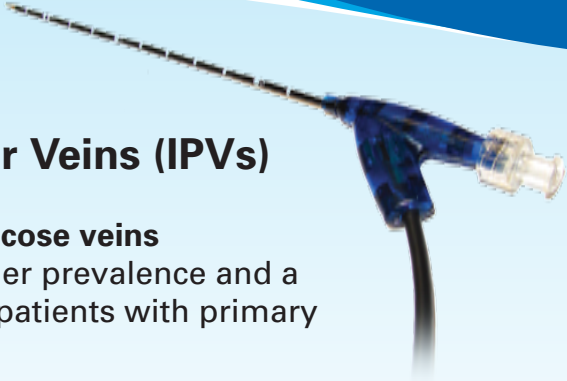


## Why Should You Treat Incompetent Perforator Veins (IPVs)

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- I) Perforator incompetence is associated with recurrent varicose veins**
    - a. Patients with recurrent varicose veins have both a higher prevalence and a greater number of incompetent perforating veins than patients with primary varicose veins.<sup>1</sup>
  
  - II) Perforator incompetence is associated with advanced CVI**
    - a. Medial calf IPVs are present in 66% of limbs with CVI related skin changes.<sup>2</sup>
    - b. The extent of GSV insufficiency, as measured by CEAP scores, correlates with an increase in the number and the diameter of IPVs.<sup>3</sup>
  
  - III) Treating the superficial system alone may not be enough.**
    - a. Among 64 limbs that had IPVs pre-operatively, perforator incompetence persists in 40% of limbs 2 years after superficial venous surgery alone.<sup>4</sup>
  
  - IV) Extrafascial perforator ligation is not effective.**
    - a. Two years after superficial venous surgery plus extrafascial perforator ligation, the incidence of IPV was similar to those who had superficial surgery alone.<sup>4</sup>
  
  - V) Subfacial treatment of IPVs with Radiofrequency Ablation is a minimally invasive, outpatient procedure that is preferred by many practitioners. Over 15,000 procedures have been performed worldwide.**
    - a. Intravascular treatment of IPVs in a subfacial segment with the ClosureRFS™ Stylet leads to closure rates that average 70% to 93%.<sup>5, 6</sup>
    - b. The Closure RFS Stylet is the only FDA cleared endovenous ablation device for the treatment of refluxing perforator veins.

<sup>1</sup> E.E. Rutherford, B. Kianifard, S.J. Cook, J. M. Holdstock & M.S. Whiteley. Incompetent Perforating Veins are Associated with Recurrent Varicose Veins. Eur J Vasc Endovasc Surg. 2001; 21: 458-460

<sup>2</sup> K. Myers, R. Ziegenbein, G.H. Zeng, & P. G. Matthews. Duplex ultrasonography scanning for chronic venous disease: Patterns of venous reflux. J Vasc Surg 1995; 21: 605-612.

<sup>3</sup> A Krnic, N. Vucic, & Z. Sucic. Correlation of Perforating Vein Incompetence with Extent of Great Saphenous Insufficiency: Cross Sectional Study. Croat Med J 2005; 46(2): 245-251.

<sup>4</sup> L. Blomgren, G. Johansson, A. Dahlberg-Akerman, P. Thermaenius, & D. Bergquist. Changes in superficial and perforating vein reflux after varicose vein surgery. J. Vasc Surg 2005; 42: 315-320.

<sup>5</sup> E. Peden & A. Lumsden, Radiofrequency Ablation of Incompetent Perforator Veins. Perspect Vasc Surg Endovas Ther. 2007; 19; 73-77.

<sup>6</sup> M.S. Whiteley, J.M. Holdstock, B.A. Price, M.J. Scott, & T.M. Gallagher. Radiofrequency Ablation of Refluxing Great Saphenous Systems, Giacomini Veins & Incompetent Perforating Veins Using VNUS Closure and TRLOP. J Endovasc Ther 2003; 10: I-46 – I-51.