

EVIDENCE BASED STATEMENT

DOMAIN **07**, Statement **7**

TOPIC: “**Venous reflux suppression best strategy in venous ulcer patients**”

SEARCH TERMS & SOURCES

((venous ulcer) AND (reflux)) AND (therapy) (("Varicose Ulcer"[Mesh]) AND "Varicose Ulcer/surgery"[Mesh])

INCLUSION CRITERIA

- Lower limb only
- Reviews
- Publication < 10 years, only ENG

SEARCH RESULT BEFORE - AFTER SELECTION

7/7

AGREEMENT BETWEEN THE 2 REVIEWERS before DOMAIN WORKING GROUP DISCUSSION & FINALIZATION

(N. of papers triggering disagreement in inclusion/No of papers from the initial search)

xxxx2/49 (4.09 %)xxxxx

PERTINENT LITERATURE NOT IDENTIFIED BY THE LITERATURE SEARCH

- Salim S, Heatley F, Bolton L, et al. The management of venous leg ulceration post the EVRA (early venous reflux ablation) ulcer trial: Management of venous ulceration post EVRA. *Phlebology*. 2021 Apr;36(3):203-208
- Gohel MS, Mora MSc J, Szigeti M, et al. Long-term Clinical and Cost-effectiveness of Early Endovenous Ablation in Venous Ulceration: A Randomized Clinical Trial. *JAMA Surg*. 2020 Dec 1;155(12):1113-1121.
- Lawrence PF, Hager ES, Harlander-Locke MP, et al. Treatment of superficial and perforator reflux and deep venous stenosis improves healing of chronic venous leg ulcers. *J Vasc Surg Venous Lymphat Disord*. 2020 Jul;8(4):601-609.
- Sermsathanasawadi N, Jieamprasertbun J, Pruekprasert K, et al. Factors that influence venous leg ulcer healing and recurrence rate after endovenous radiofrequency ablation of incompetent saphenous vein. *J Vasc Surg Venous Lymphat Disord*. 2020 May;8(3):452-457
- Gohel MS, Heatley F, Liu X, et al. A Randomized Trial of Early Endovenous Ablation in Venous Ulceration. *N Engl J Med*. 2018 May 31;378(22):2105-2114.

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IDENTIFIED REFERENCES

1. Ojha V, Kumar S. Current strategies for endovascular management of varicose veins: An updated review of superficial ablation technologies. *Phlebology*. 2022 Mar;37(2):86-96.
2. Goldschmidt E, Schafer K, Lurie F. A systematic review on the treatment of nonhealing venous ulcers following successful elimination of superficial venous reflux. *J Vasc Surg Venous Lymphat Disord*. 2021 Jul;9(4):1071-1076.e1.
3. Lurie F. Advanced Stages of Chronic Venous Disease: Evolution of Surgical Techniques and Advantages of Associated Medical Treatment. *Adv Ther*. 2020 Feb;37(Suppl 1):6-12.
4. Montminy ML, Jayaraj A, Raju S. A systematic review of the efficacy and limitations of venous intervention in stasis ulceration. *J Vasc Surg Venous Lymphat Disord*. 2018 May;6(3):376-398.e1.
5. Kheirleseid EA, Bashar K, Aherne T, et al. Evidence for varicose vein surgery in venous leg ulceration. *Surgeon*. 2016 Aug;14(4):219-33.
6. Rosales A. Valve reconstructions. *Phlebology*. 2015 Mar;30(1 Suppl):50-8.
7. Marston WA. Efficacy of endovenous ablation of the saphenous veins for prevention and healing of venous ulcers. *J Vasc Surg Venous Lymphat Disord*. 2015 Jan;3(1):113-6.

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TEXT FOR INCLUSION IN THE DOCUMENT

DOMAIN 07, Statement , TOPIC: “**Venous reflux suppression best strategy in venous ulcer patients**”

Early endovenous thermal suppression of the venous reflux leading to ulceration demonstrated to be beneficial for a faster healing and associated with a longer post-procedural ulcer-free time. In a 3 year time, early endovenous ablation was reported to be highly likely to be also cost-effective.

***[Gohel MS, Mora MSc J, Szigeti M, et al. Long-term Clinical and Cost-effectiveness of Early Endovenous Ablation in Venous Ulceration: A Randomized Clinical Trial. JAMA Surg. 2020 Dec 1;155(12):1113-1121].**

Recent data show that simultaneous treatment of incompetent perforating veins at the time of the radiofrequency saphenous ablation improves venous ulcer healing.

[Sermathanasawadi N, Jieamprasertbun J, Pruekprasert K, et al. Factors that influence venous leg ulcer healing and recurrence rate after endovenous radiofrequency ablation of incompetent saphenous vein. J Vasc Surg Venous Lymphat Disord. 2020 May;8(3):452-457]

In case of wound healing failure after superficial and perforator reflux treatment, the eventual presence of hemodynamically significant ilio-caval stenosis should be assessed in detail and eventually treated.

[Lawrence PF, Hager ES, Harlander-Locke MP, et al. Treatment of superficial and perforator reflux and deep venous stenosis improves healing of chronic venous leg ulcers. J Vasc Surg Venous Lymphat Disord. 2020 Jul;8(4):601-609].

The use of endovenous cyanoacrylate glue (venaseal™) demonstrated to be safe and effective in saphenous ablation and ulcer healing. Further data are needed, in particular in case of infected ulcers, before providing high grades of recommendation in its use in ulcer patients.

[Chan SSJ, Yap CJQ, Tan SG, et al. The utility of endovenous cyanoacrylate glue ablation for incompetent saphenous veins in the setting of venous leg ulcers. J Vasc Surg Venous Lymphat Disord. 2020 Nov;8(6):1041-1048].

A global survey demonstrated the need of improving wound care management by creating validated and universally applied management protocols, overcoming the limits coming from the different economic and health services resources, including proper public and health-professionals education.

[Heatley F, Onida S, Davies AH. The global management of leg ulceration: Pre early venous reflux ablation trial. Phlebology. 2020 Sep;35(8):576-582].

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STATEMENT FOR PUBLIC EVIDENCE-BASED AWARENESS

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Early restoration of superficial venous reflux is indicated in venous ulcer management.

SELECTED REFERENCES

1. *Gohel MS, Mora MSc J, Szigeti M, et al. Long-term Clinical and Cost-effectiveness of Early Endovenous Ablation in Venous Ulceration: A Randomized Clinical Trial. *JAMA Surg.* 2020 Dec 1;155(12):1113-1121
2. Sermsathanasawadi N, Jieamprasertbun J, Pruekprasert K, et al. Factors that influence venous leg ulcer healing and recurrence rate after endovenous radiofrequency ablation of incompetent saphenous vein. *J Vasc Surg Venous Lymphat Disord.* 2020 May;8(3):452-457
3. Lawrence PF, Hager ES, Harlander-Locke MP, et al. Treatment of superficial and perforator reflux and deep venous stenosis improves healing of chronic venous leg ulcers. *J Vasc Surg Venous Lymphat Disord.* 2020 Jul;8(4):601-609
4. Chan SSJ, Yap CJQ, Tan SG, et al. The utility of endovenous cyanoacrylate glue ablation for incompetent saphenous veins in the setting of venous leg ulcers. *J Vasc Surg Venous Lymphat Disord.* 2020 Nov;8(6):1041-1048
5. Heatley F, Onida S, Davies AH. The global management of leg ulceration: Pre early venous reflux ablation trial. *Phlebology.* 2020 Sep;35(8):576-582

identified LITERATURE BIAS

Heterogeneity in ulcer type inclusion in the different studies

SUGGESTED NEXT LINES OF RESEARCH

head to head comparison among different reflux suppression techniques