

Dear Mr. Yilmaz,

On behalf of the Scientific Programme Committee it is our great pleasure to inform you that your **Scientific Abstract** mentioned below has been **accepted as electronic poster** to be presented on the occasion of CIRSE 2011, September 10-14, 2011 in Munich/DE:

Abstract ID 55889 - Tumescant-augmented sclerotherapy: a new method in the treatment of large varicose veins

Poster presenters are kindly requested to take the following steps:

1. Confirmation of presentation

Kindly **click the "Confirm presentation" button** in the grey box at the end of the page. By this you confirm that you will produce and submit an electronic poster complying with the requirements given in the Guidelines for Poster Presenters (see below).

Deadline for confirmation is **April 29, 2011**.

If you have to withdraw your paper, click the "Decline presentation" button. For withdrawals after April 29, 2011, please notify us by email at your earliest possible convenience.

2. Guidelines for Poster Presenters

It is strongly recommended that you **read the guidelines carefully before** you start compiling your electronic poster. Please refer to the link below to view and download the guidelines:

http://www.cirse.org/files/File/cirse2011/cpaper/Guidelines_for_EPOS_Presenters.pdf

3. Final check of abstracts

We strongly recommend that you give a final check to your abstract, as text and titles have undergone language editing.

Also check the author information in the grey box below. If you have any further revisions to be done, please send them by email to scientific@cirse.org **by April 29, 2011** at the latest.

Please find the current version of your abstract below:

Purpose

Large varicose veins are difficult to treat with standard liquid or foam sclerotherapy, since they require a higher sclerosant dose and concentration and the complication rate may be higher due to the presence of excessive blood in the vein lumen. The purpose of our study was to investigate the value of perivenous injection of tumescent solution to increase the effectiveness of ultrasound-guided foam sclerotherapy (US-GFS) for large varicose veins.

Material and Methods

During a 28-month period, tumescent-augmented sclerotherapy (TAS) was performed in 90 legs of 61 patients for large (1-3 cm) varicosities due to saphenous or perforating vein insufficiency. In all patients, after the incompetent saphenous or perforating veins were ablated with endovenous laser, multiple butterfly needles or IV cannulas were placed into the large varicosities. Then, these veins were collapsed by US-guided perivenous tumescent injection and the US-GFS was then performed

using a 1-3% polidocanol foam. Patients were followed up clinically and with color Doppler ultrasound at 1, 6 and 12 months.

Results

TAS was technically successful in all patients. Complications included mild hyperpigmentation (n = 42) and skin necrosis (n = 1). Superficial thrombophlebitis did not occur. Postoperative pain and tenderness were minimal in all patients. During the follow-up, recanalization was seen in three legs with very large (2-3 cm) varicosities, due to recurrent truncal vein reflux, which was successfully treated with US-GFS.

Conclusion

TAS is highly safe and effective in the treatment of large varicosities. By reducing the vein size and emptying the blood content, it may increase the effectiveness and decrease the complication rate of standard US-GFS.

4. Congress registration

Kindly note that **poster presenters have to be registered** for CIRSE 2011. Otherwise their poster will not be displayed during the meeting.

Take advantage of the **reduced registration fees until June 9, 2011**. For online registration and detailed information about fees, please refer to:

<http://www.cirse.org/index.php?pid=421>

5. Hotel Accommodation

It is recommended that you make your hotel reservation as soon as possible. Official CIRSE hotels can be booked at:

<http://www.cirse.org/index.php?pid=611>

Should you need further information, please feel free to contact us.

Sincerely yours,

CIRSE Scientific Department

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