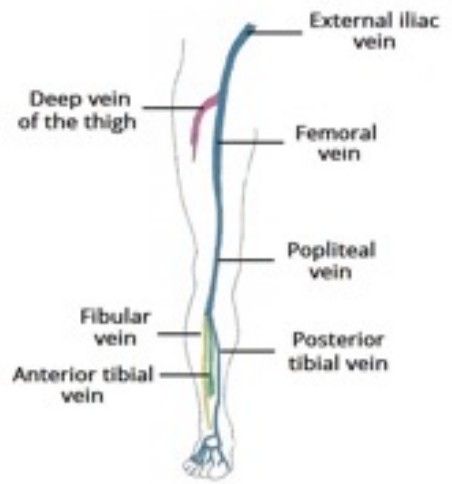

4. DEEP VENOUS & MALFORMATIONS

The deep venous system is the main road for the blood to go back to the heart. This section focuses on the pathological change of drainage direction (reflux) and eventual obstruction of the leg deep venous system. A possible cause of obstruction is the formation of a clot (thrombus): an enitre separate section is dedicated to the topic.

The below reported statements include also useful information on possible venous dilation (aneurysm) and malformation of the deep venous system of the leg as well as of the neck (chronic cerebro-spinal venous insufficiency).

Insights on all these topics are available here:
www.vwinfoundation.com/fake-news-free-project/

DEEP VENOUS

1. Not only the superficial venous system must be assessed: deep veins of the leg can present a reflux because of spontaneous
or post-thrombotic or post-trauma valve damage and/or vein obstruction.

2. Patients with superficial venous insufficiency and deep venous reflux might be candidate for superficial venous treatment, yet an expert evaluation of the specific case is needed.

3. A narrowing of the iliac vein is present in more than 50% of the population: a caliber reduction alone is not an indication to treatment per se.

4. Venous ilio-femoral stenting for obstruction must be performed after specialist careful evaluation and
only in patients affected by severe compromission.

5. Deep venous reflux can be managed by proper elastic compression and, eventually , by superficial reflux treatment. Deep venous reflux surgical treatment is to be performed only in highly specialized centers and it's still in need of strong scientific validation.

6. Popliteal vein dilation must be carefully evaluated by a specialist for surgical treatment or lifelong anticoagulation.

7. Venous malformations are often underdiagnosed and require expert evaluation, together with at least ultrasound and, potentially,
magnetic resonance assessment.

8. An arterial component inside a venous malformation should always be excluded before designing the treatment strategy.

9. A pre-operative careful evaluation is mandatory before treatment of veins along the lateral side of the leg since it could represent a venous malformation.

10. Conservative treatment, mainly by compression, is to be taken into consideration for most asymptomatic lower limb
venous malformations, together with a follow up by experts in the specific malformations field.