CLINICAL-THERAPEUTICAL CORRELATIONS REGARDING THE SURGICAL TREATMENT OF HYDROSTATICAL VARICS IN INFERIOR LIMBS

INTRODUCTION

The varicose disease is a chronic disease, characterized by a degenerative process of the venous wall, which grafts, under the given conditions, permanent venous dilatations, often circumcise and irregular with a sinuous aspect or ampullar, called varicose. The present paper sets out to create some clinical-therapeutical correlations regarding the surgical treatment of hydrostatical varicose of the inferior limbs during the 01.01.2005-31.12.2009 period, cases from the Surgical Ward no.1 at the Timisoara County Clinical Hospital. The paper analyzes objectively the experience of the Timisoara Surgical Ward no.1, in the surgical treatment of hydrostatical varicose of the inferior limbs, treatments sustained by the recent data found in the literature. We have conducted a retrospective study over a 5 year period (01.01.2005-31.12.2009) in patients admitted and surgically treated with the hydrostatical varicose in the inferior limbs; the study is based on the retrospective of observation sheets and the surgical protocols in the analyzed period. The patients diagnosis at admittance shows the preponderance of stages I and II, localized most frequently on the territory of the internal saphena (82%); unilaterally in 796 cases and bilaterally in the rest of the cases (213 cases). The prevalence of the female gender (706 cases) is enrolled in the general data from the references (5,6); the urban area has offered the most patients most probably because of esthetical reasons, accessibility and addressability of specific services mainly influencing the statistical results (69%). To be said that the patients coming form the rural area showed more advanced stages of the affliction.

Key Words: varicose veins, chronic venous insufficiency, saphenectomy, crossectomy

SUMMARY: The varicose disease is a general affliction, chronic, characterized by a degenerative process of the venous wall, which grafts, under the given conditions, permanent venous dilatations, often circumcise and irregular with a sinuous aspect or ampullar, called varicose. The present paper sets out to create some clinical-therapeutical correlations regarding the surgical treatment of hydrostatical varicose of the inferior limbs during the 01.01.2005-31.12.2009 period, cases from the Surgical Ward no.1 at the Timisoara County Clinical Hospital. The paper analyzes objectively the experience of the Timisoara Surgical Ward no.1, in the surgical treatment of hydrostatical varicose of the inferior limbs, treatments sustained by the recent data found in the literature. We have conducted a retrospective study over a 5 year period (01.01.2005-31.12.2009) in patients admitted and surgically treated with the hydrostatical varicose in the inferior limbs; the study is based on the retrospective of observation sheets and the surgical protocols in the analyzed period. The patients diagnosis at admittance shows the preponderance of stages I and II, localized most frequently on the territory of the internal saphena (82%); unilaterally in 796 cases and bilaterally in the rest of the cases (213 cases). The prevalence of the female gender (706 cases) is enrolled in the general data from the references (5,6); the urban area has offered the most patients most probably because of esthetical reasons, accessibility and addressability of specific services mainly influencing the statistical results (69%). To be said that the patients coming form the rural area showed more advanced stages of the affliction.

Key Words: varicose veins, chronic venous insufficiency, saphenectomy, crossectomy

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The objective of the treatment of the varicose disease is the reduction of symptomatology and the prevention of complications. For some patients, the objective can be the improvement of the esthetics of the leg.

**MATERIAL AND METHOD**

We have conducted a retrospective study over a 5 year period (01.01.2005-31.12.2009) in patients admitted and surgically treated with the hydrostatical varicose in the inferior limbs; the study is based on the retrospective of observation sheets and the surgical protocols in the analyzed period.

From the total of admitted and operated patients (1009) - (Figure 1), 706 have been women and 303 men.

In most cases (69%) the subjects were from an urban area, just 31% are from the rural area - (Figure 2).

The division on age groups shows the preponderance between the ages of 51-55 years, but the affliction is mostly encountered in extreme ages - (Figure 3).

Regarding the toxic intake we ascertained the important role of alcohol, coffee and tobacco as favoring factors - Figure 4.

The patients diagnosis at admittance shows the preponderance of stages I and II - (Figure 5), localized most frequently on the territory of the internal saphena
unilaterally in 796 cases and bilaterally in the rest of the cases (213 cases) - Figure 6.

Generally, the history of the patients shows a long interval between the debut of the affliction and the surgical affliction, in more than half of the cases being between 10 - 15 years (56%) - Figure 7.

The most used surgical interventions were internal crossectomy cu saphenectomy trough stripping Babcock - 83,8%; the removal of varicose packages - 10,6% and Linton surgery - 5,6%.

The post-op medication consisted of analgic, antibiotherapy (stages I and II) associated or not with an antithrombotic treatment. Accordingly:

- antibiotherapy and antithrombotic treatment in 41, 4% of the cases;
- antithrombotic treatment in 16% of the cases;
- antibiotherapy in 18% of the cases;
- no treatment in 24,6%.

RESULTS AND DISCUSSIONS

The retrospective analysis of the statistics compels to a series of observations and discussions. Although there are numerous statistics in the literature, a comparative study of those is erroneous, due to the lack of common criteria for grouping the results. (3,4).

The prevalence of the female gender (706 cases) is enrolled in the general data from the references (5,6); the urban area has offered the most patients probably because of esthetical reasons, accessibility and addressability of specific services mainly influencing the statistical results (69%). It must be said that the patients coming form the rural area showed more advanced stages of the affliction.

The affliction is bilateral by excellence; the statistical differences between admittance and discharging statistics are caused by the lack of consent in the observation sheets. The preponderance of patients with stages I and II certifies the correct surgical indication, not lacking complicated cases with cutaneous ulcerative disorders. In most patients we discovered a long anamnestic duration from the apparent beginning of the affliction and the agreement to surgical treatment.(7).

The most frequently done surgery was crossectomy with internal saphenectomy (a la Babcock) and the excision of shank varicose packages or crural. Of course the surgical technique was adapted to each case in particular, the combinations between the Linton
CONCLUSIONS

The treatment is necessary when the lacerated veins must be removed, need to treat complications or correct certain associated afflictions which cause the formation of varicosity. The dimension of varicosity influences the treatment options. In general, those of higher dimensions were treated by surgical methods (ligatures or stripping), and those of small dimensions treated by sclerotherapy or laser therapy. The closing techniques through radiofrequency were recently introduced and we could use them, sometimes, in the treatment of varicose disease (8, 9).

The ligaturing and stripping techniques are the most efficient and the most used surgical procedures, especially in the case of large dimension varicose.

The anti-coagulation medication was necessary in most of the cases of profound tromboflebitis, affliction in which the blood clots form in the deep veins, causing the development of varicose veins.

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