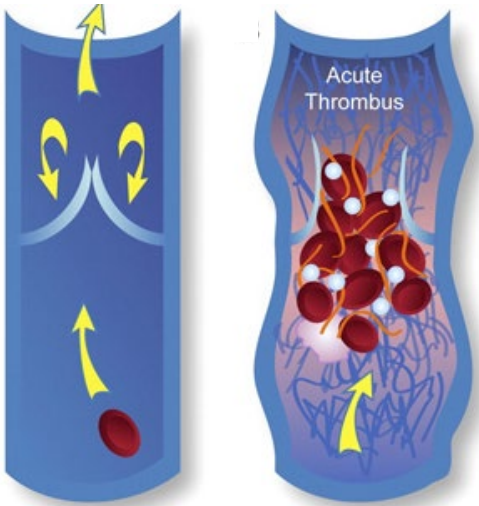
Chronic Deep Vein Changes

Pain
Swelling
Claudication
Pigmentation
Ulceration

3 months

1 year

2 years

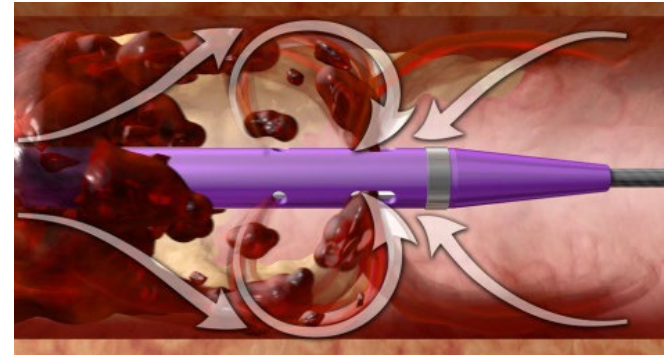
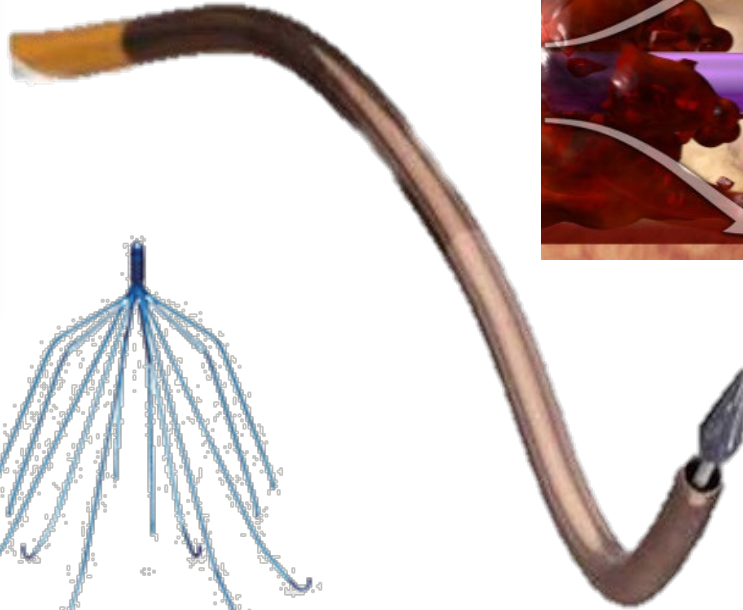


DVT Treatment Options

OBSERVATION

Anticoagulation

INTERVENTION



Anticoagulation is the Standard of Care

**Critical to obtain
therapeutic level in 24hrs**

Advantages:

- Prevents Clot propagation
- Reduces occurrence of a PE
- Can decrease symptoms / recurrence

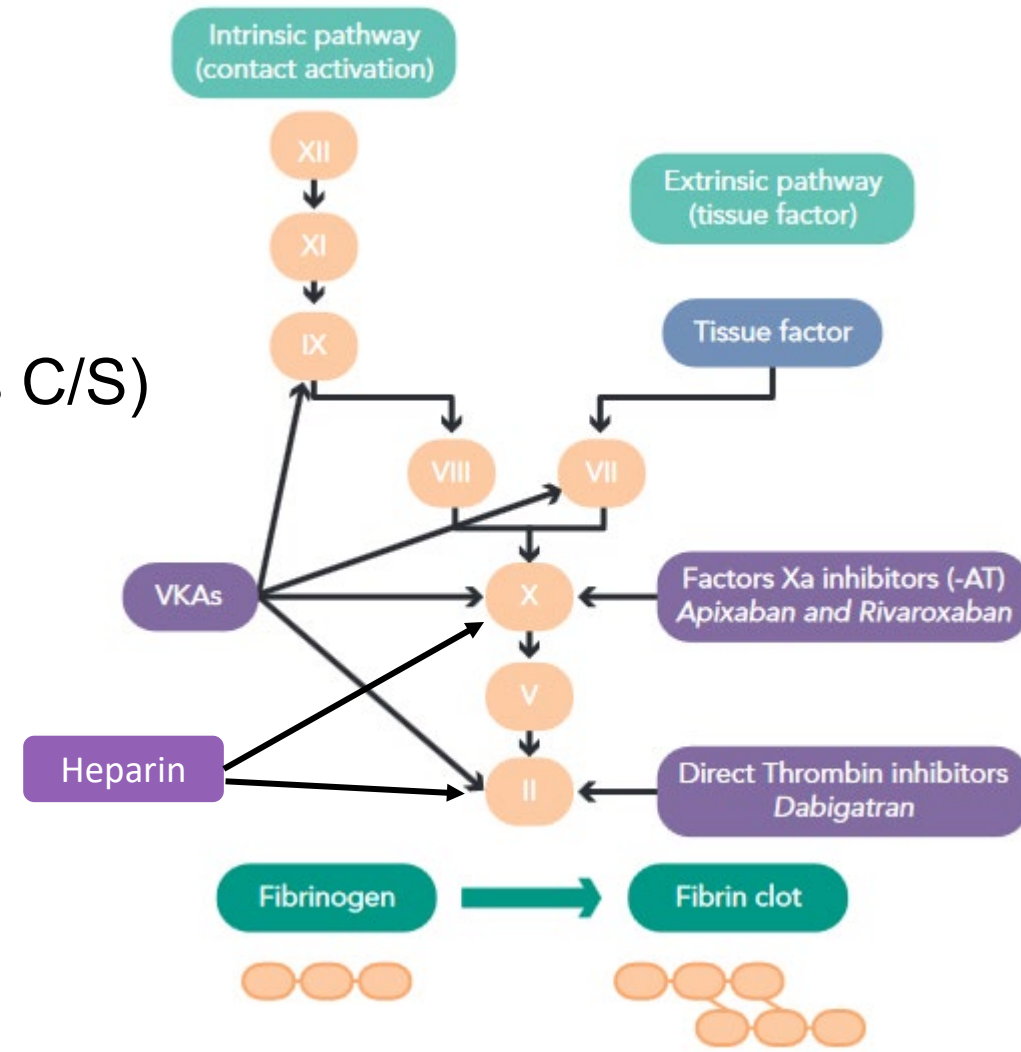
Disadvantages / Side effects:

- <4% will have complete thrombus resolution
- Has not been shown to reduce incidence of valve damage
- Bleeding – HIT (heparins) - Osteoporosis (Vit. K ant)



Anticoagulation Decision Making – Type and Duration

- **Heparin / LMWH / Fondaparinux**
 - Binds to Antithrombin (blocks Xa & IIa)
 - Initiate immediately
- **Coumadin**
 - Vit K antagonist (inhibits II, VII, IX, X & proteins C/S)
 - Start on first day (always overlap with heparin)
 - Target INR 2-3 (need for repeat blood draws)
- **Direct Oral Anticoagulants (DOACs)**
 - Factor Xa or IIa (Thrombin) inhibitors
 - No need for monitoring



Anticoagulation Decision Making – Type and Duration

Decision making is largely guided by VTE subgroup

- Provoked vs Unprovoked
- Cancer-associated vs No cancer
- Lower extremity
 - Proximal vs Distal DVT – 5x recurrence
- Upper extremity
 - Catheter vs non-catheter associated

Compression – European Guideline

Recommendation 31

For patients with proximal deep vein thrombosis, early compression at 30 – 40 mmHg with either multilayer bandaging or compression hosiery, applied within 24 hours, is recommended to reduce pain, oedema, and residual venous obstruction.

Class	Level	References
I	A	Partsch & Blattler (2000), ¹⁸¹ Rousselle et al. (2000), ¹⁸² Argüelles et al. (2000), ¹⁸³ et al. (2000), ¹⁸⁴

Recommendation 32

For patients with proximal deep vein thrombosis, use of below knee compression stockings should be considered in order to reduce the risk of post-thrombotic syndrome.

Class	Level	References
IIa	A	Kahn et al. (2014), ¹⁷³ Prandoni et al. (2004), ¹⁷⁴ Partsch et al. (2004), ¹⁷⁶ Brandjes et al. (1997), ²⁰² Aschwanden et al. (2008), ²⁰⁸ Ginsberg et al. (2001) ²¹²



Some patients need more than AC & Compression ...

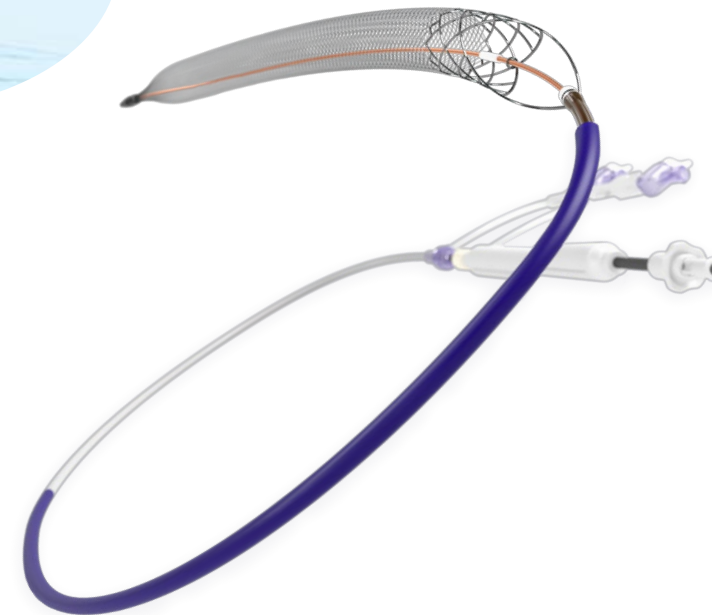
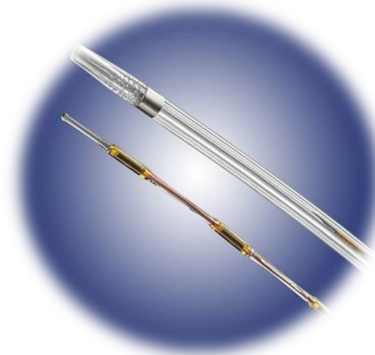
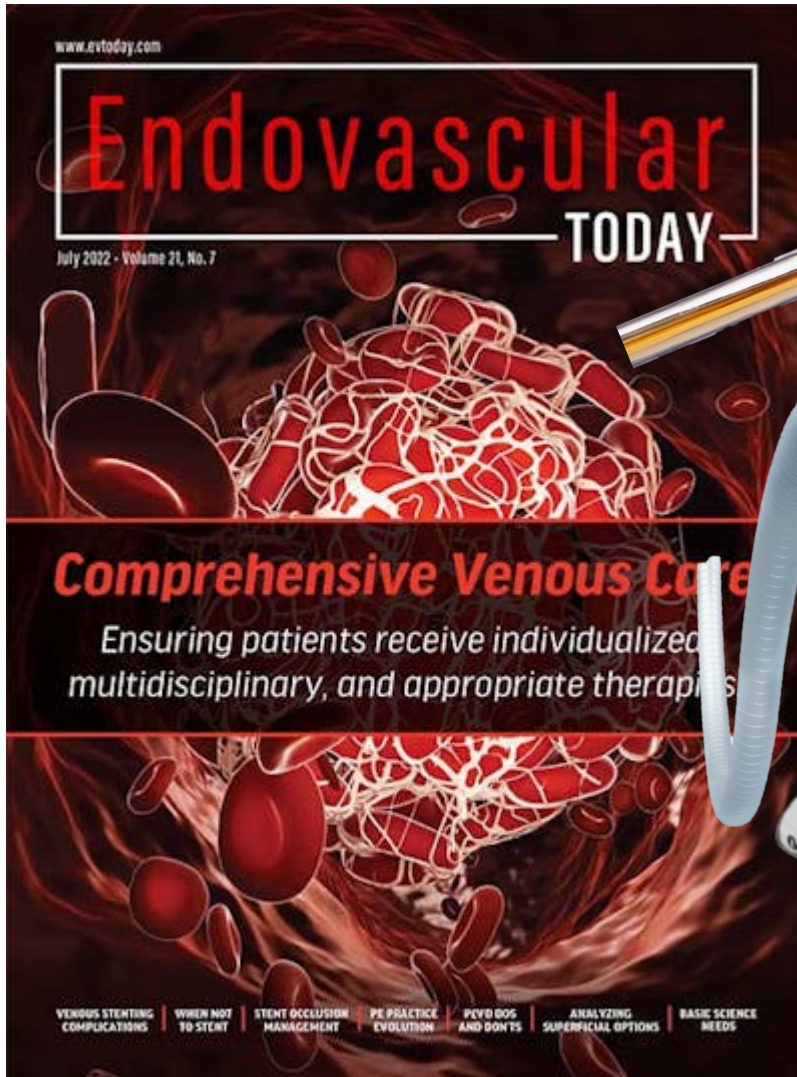


Choose the ideal candidate and intervene early



- **Symptomatic Iliofemoral/Caval DVT**
 - **Active – Good Risk Patient**
- **<14 days**
 - **Thrombus damages valve**
 - **Thrombus turns to collagen**

Know your tools' strengths and weaknesses...



Indigo CAT 12 Lightning - Penumbra

Intelligent Aspiration

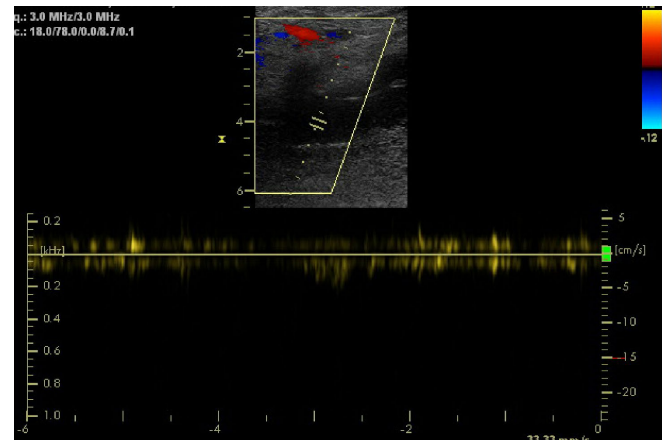
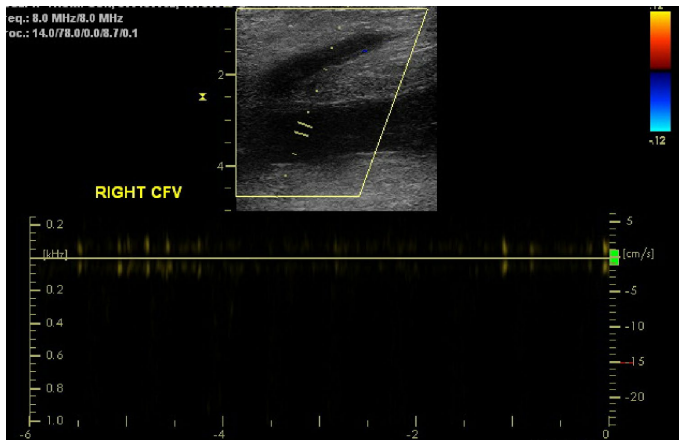


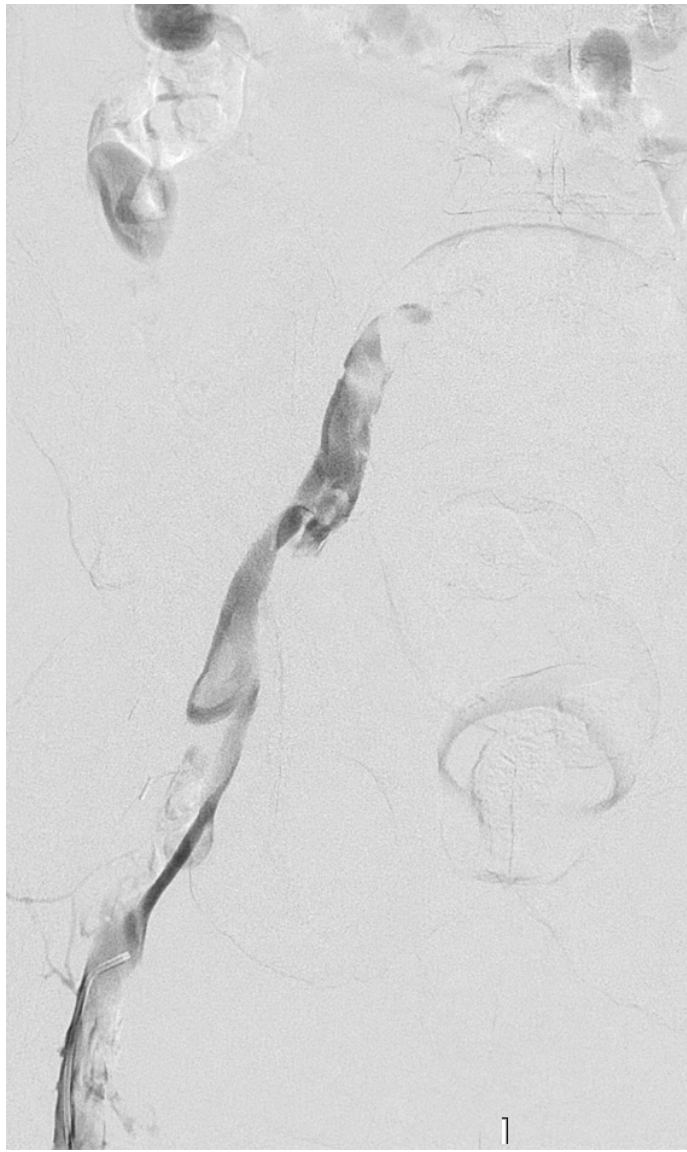
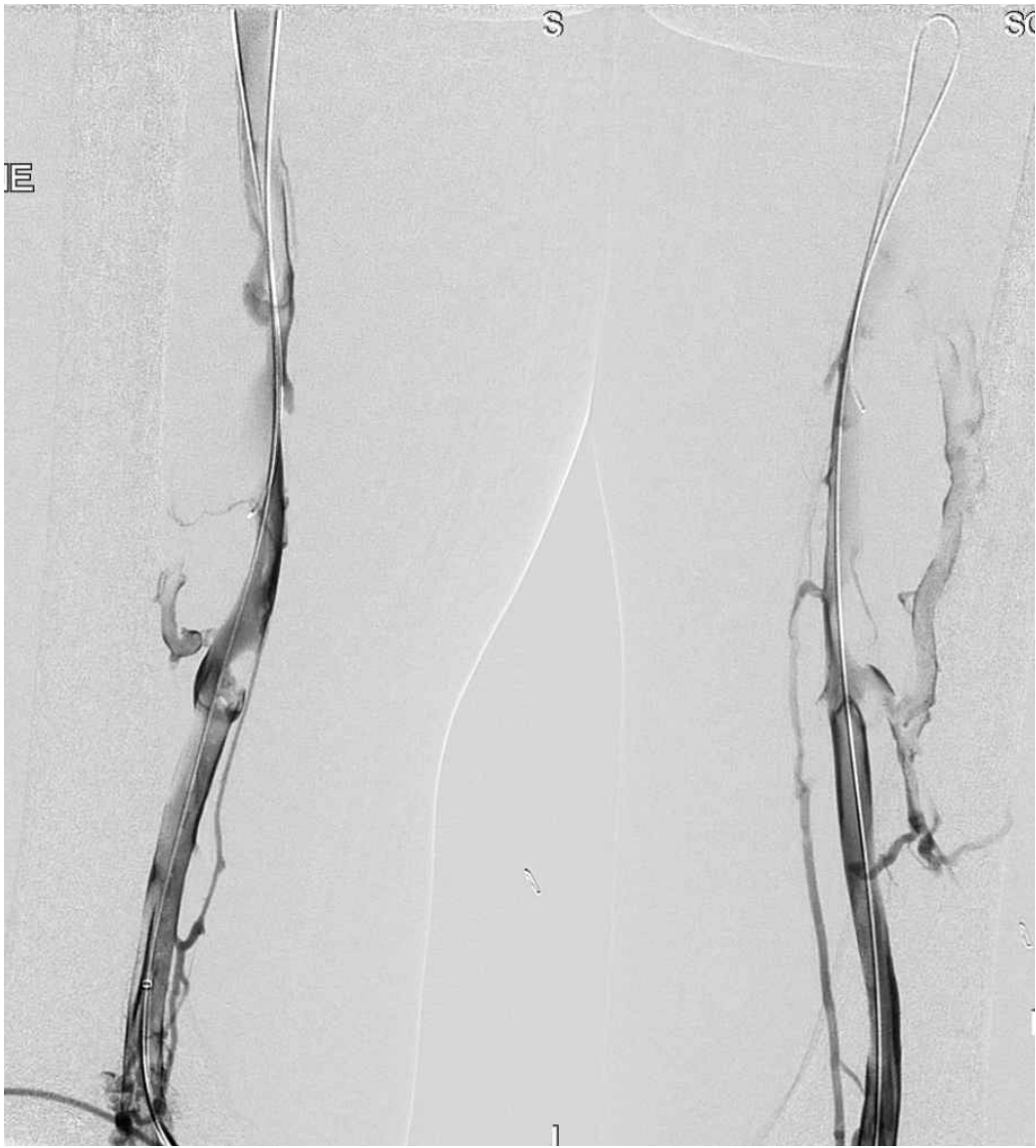
**Lightning Flash
16Fr**

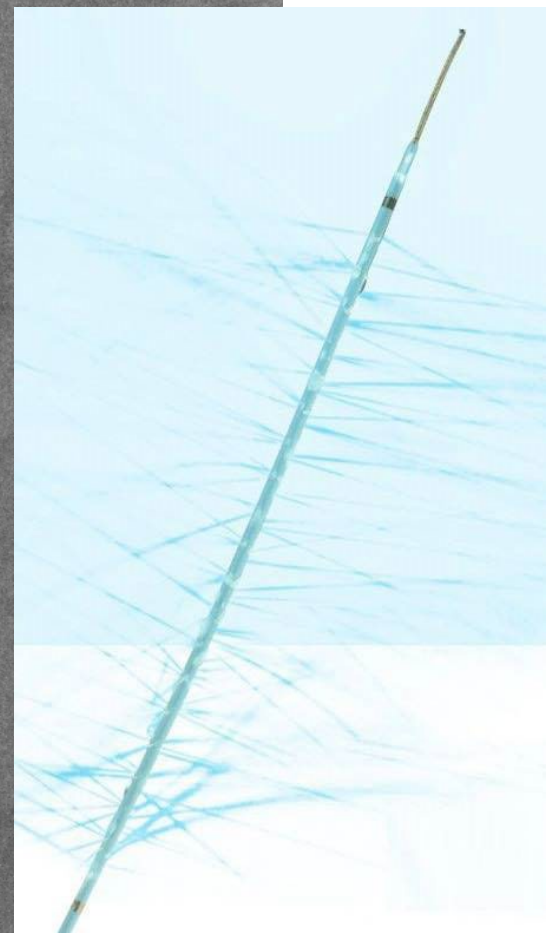
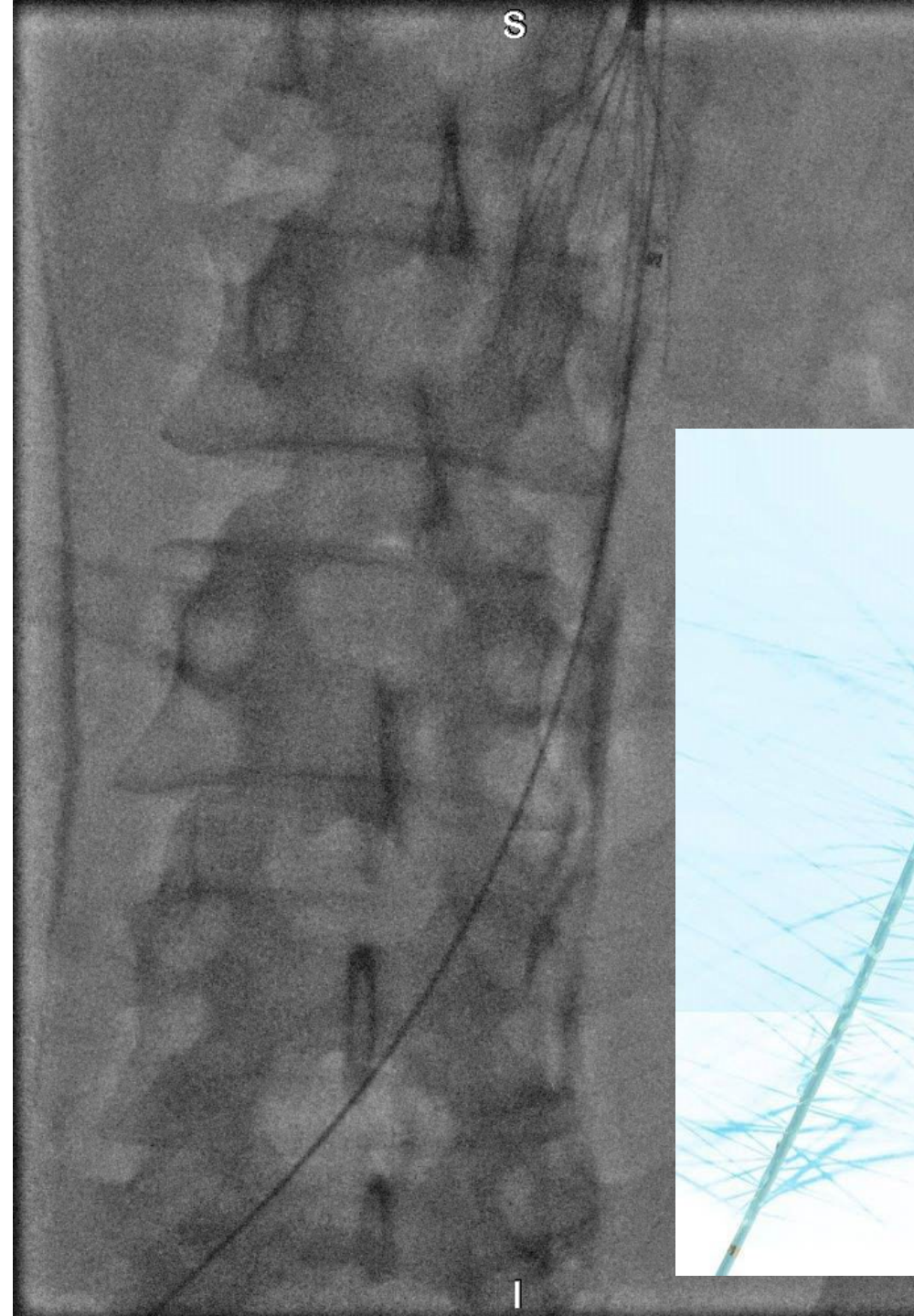
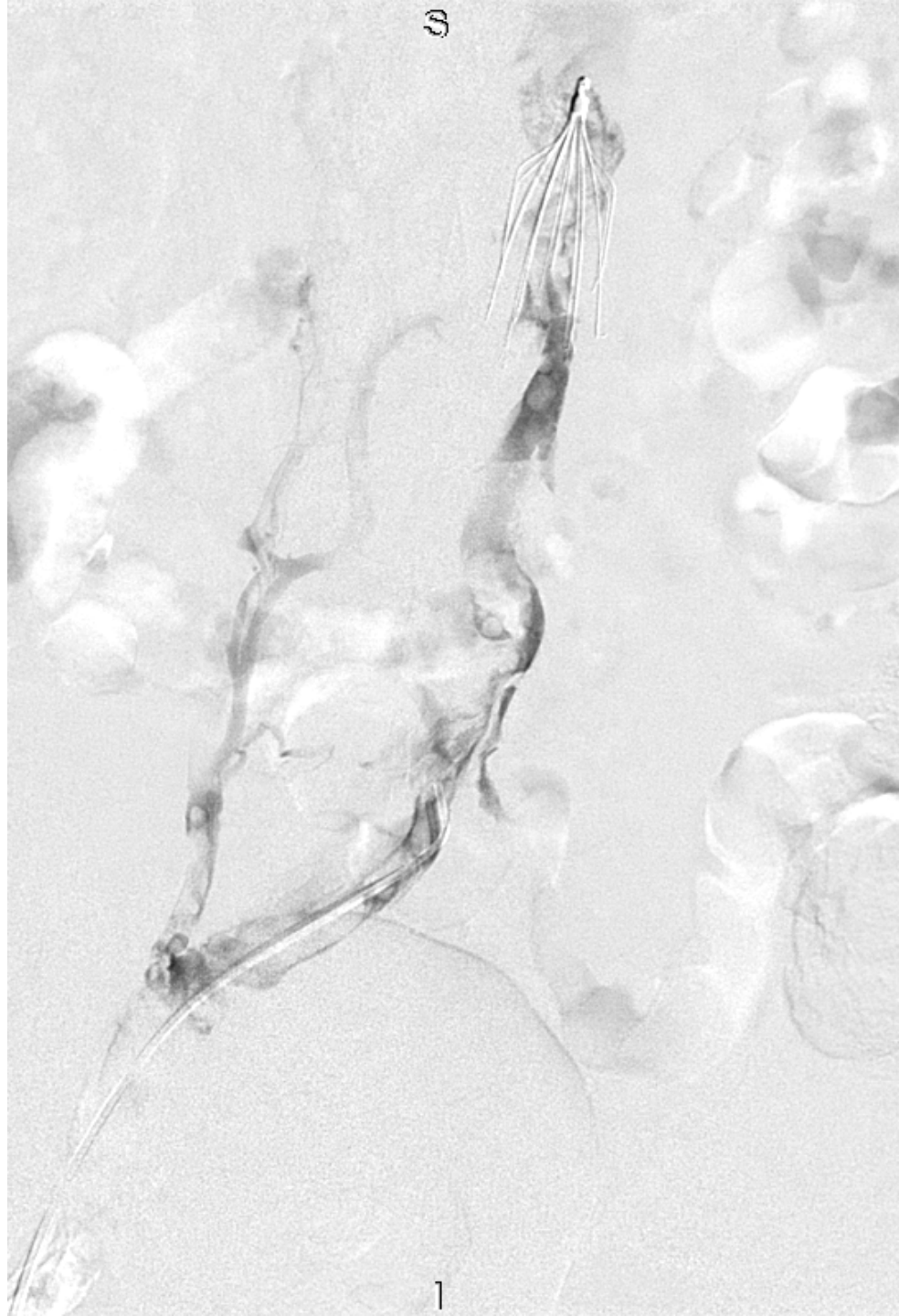


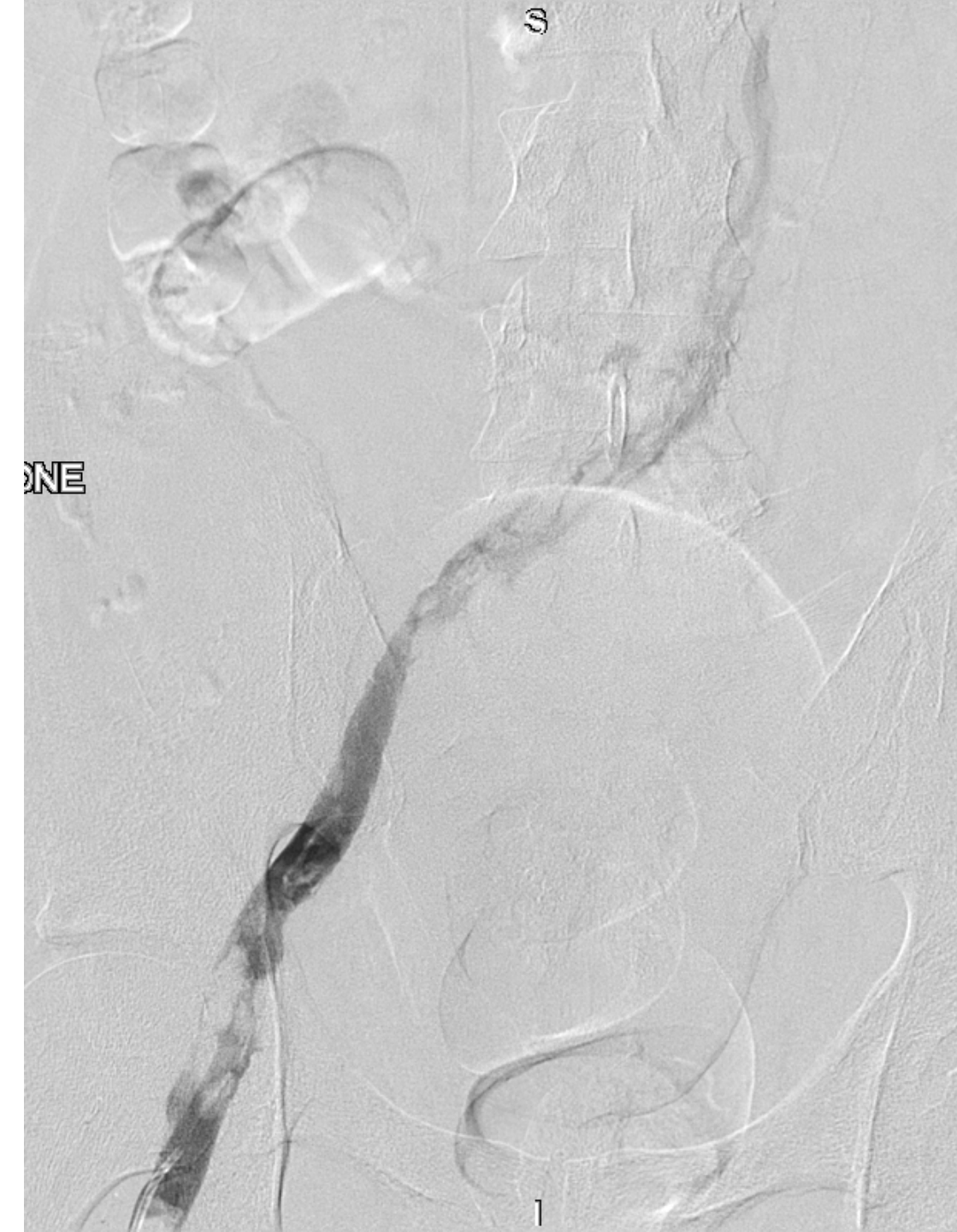
2021: 43 y.o. Male with Bilateral Swelling and Pain

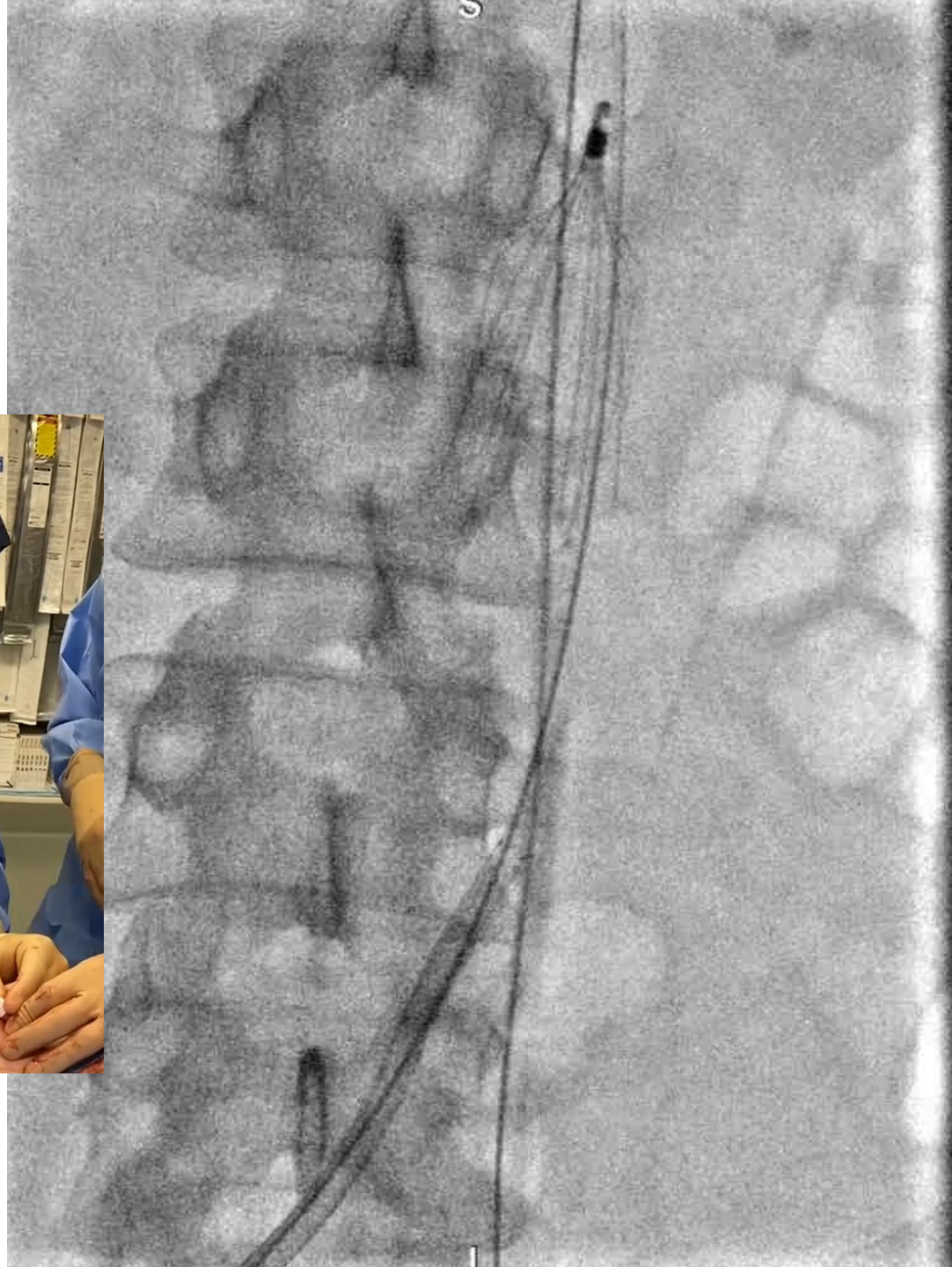
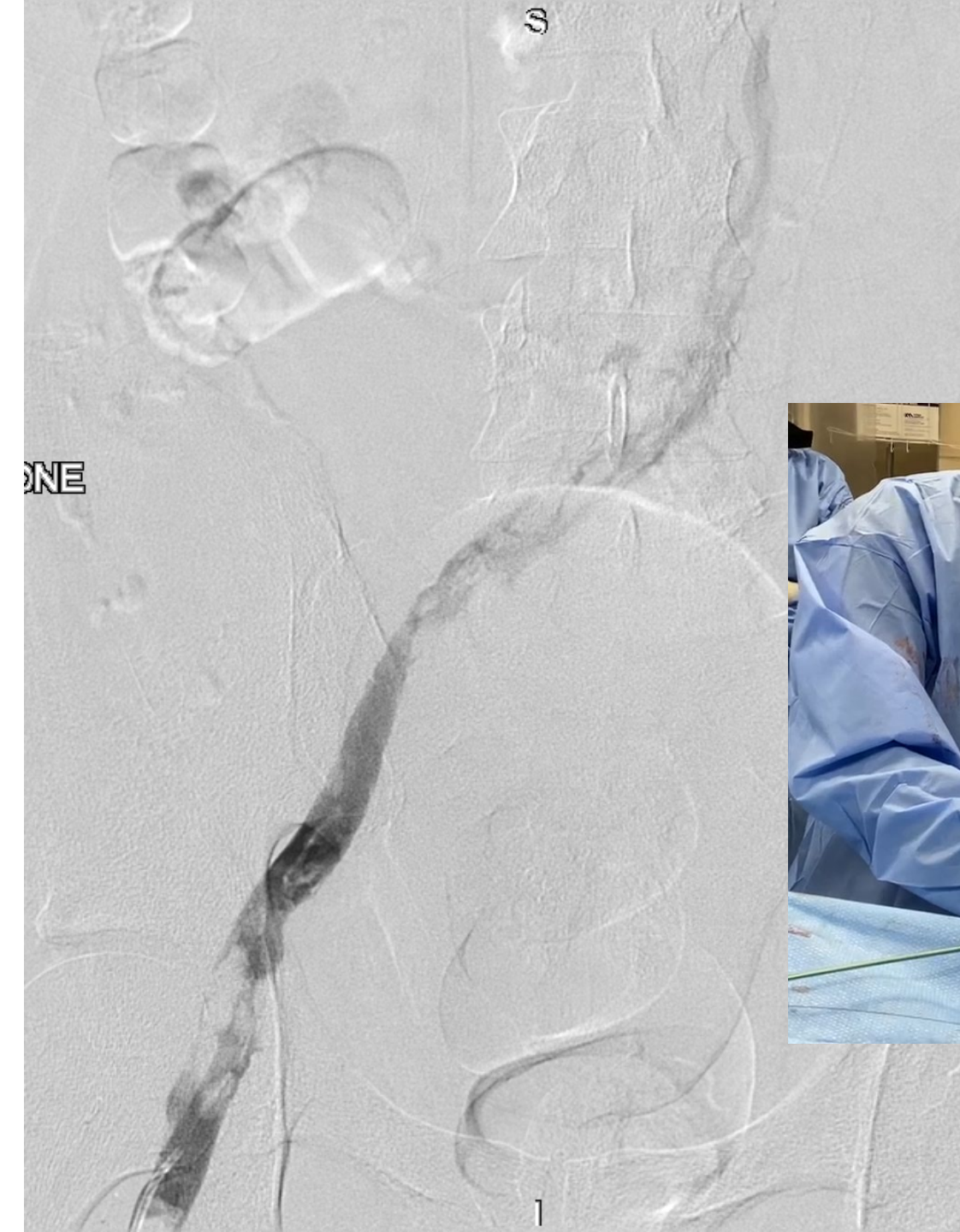
- Bilateral leg swelling
- Severe Back/Leg/Groin pain
- Hx of DVT/PE and surgical thrombectomy
- IVC filter was placed
- 48 hour heparin non improvement



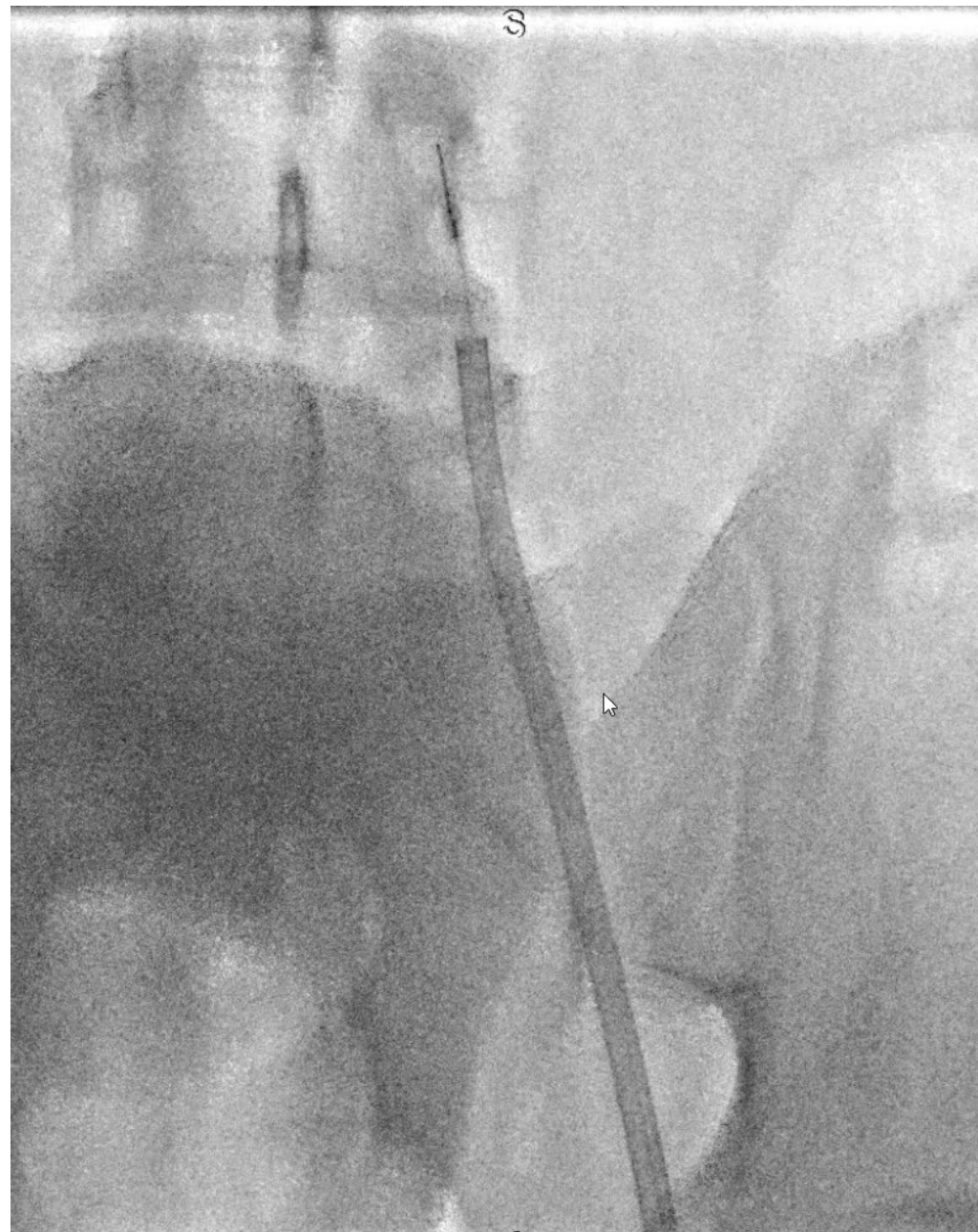
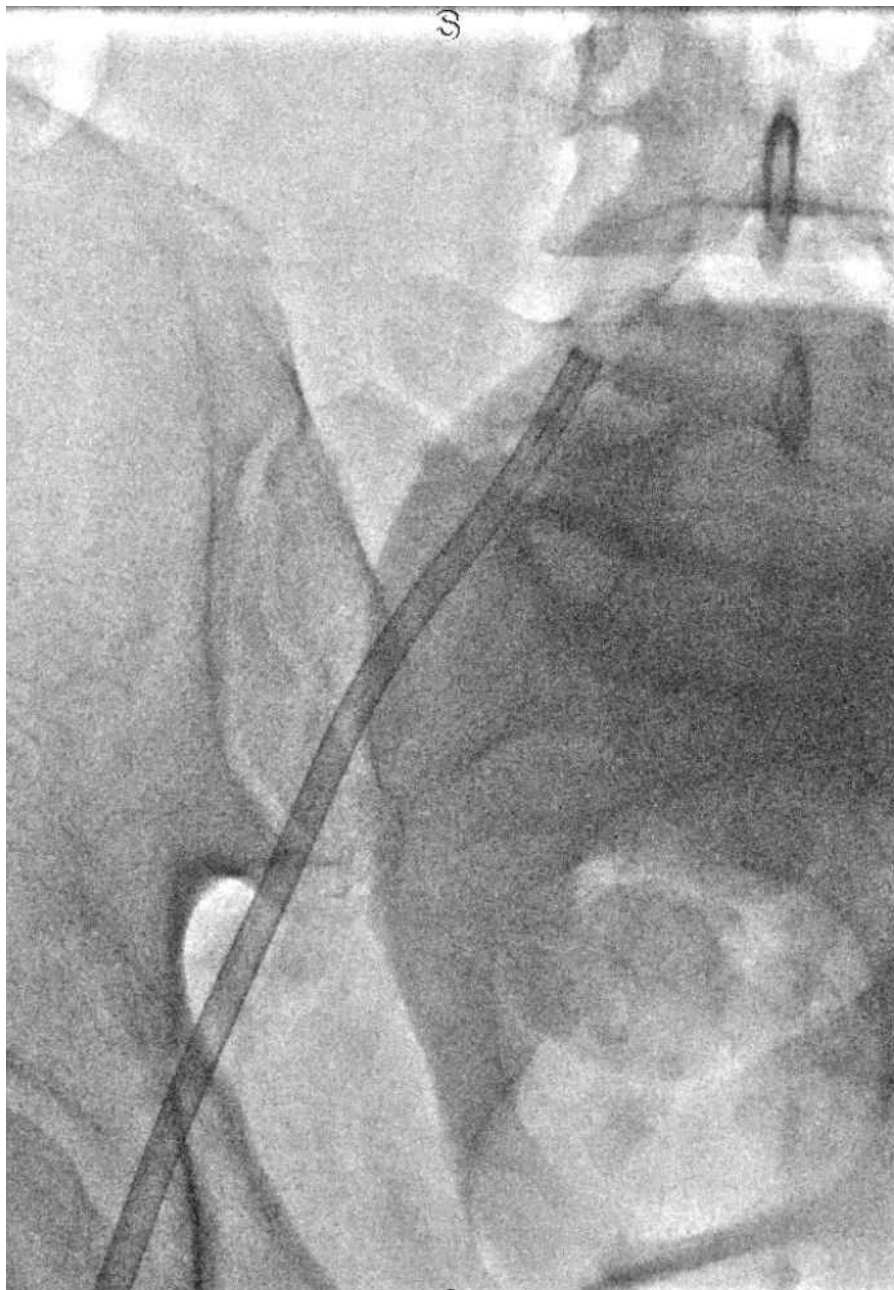




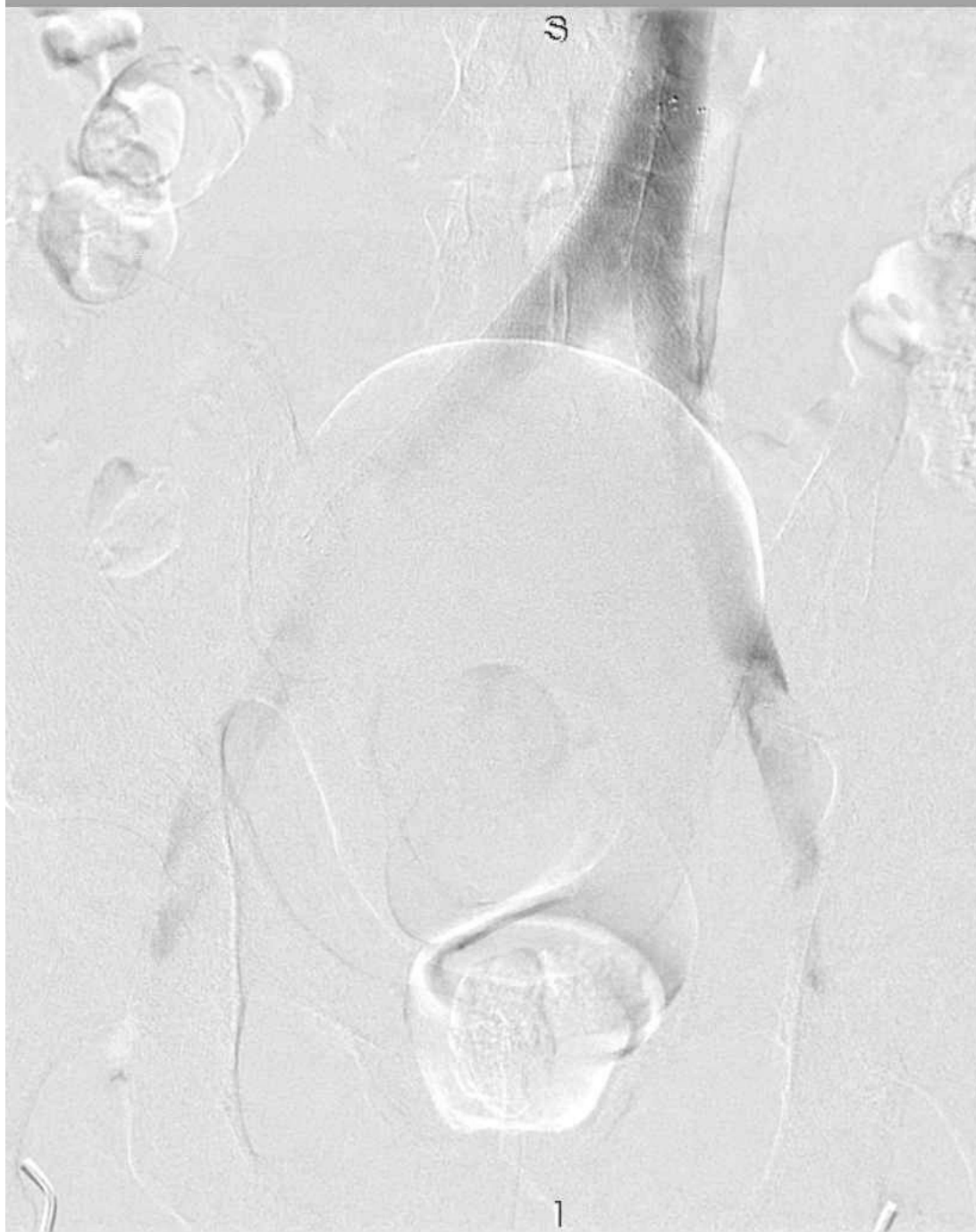


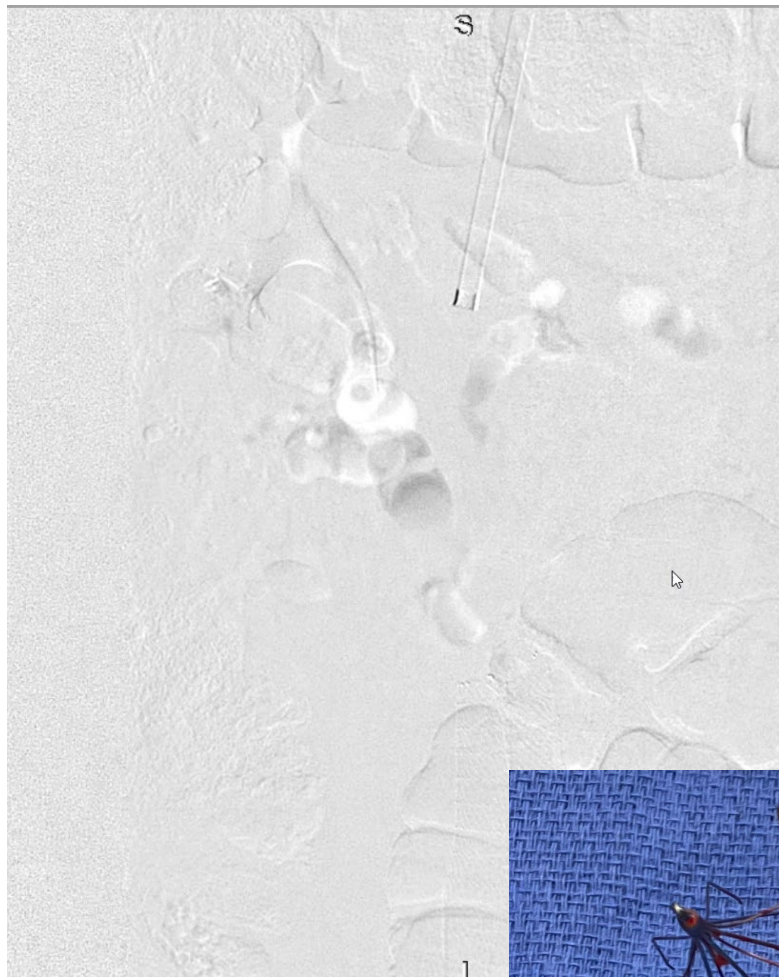
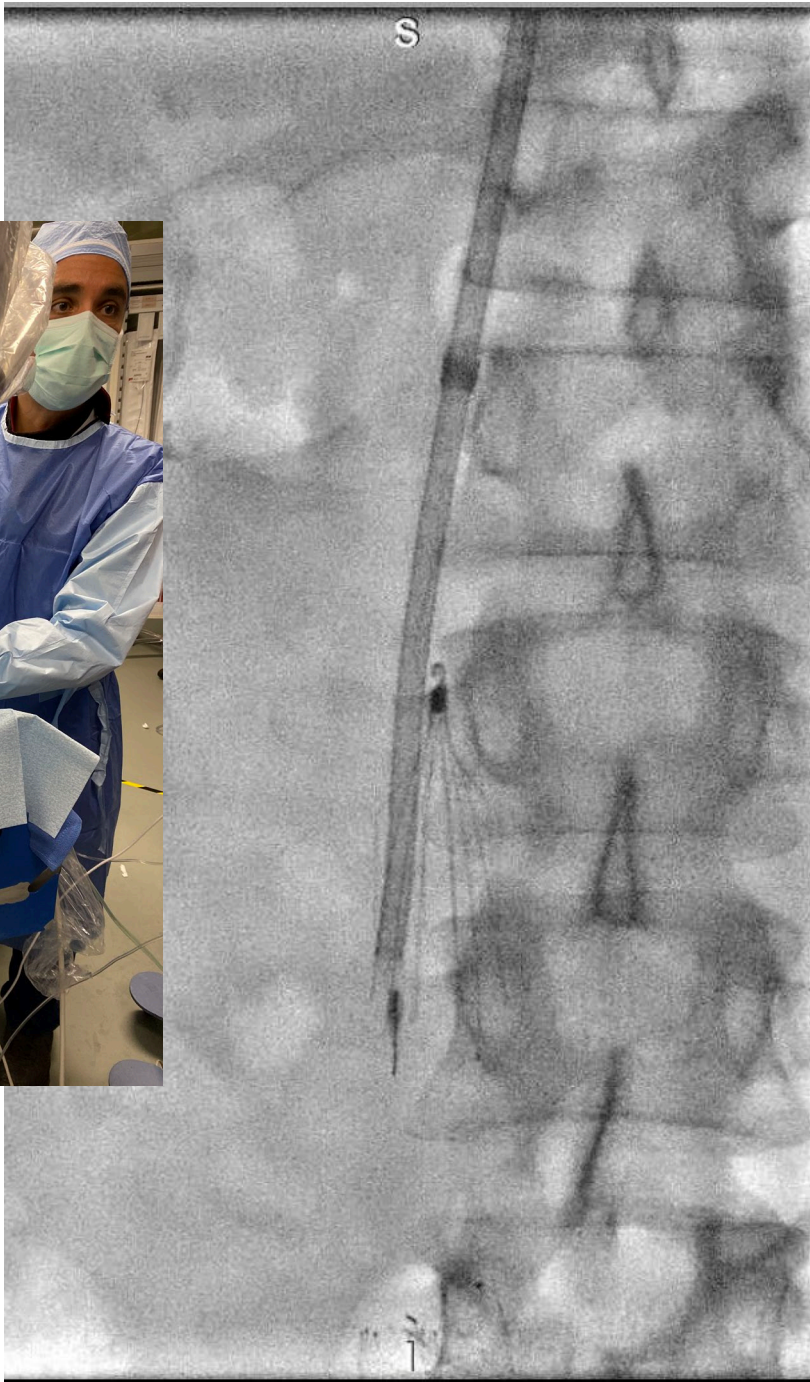












ClotTrievers- Inari

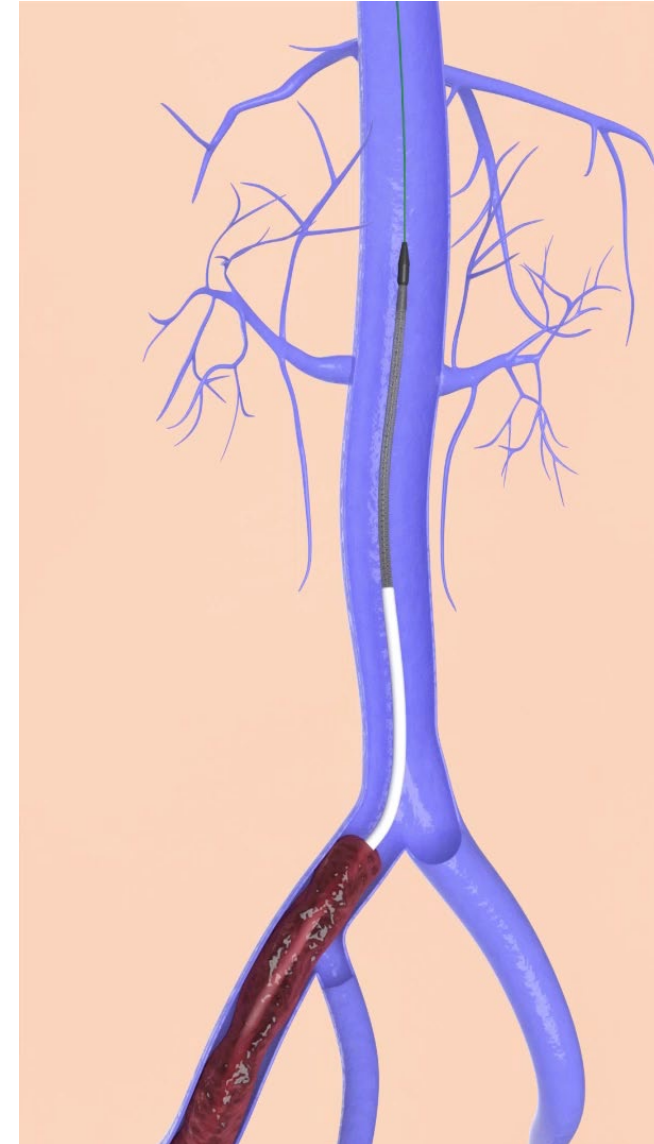
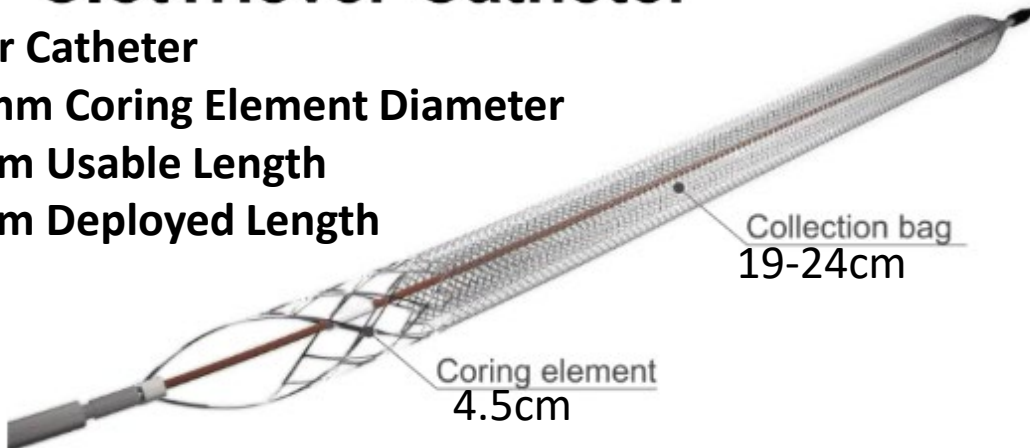
ClotTrievers Sheath

13 or 16Fr Sheath
15cm Length
14mm Funnel Diameter

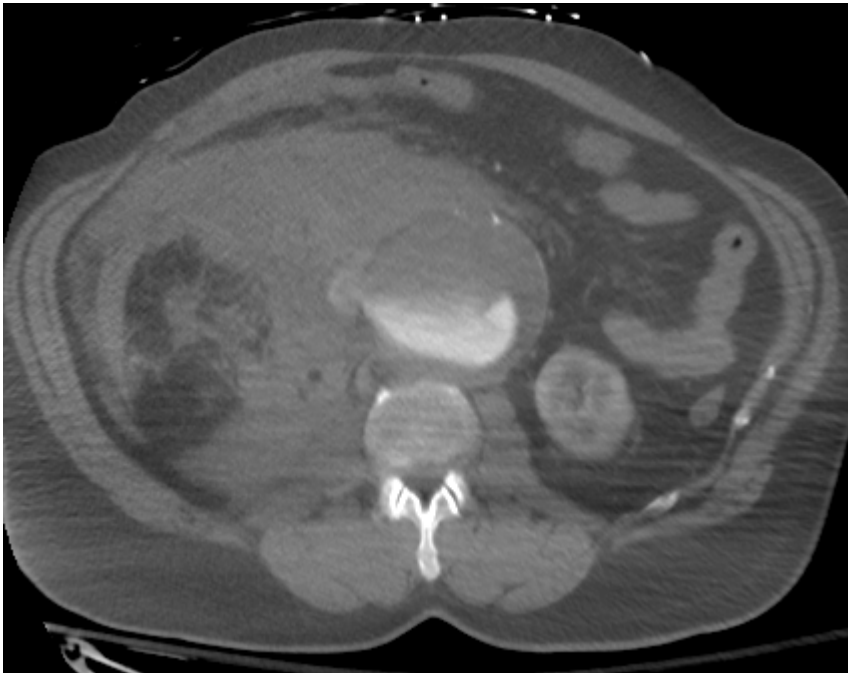


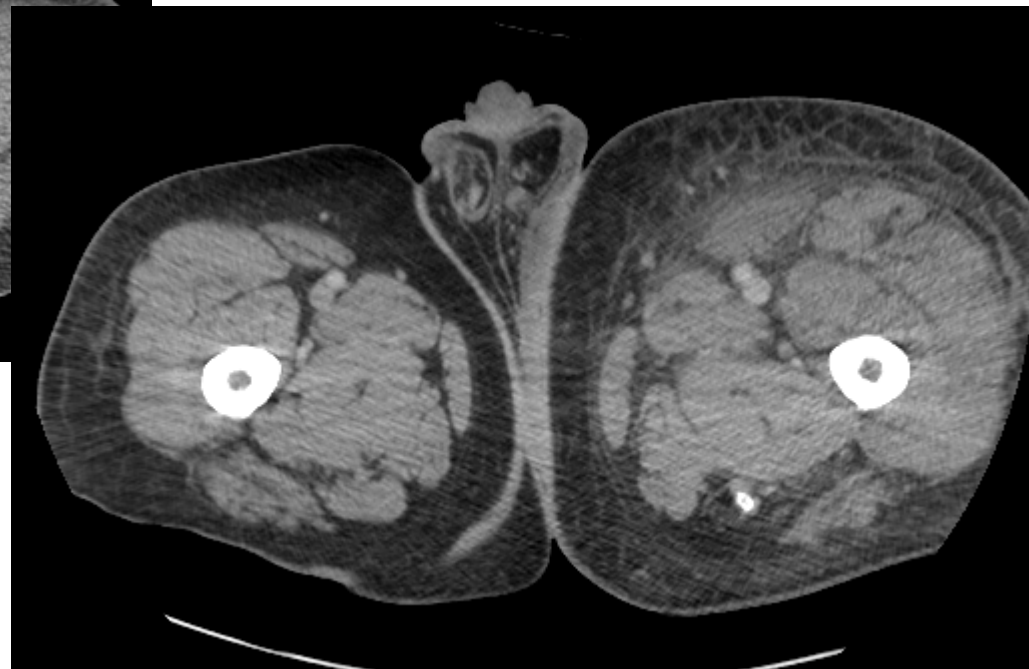
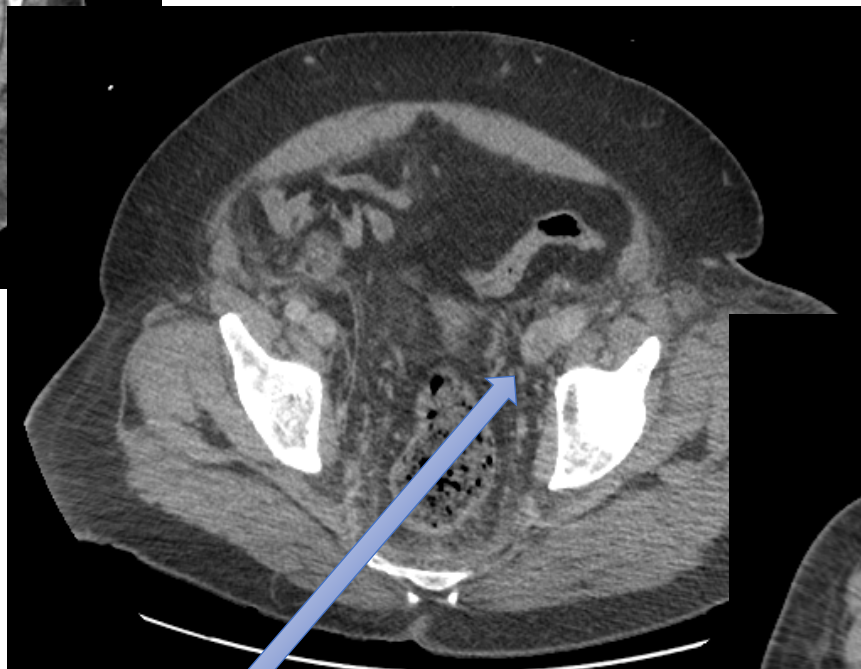
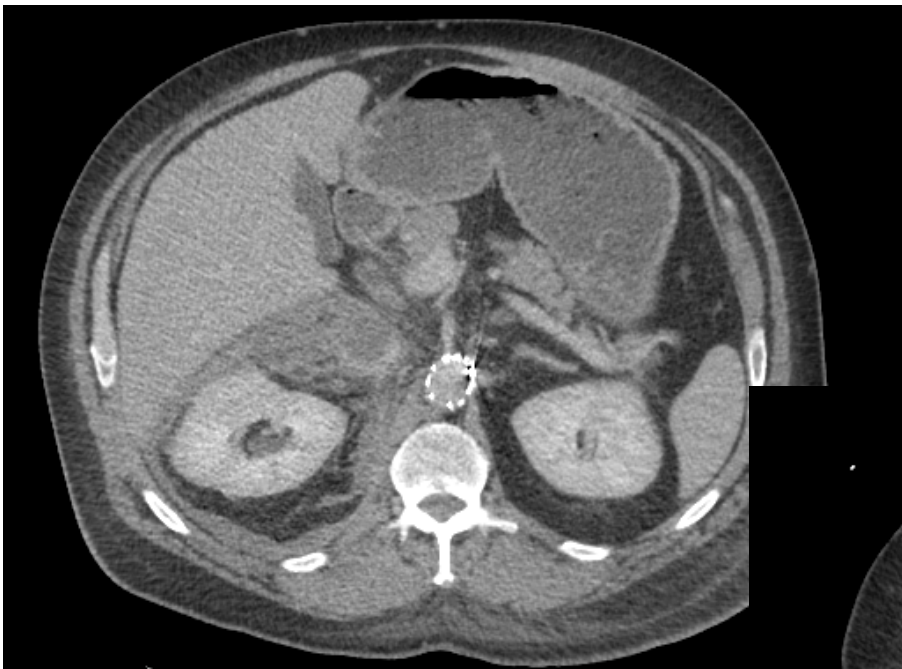
ClotTrievers Catheter

11Fr Catheter
16mm Coring Element Diameter
74cm Usable Length
31cm Deployed Length

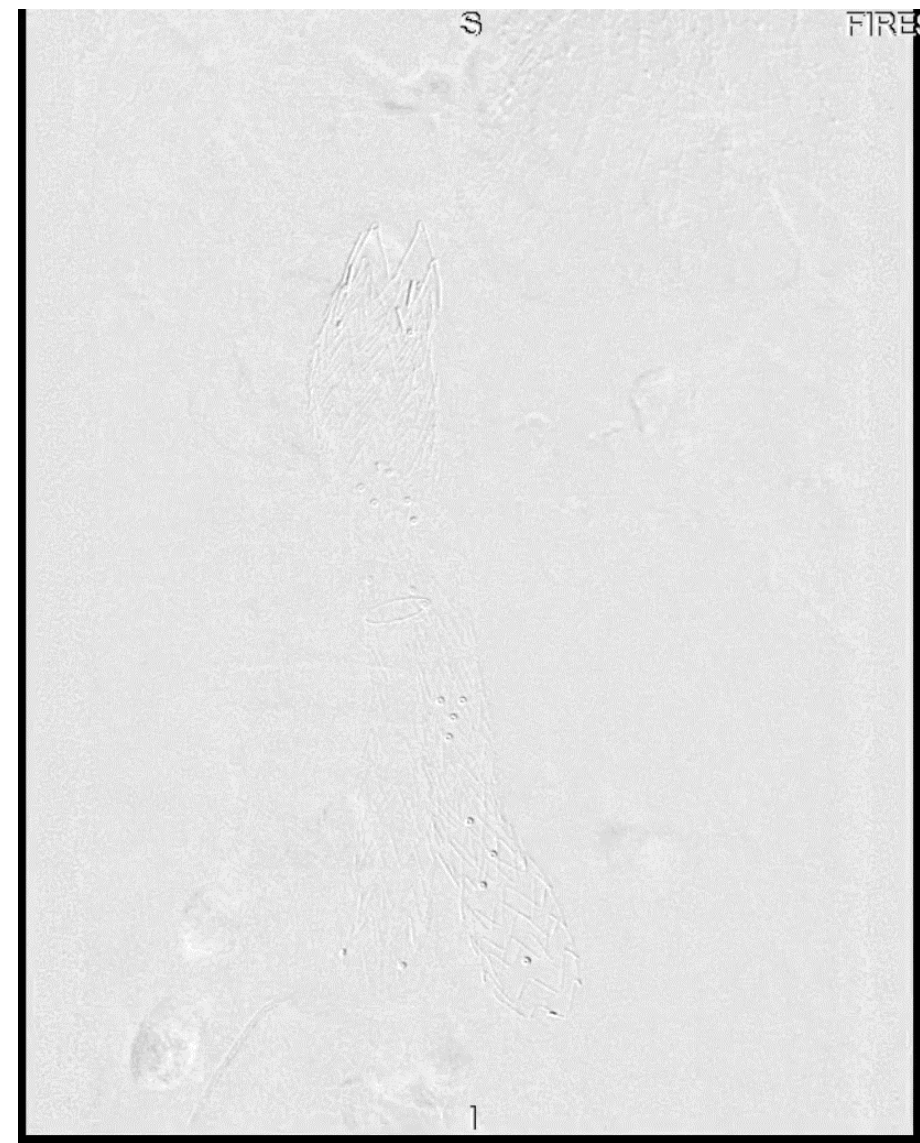
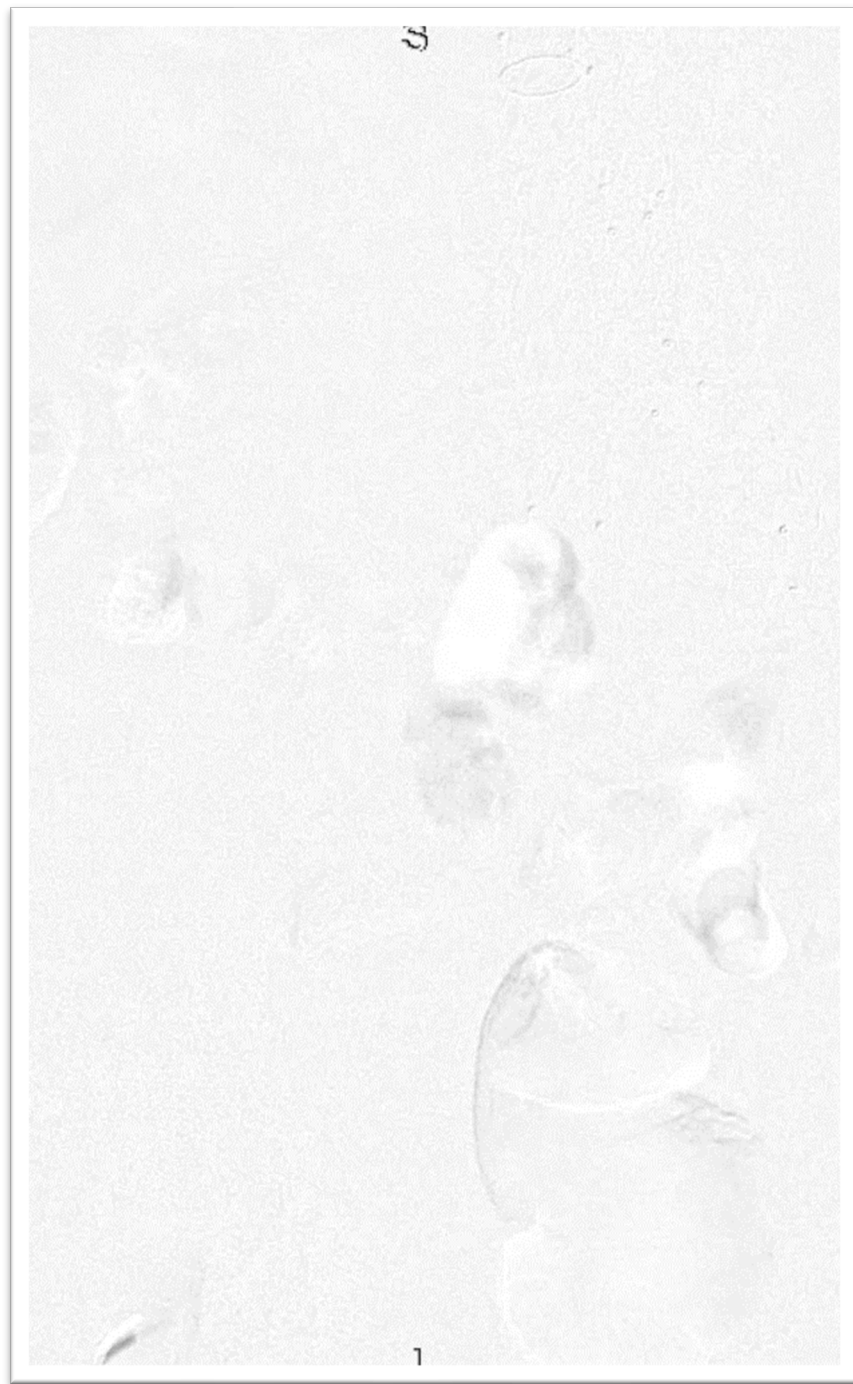


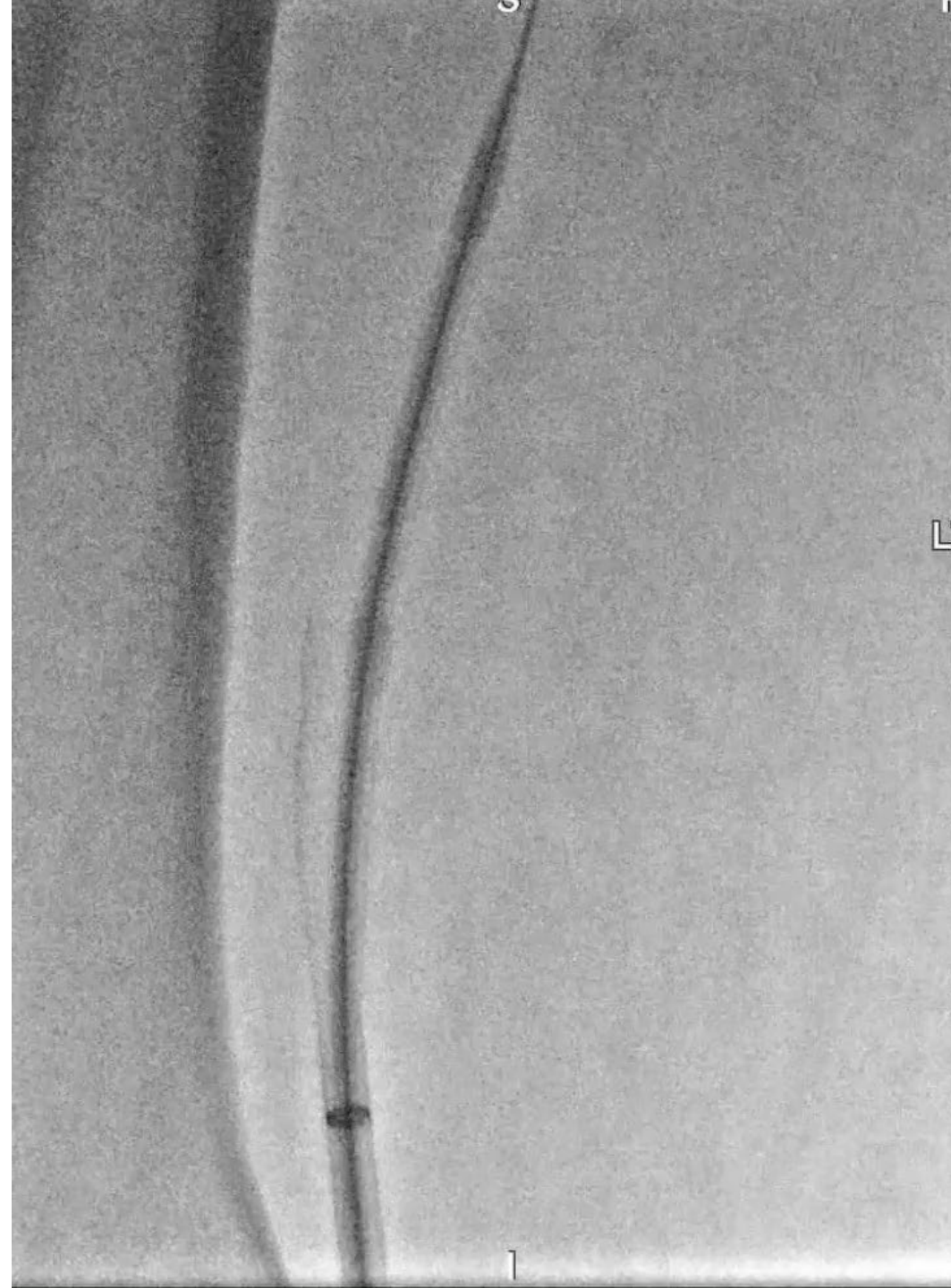
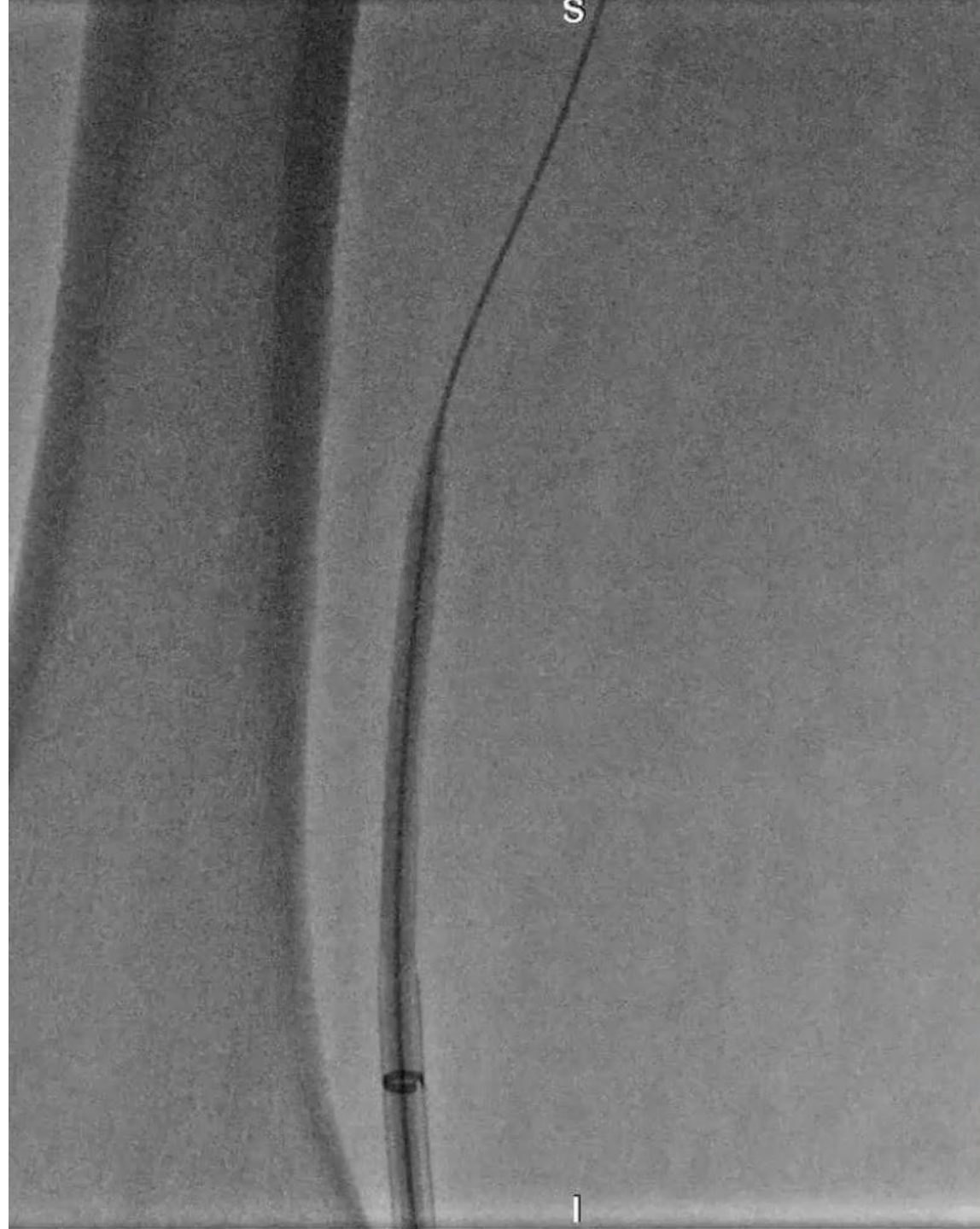
- 54 y.o. male rAAA – EVAR
- POD # 2 Thrombocytopenia – HIT
- POD # 3 Left Iliocaval DVT
- Swelling / pain and numbness for >48h

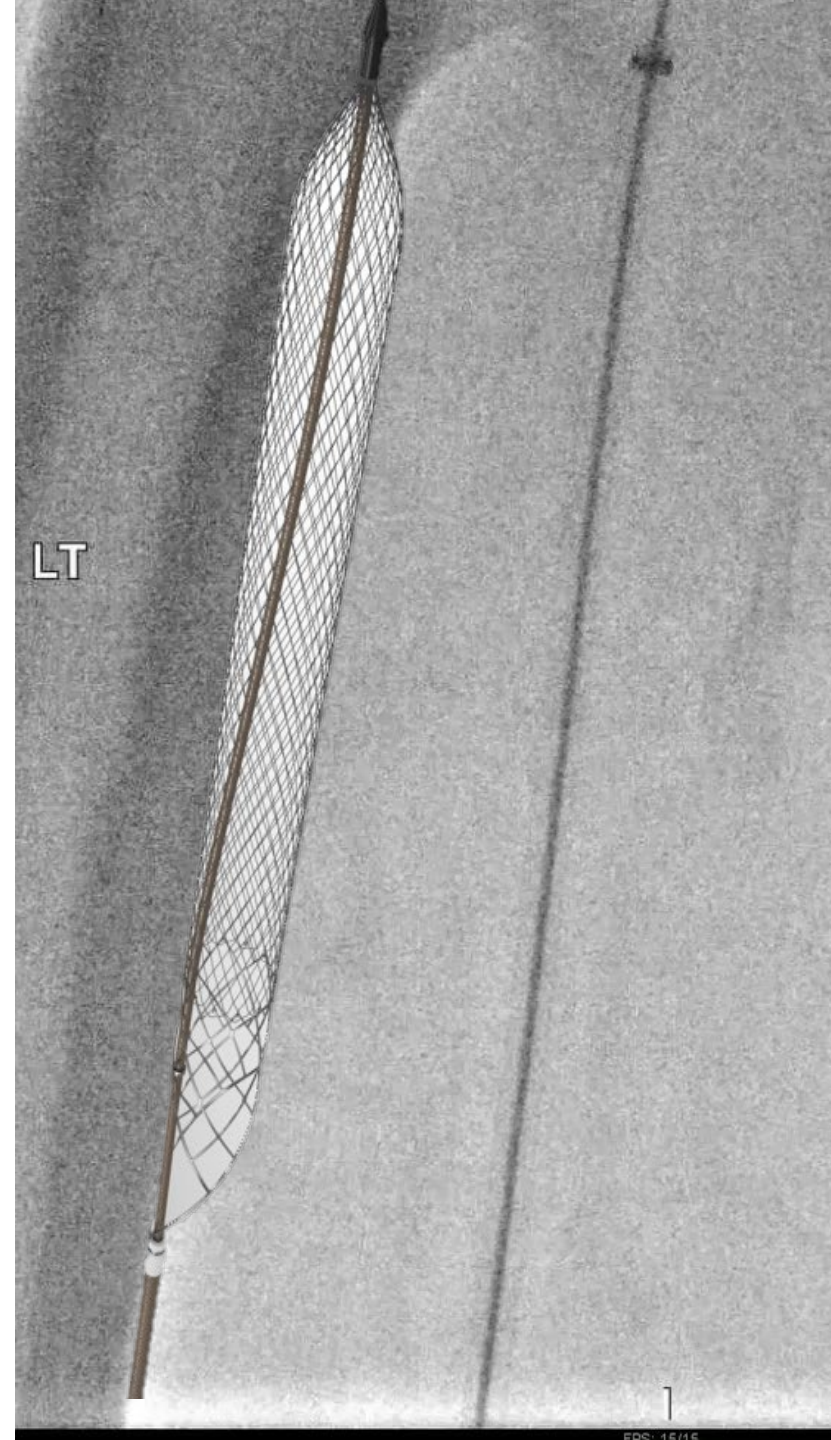
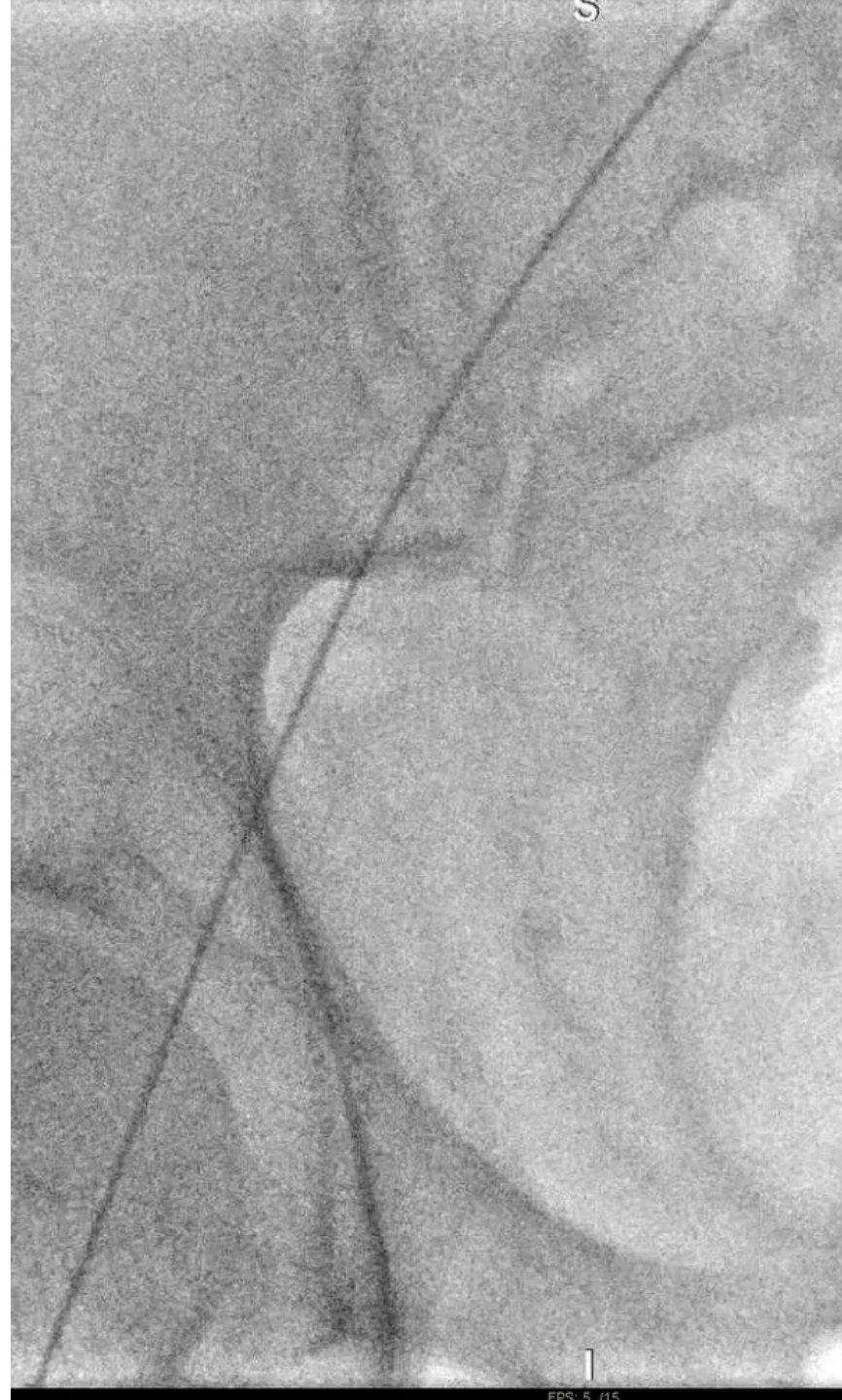
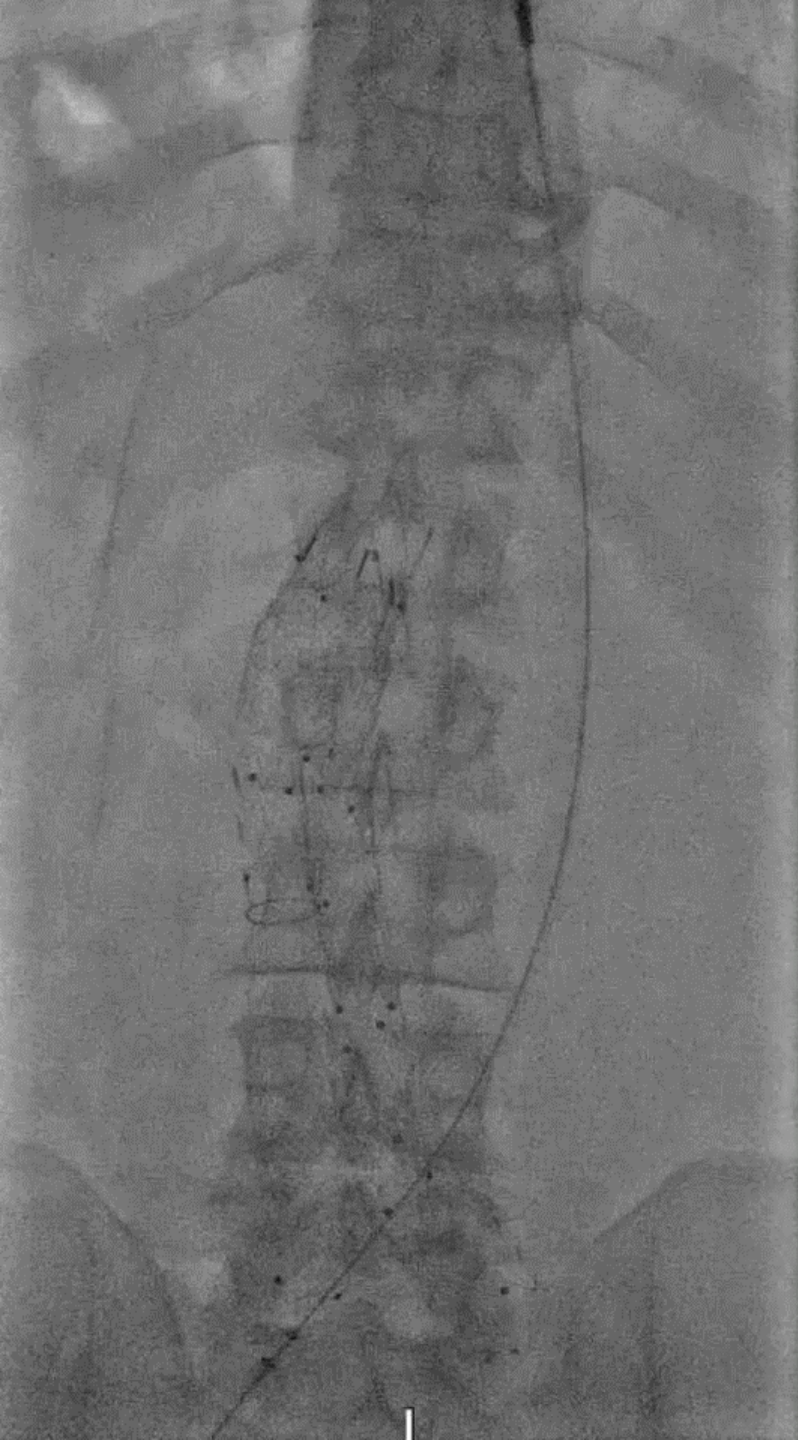


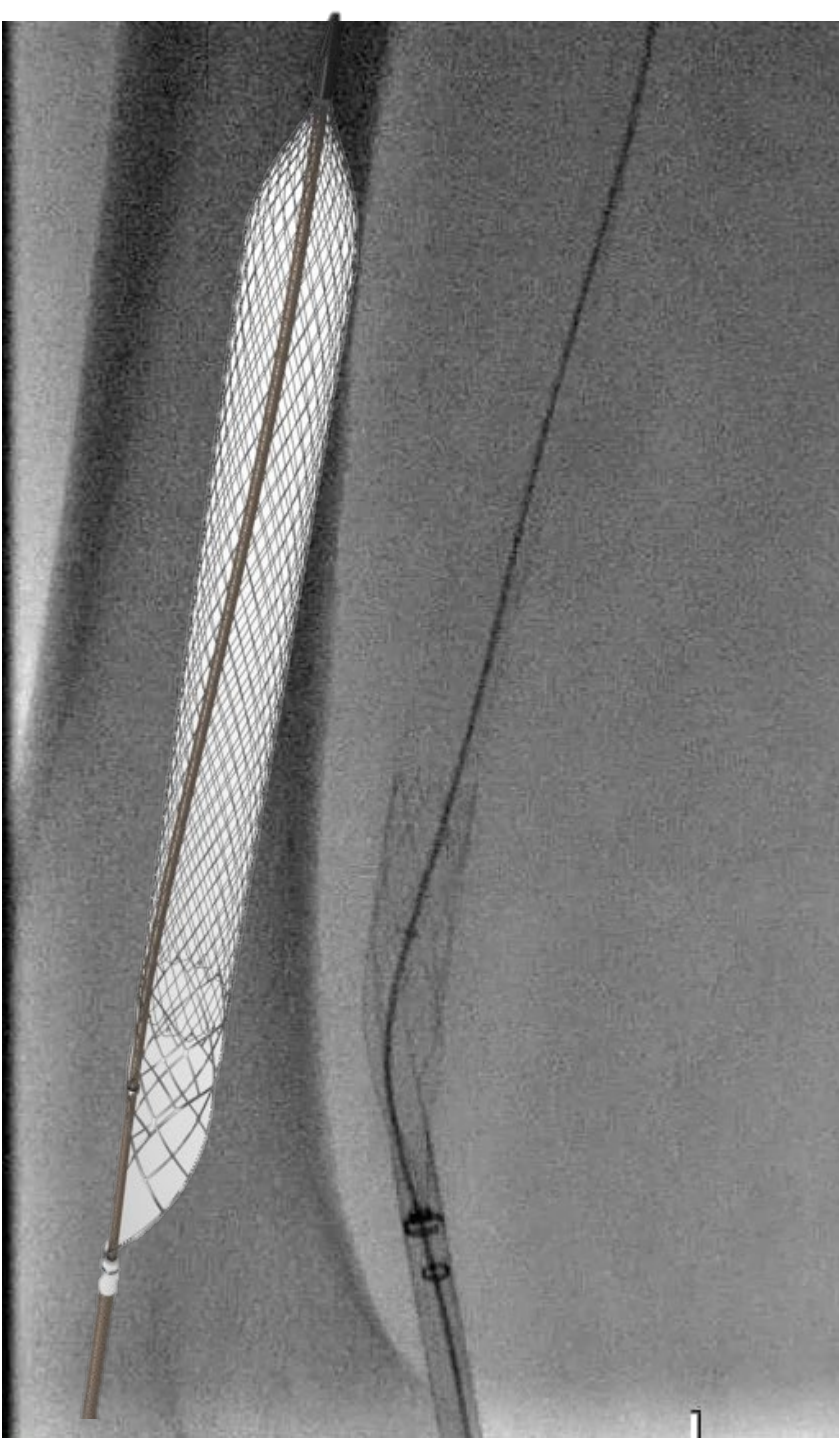


Left external iliac
vein thrombus











Take Away Messages

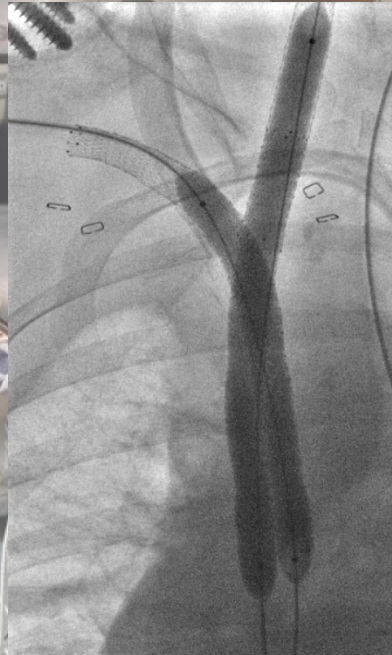
- Acute DVT is on the rise
- Most frequently seen in hospital patients and malignancies
- Don't forget anticoagulation prophylaxis for inpatients
- Treatment is anticoagulation for the vast majority of patients
- Lifestyle changes and compression will alleviate symptoms
- Invasive treatments of thromboaspiration are meaningful for **symptomatic** iliofemoral DVTs and in patients with good life expectancy (PTS prevention)

Thank you for your attention!

efavgerinos@gmail.com



@makisavgerinos



Interested in Vascular Surgery?