

EVIDENCE BASED STATEMENT

DOMAIN **11**, Statement **10**

TOPIC: “False claims in aesthetic phlebology”

SEARCH TERMS & SOURCES

fake claims medicine

INCLUSION CRITERIA

- Lower limb only
- Systematic Reviews, Meta-Analysis, Reviews
- Publication < 10 years, only ENG

SEARCH RESULT BEFORE - AFTER SELECTION

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PERTINENT LITERATURE NOT IDENTIFIED BY THE LITERATURE SEARCH

1. Nakano LCU, Cacione DG, Baptista-Silva JCC, Flumignan RLG. Treatment for telangiectasias and reticular veins. Cochrane Database of Systematic Reviews 2021, Issue 10
2. Robledo I, Jankovic J. Media hype: Patient and scientific perspectives on misleading medical news. Mov Disord. 2017 Sep;32(9):1319-1323.
3. Brake M, Lim CS, Shepherd AC, et al. Pathogenesis and etiology of recurrent varicose veins. J Vasc Surg. 2013 Mar;57(3):860-8.
4. Koblenzer CS. Psychosocial aspects of beauty: how and why to look good. Clin Dermatol. 2003 Nov-Dec;21(6):473-5. doi: 10.1016/j.clindermatol.2003.11.010. PMID: 14759578.

EVIDENCE BASED STATEMENT

Domain 11; Statement 10

IDENTIFIED REFERENCES

In modern times, the culture of youth and beauty prevails. An “infodemic” is generated by commercials on products and treatments dedicated to improve the aesthetics, including leg veins appearance, delivering false claims.

[Przemyslaw MW, Kasprzycka-Waszak W, Kubanek A, et al. The spread of medical fake news in social media – The pilot quantitative study, Health Policy and Technology 2018;7(2):115-118]

Health and non health professionals should be informed that, according to the scientific literature, sclerotherapy remains the gold standard for lower limb aesthetic vein treatment and that laser and/or radiofrequency are not superior it. Potential synergy is developed by the combination of sclerotherapy and laser/radiofrequency, but solid scientific data are missing on the topic.

***[Nakano LCU, Cacione DG, Baptista-Silva JCC, Flumignan RLG. Treatment for telangiectasias and reticular veins. Cochrane Database of Systematic Reviews 2021, Issue 10]**

It is of paramount importance to rely only on expert physicians for the treatment, particularly considering teleangiectasias and reticular veins were found to be associated with deeper truncal varicosities in 26% of cases versus 14% in subjects without superficial hypertension signs.

[Ruckley CV, Evans CJ, Allan PL, et al. Telangiectasia in the Edinburgh Vein Study: epidemiology and association with trunk varices and symptoms. Eur J Vasc Endovasc Surg 2008;36:719–724].

Also for this reason, a detailed clinical visit and venous ultrasound scanning must always precede the aesthetic treatment, in order to avoid undertreatment of the underlying venous disease.

A false claim to be avoided is the one reporting a permanent resolution of the aesthetic complaint. Venous hypertension recurrence was reported in more than 60% of cases and it must be considered para-physiological in bipeds constantly overwhelmed by the force of gravity and by the aging process.

[Brake M, Lim CS, Shepherd AC, et al. Pathogenesis and etiology of recurrent varicose veins. J Vasc Surg. 2013 Mar;57(3):860-8].

Certainly, a proper aesthetic treatment should not be associated with a recurrence on the same or nearby anatomical districts in the short terms of few years. Proper lifestyle and follow up visits with an expert physicians are suggested to optimize the result and its perdurance.

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TEXT FOR INCLUSION IN THE DOCUMENT

DOMAIN 11, Statement 10, TOPIC: “False claims in aesthetic phlebology”

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STATEMENT FOR PUBLIC EVIDENCE-BASED AWARENESS

DOMAIN 11, Statement 10

“No aesthetic vein treatment can be considered definitive since venous disease can present recurrence. A proper ultrasound scanning should always precede an aesthetic vein treatment”

SELECTED REFERENCES

1. Przemyslaw MW, Kasprzycka-Waszak W, Kubanek A, et al. The spread of medical fake news in social media – The pilot quantitative study, *Health Policy and Technology* 2018;7(2):115-118
2. *Nakano LCU, Cacione DG, Baptista-Silva JCC, Flumignan RLG. Treatment for telangiectasias and reticular veins. *Cochrane Database of Systematic Reviews* 2021, Issue 10
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identified LITERATURE BIAS

N/A

SUGGESTED NEXT LINES OF RESEARCH

Real world data on misinformation in venous-lymphatic disease