

ALT EKSTREMİTE VENÖZ YETMEZLİĞİ: ANATOMİ VE KLİNİK DEĞERLENDİRME

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Venöz yetmezliğin en belirgin bulgusu

VARİSLER

Spider venler



Retiküler venler



Variköz venler



Venöz yetmezlik: Diğer bulgular

Ağrı:

Ödem:

Yanma:

Kaşıntı:

Kramp:

Sıcak mevsimlerde
ve ayakta kalma ile
artarlar



Venöz ülser



Staz dermatiti



Lipodermatosklerozis



Atrophie blanche



Corona flebectica



An unexpectedly high rate of pulmonary embolism in patients with superficial thrombophlebitis of the thigh.

[Verlato F](#), [Zucchetto P](#), [Prandoni P](#), [Camporese G](#), [Marzola MC](#), [Salmistraro G](#), [Bui F](#), [Martini R](#), [Rosso F](#), [Andreozzi GM](#).


Unit Care of Angiology, University Hospital of Padua, Padua, Italy.

PURPOSE: The rate of objectively proven pulmonary embolism in patients with thrombophlebitis of the greater saphenous vein was studied. **METHODS:** Consecutive ambulant patients with thrombophlebitis of the greater saphenous vein, involving the above-knee segment, underwent a complete venous echo color Doppler examination of the lower limbs, perfusion lung scanning, and chest radiography. A high probability of pulmonary embolism was defined as the presence of two or more large segmental defects, one large and two or more moderate perfusion defects, or four or more moderate perfusion defects, with no corresponding abnormality found by means of chest radiography. **RESULTS:** Of the 21 patients included in the study, findings compatible with a high probability of pulmonary embolism were detected in seven patients (33.3%; 95% CI, 14.6 to 57.0), although clinical symptoms of pulmonary embolism were present only in one patient. No association was found between the presence of thrombosis at the saphenofemoral junction and the risk for pulmonary embolism. **CONCLUSION:** The rate of pulmonary embolism in patients with thrombophlebitis of the greater saphenous vein is unexpectedly high. This risk is similarly high in patients with thrombosis at the saphenofemoral junction and in patients without thrombosis at the saphenofemoral junction. Our results are consistent with those of other recent investigations and suggest that superficial thrombophlebitis of the thigh is not as benign a disease entity as previously described.


PMID: 10587397 [PubMed - indexed for MEDLINE]

- **YTF: %25 DVT, %10 PE**
- **Endovask Tx zorlaşır**


1: [Racette S, Sauvageau A.](#)

-  **Unusual sudden death: two case reports of hemorrhage by rupture of varicose veins.**
Am J Forensic Med Pathol. 2005 Sep;26(3):294-6.
PMID: 16121090 [PubMed - indexed for MEDLINE]


2: [Morrow PL, Hardin NJ, Karn CM, Beloin R, McDowell RW.](#)

-  **Fatal hemorrhage caused by varicose veins.**
Am J Forensic Med Pathol. 1994 Jun;15(2):100-4. Review.
PMID: 8074099 [PubMed - indexed for MEDLINE]


3: [du Toit DF, Knott-Craig C, Laker L.](#)

-  **Bleeding from varicose vein--still potentially fatal. A case report.**
S Afr Med J. 1985 Feb 23;67(8):303.
PMID: 3983781 [PubMed - indexed for MEDLINE]

4: [Papp Z, Elek L.](#)

-  **[Fatal hemorrhage from a leg ulcer caused by varicose veins]**
Morphol Igazsagugyi Orv Sz. 1983 Jan;23(1):61-2. Hungarian. No abstract available.
PMID: 6843567 [PubMed - indexed for MEDLINE]

5: [Evans GA, Evans DM, Seal RM, Craven JL.](#)

-  **Spontaneous fatal haemorrhage caused by varicose veins.**
Lancet. 1973 Dec 15;2(7842):1359-61. No abstract available.
PMID: 4128056 [PubMed - indexed for MEDLINE]

Anatomi

Alt ekstremité venöz sistemi

- Derin venler (iliak, femoral)
- Yüzeyel venler (VSM, VSP)
- Perforan venler

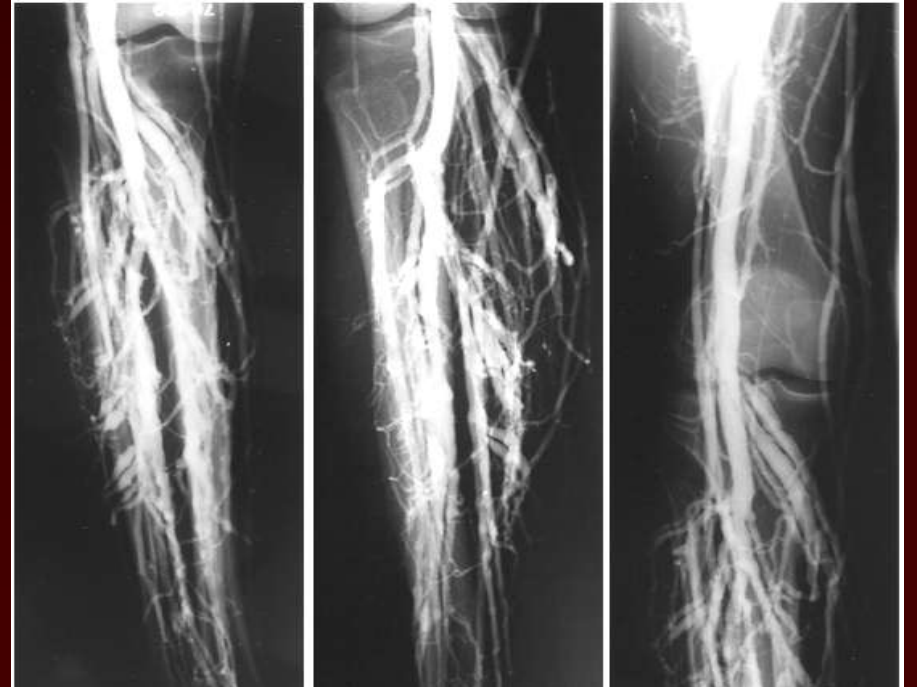
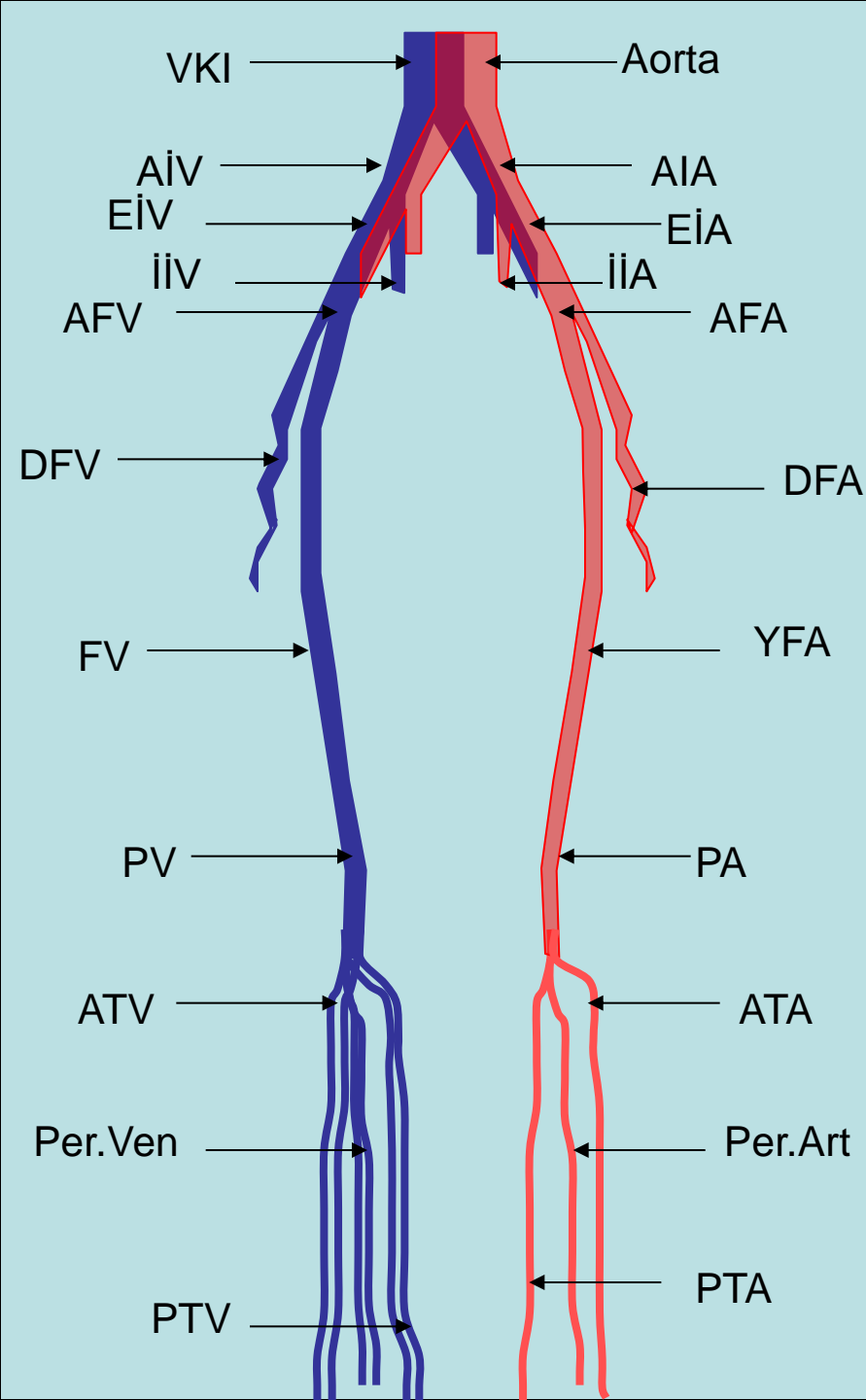
Derin venöz sistem

1. Arterlere paralel

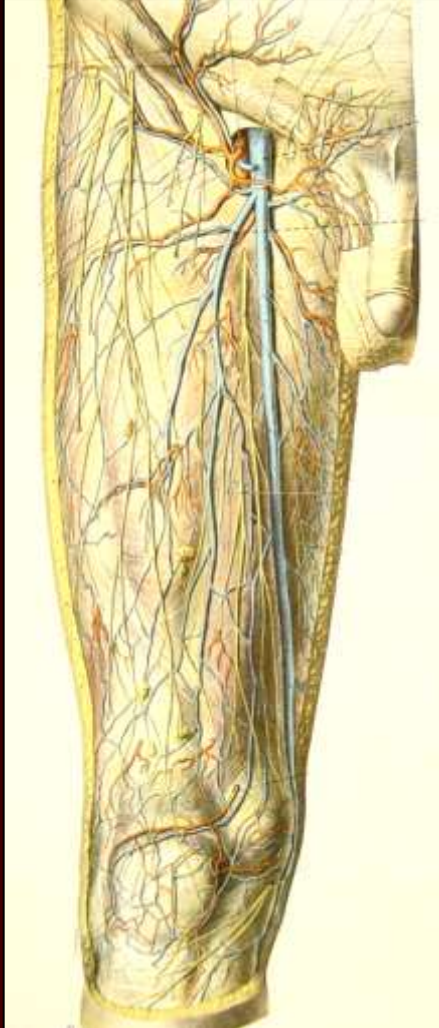
2. Arterlerle isimleri aynı

3. ~~Yüzeysel~~ "Femoral Ven"

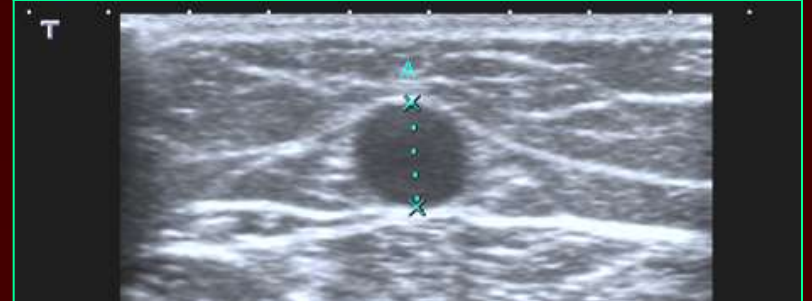
4. Krural venler çift



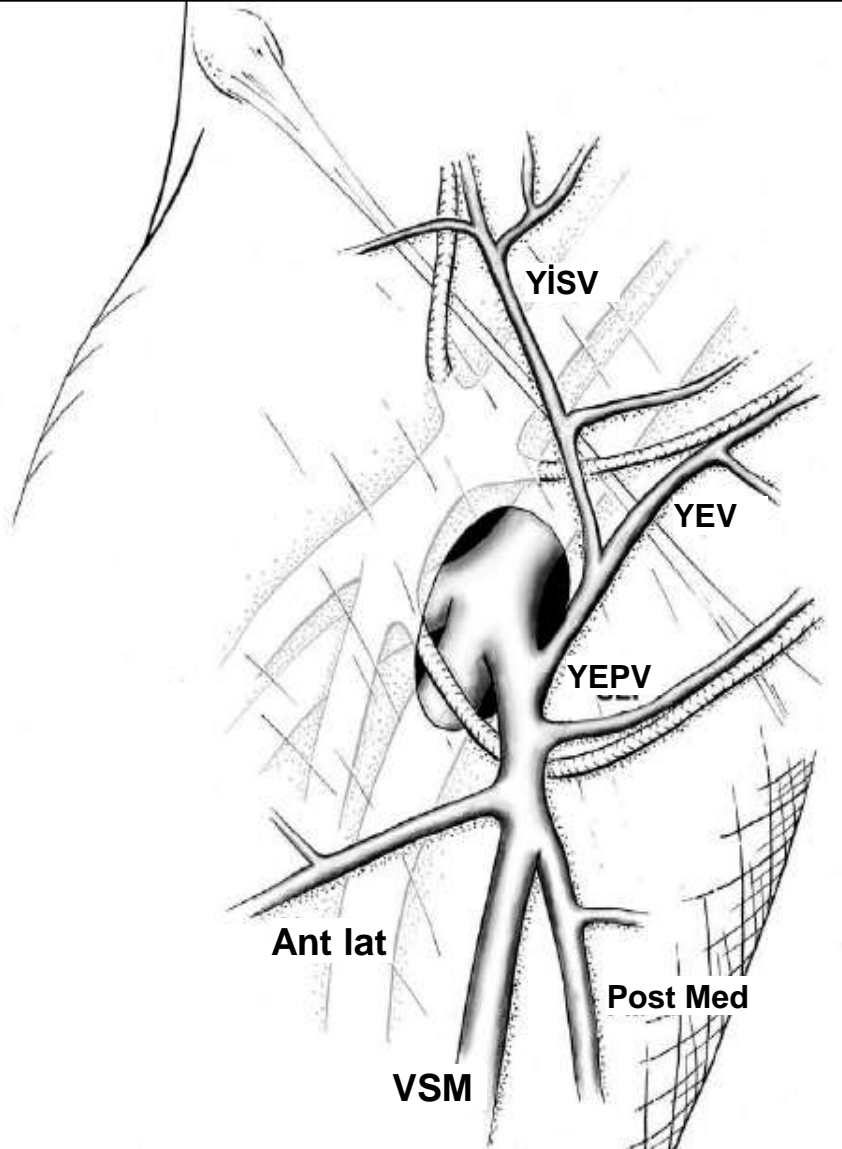
Yüzeyel venöz sistem



1. VSM-VSP komünikan venler, network
2. VSM medial malleol kasıkta SFB
3. Yüzeyel-derin fasya "Egyptian eye"



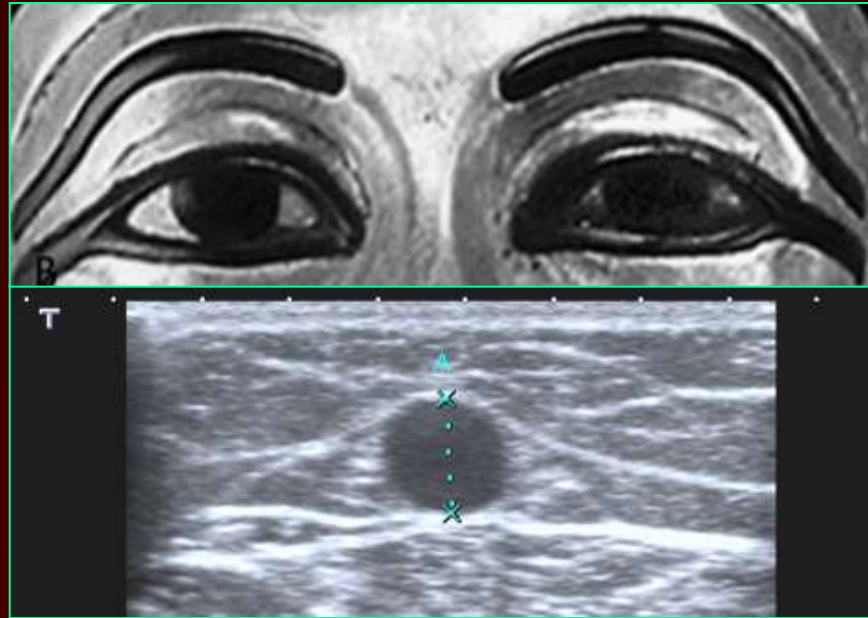
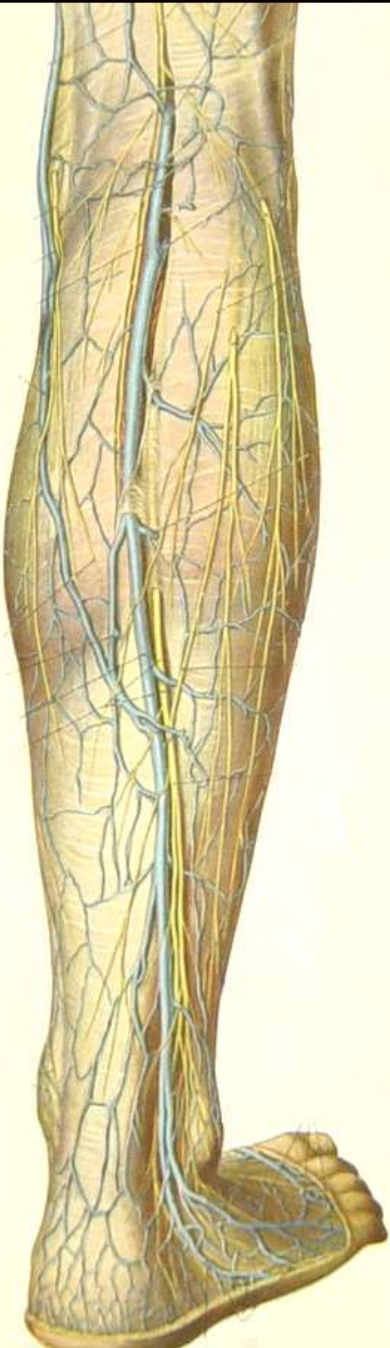
Safenofemoral bileşke (SFB)



1. Yüz. iliak sirkumfleks, Yüzeyel epigastrik, Yüzeyel ekst pudental
2. Anterior lateral ve posterior medial dallar VSM ile karıştırılabilir.
3. PM dal VSP ile birleşir (Giacomini-intersafenöz veni)

Vena Safena Parva (VSP)

1. Ayak lateral yüzünden başlar
2. 2/3 popliteal fossada PVe dökülür
3. 1/3 “Giacomini Veni” → VSM
4. Yüzeyel-derin fasya “Egyptian eye”

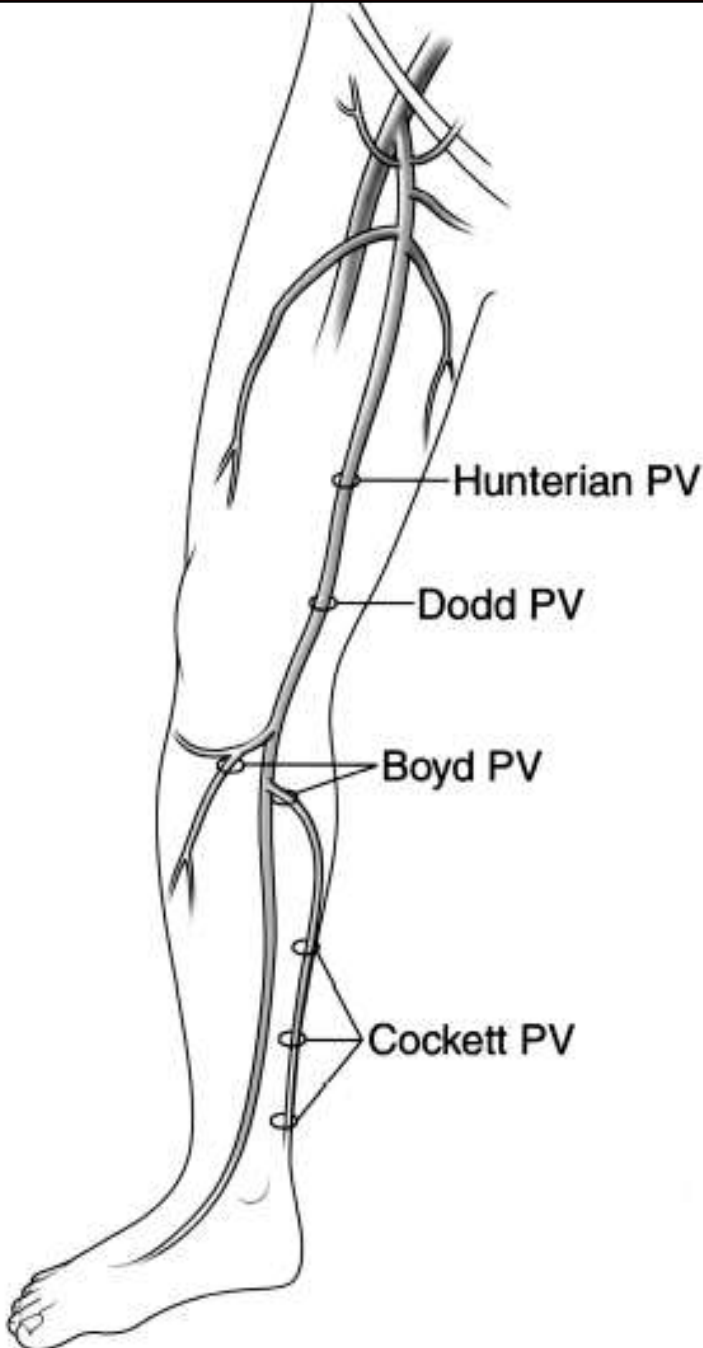


Perforan Venler

1. Derin-yüzeyel venler (fasyayı perforo eder)

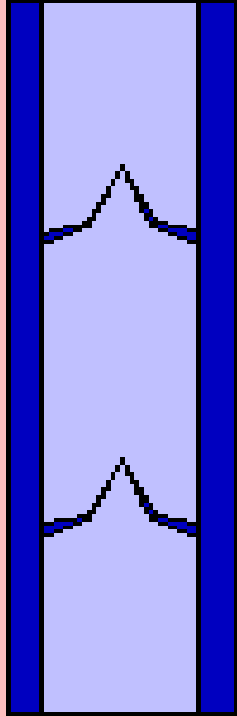
2. “Komünikan venler” yüzeyel-yüzeyel

3. Çok sayıda, lokalizasyon önemli

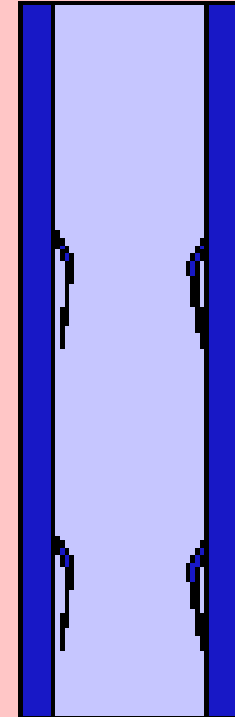


Patofizyoloji

- Kasların kasılmasıyla gönderilen kan, hasarlı kapaklardan geri akar, “Venöz hipertansiyon” oluşur
- Cilt altındaki destek dokusu zayıf yan dallarda variköz dilat. VSM ve VSP fibröz kılıf nedeniyle fazla daha az



Normal venler



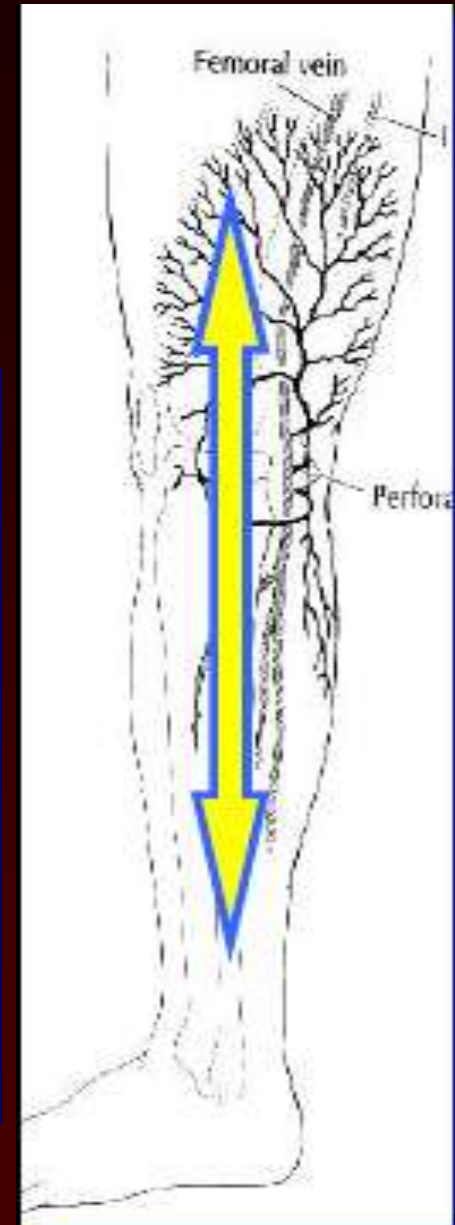
Venöz yetmezlik

Patofizyoloji

- **Yüzeyel ven yetmezliği >%90**
 - **Vena Safena Magna (VSM) %70**
 - **Vena Safena Parva (VSP)**
 - **Perforan venler (primer)**
 - **Pelvik veni, gonadal, iliak**
 - **Komünikan ven (yan dal)**
 - **Lateral subdermal plexus**

Lateral subdermal venöz plexus

- Derin venöz sistemin embriyolojik remnantı
- DVS ile multipl küçük perforanlar
- Retiküler + spider network
- Diz posterolaterali, prox + distal
- Doppler US de reflü +, kaynak ?



YVY tedavi prensipleri

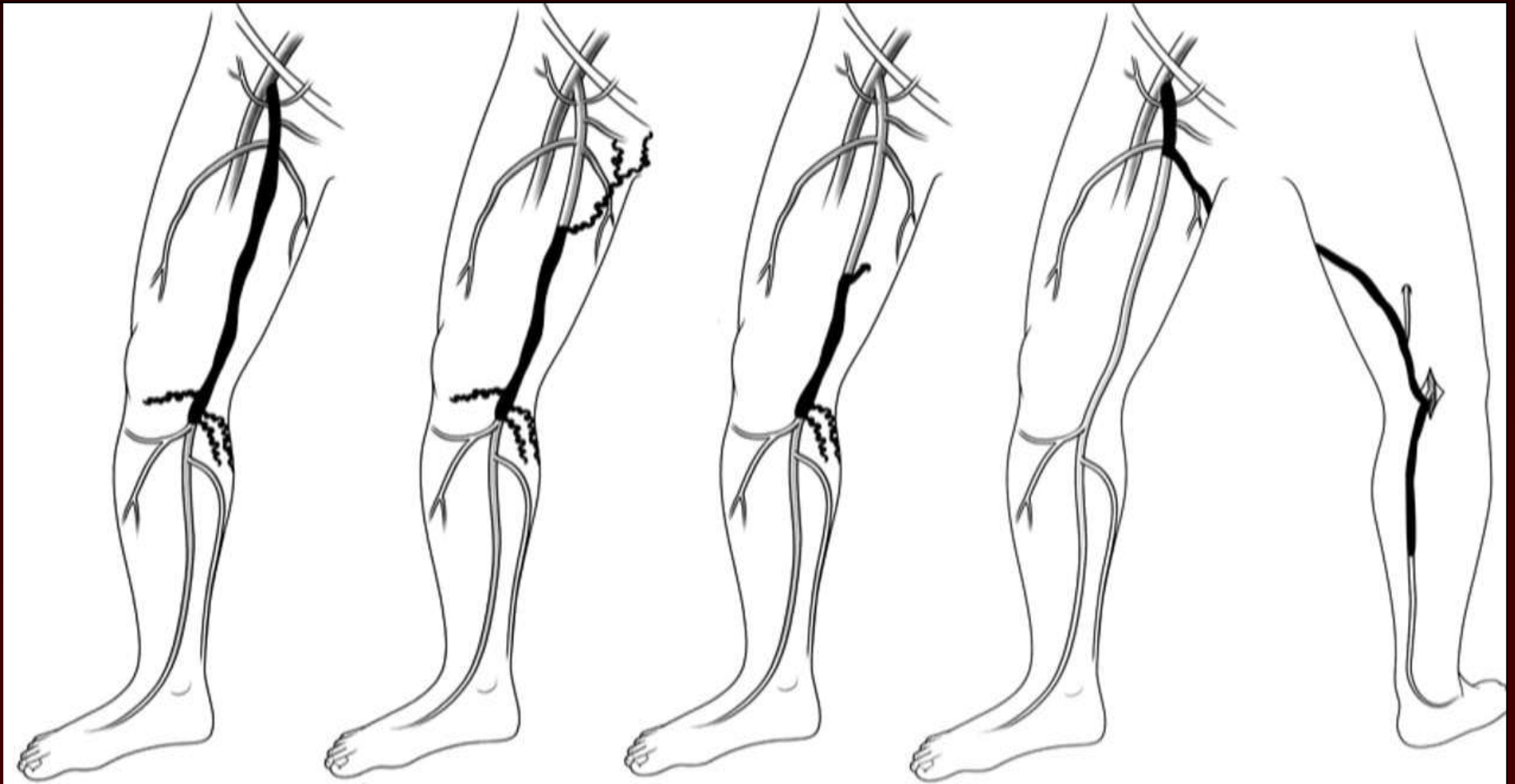
1. Öncelikle reflü (neden) tedavi edilmeli
Endovenöz Lazer, RF, Cerrahi ?
2. Sonra varislerin (=sonuç) tedavisi
Skleroterapi (köpük), flebektomi
3. Birden fazla reflü: prox→distal

Doppler US, Amaç

1. Yüzeyel venöz sistemde reflü var mı? Varsa kaynağı, kaynakları ne?
VSM, VSP, perforan, pelvik ?
2. Variköz venlerin lokalizasyonu, çapı
Skleroterapi, flebektomi ?
3. Derin venöz sistemde reflü var mı?
Posttrombotik? YVY e bağlı
4. Derin venlerde obstrüks. var mı?
5. Şiddetli arteryel yetmezlik var mı?

YVY, Reflü paternleri

Common Patterns of VV



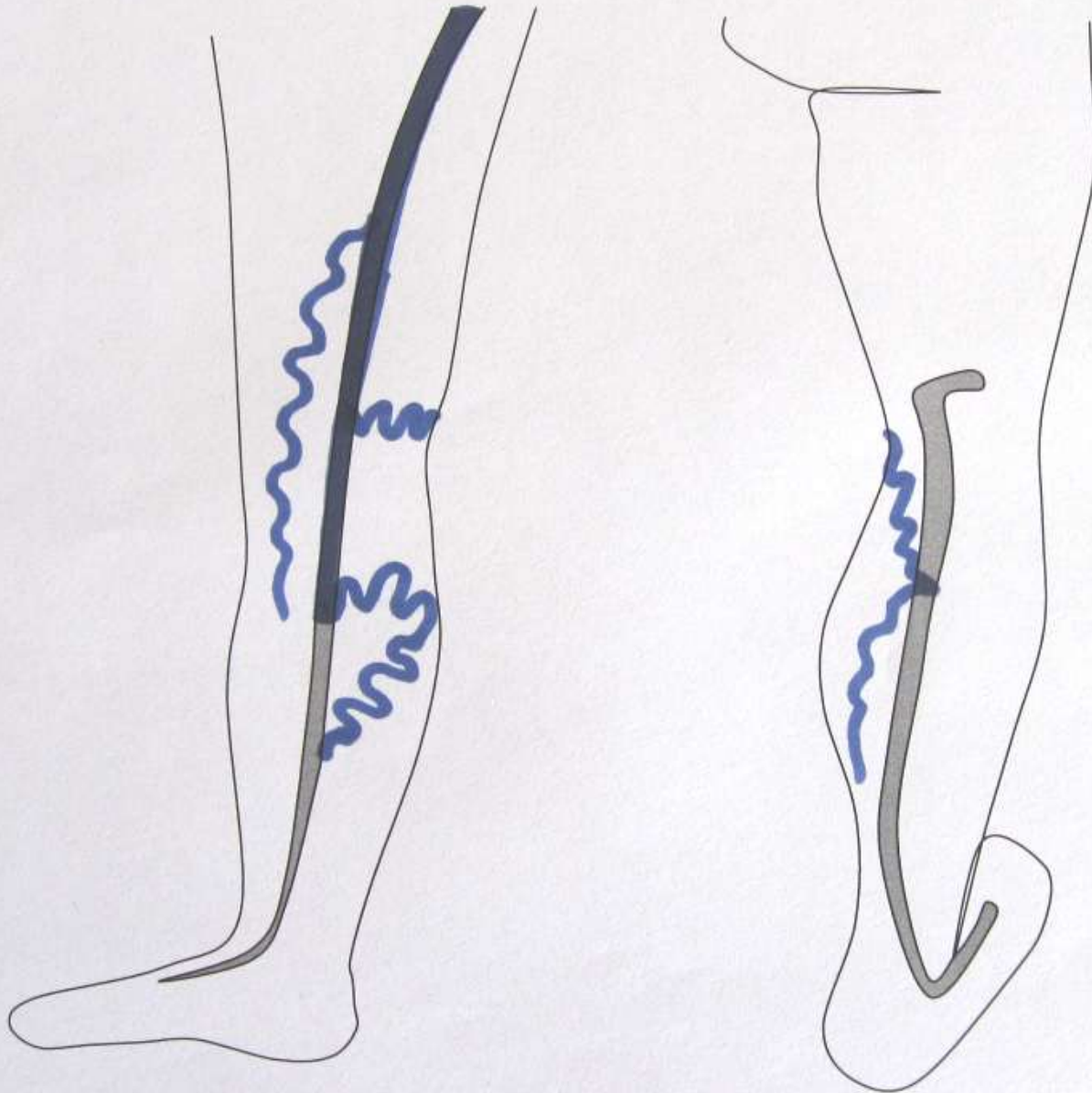
VSM reflüsü



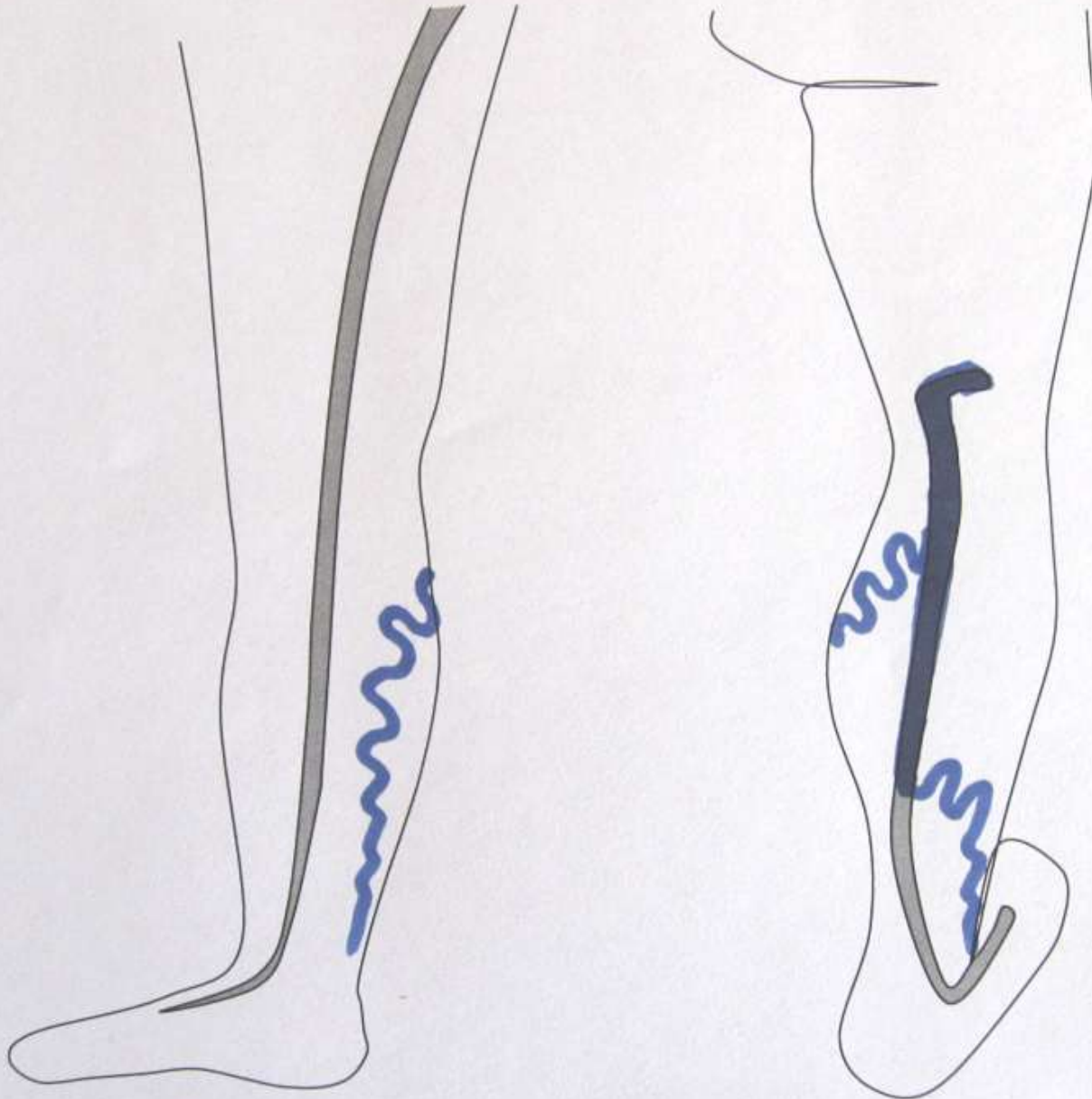
VSP, perforan, gonadal ven reflüsü



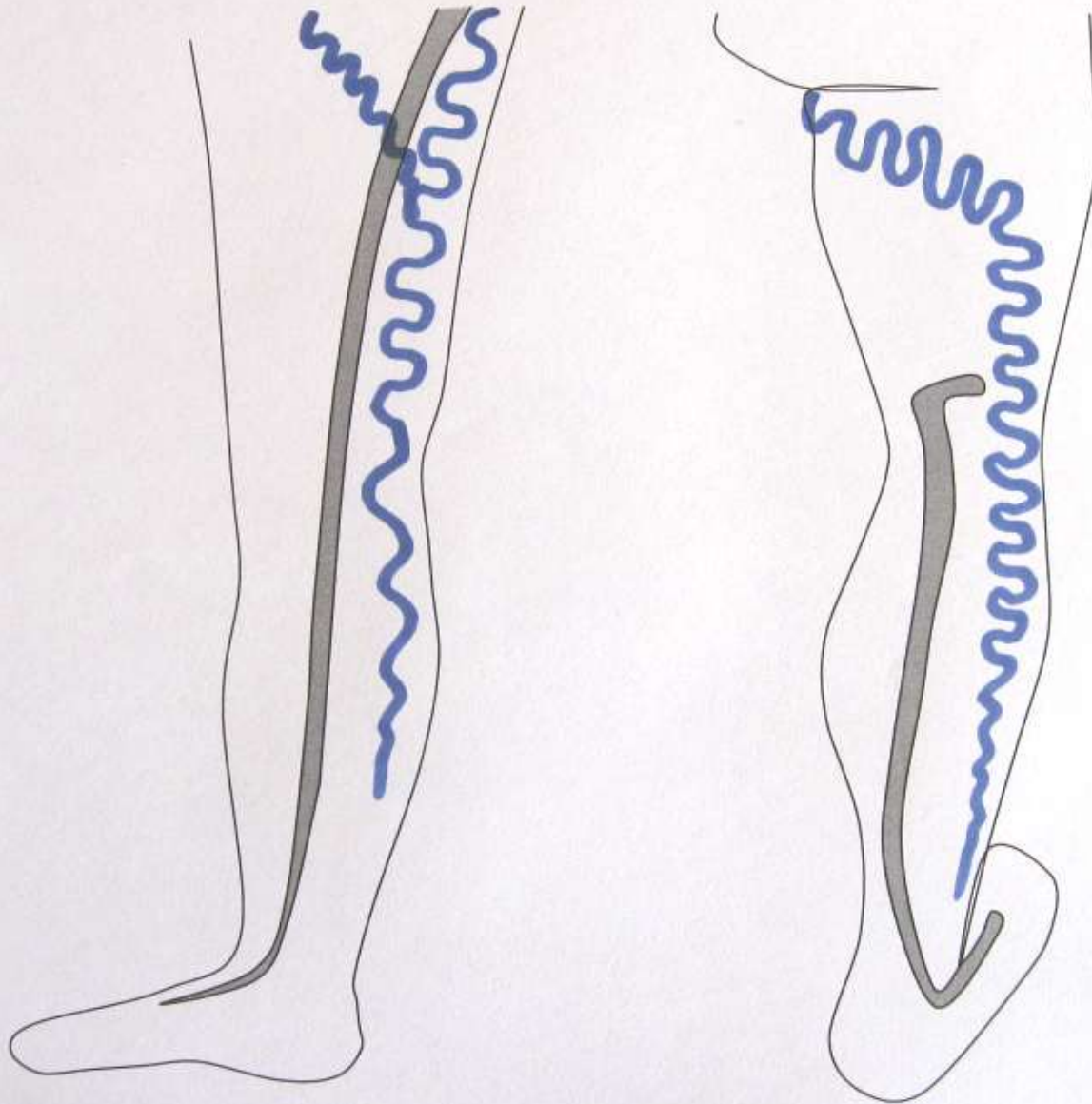
Klasik VSM reflüsü (SFB)



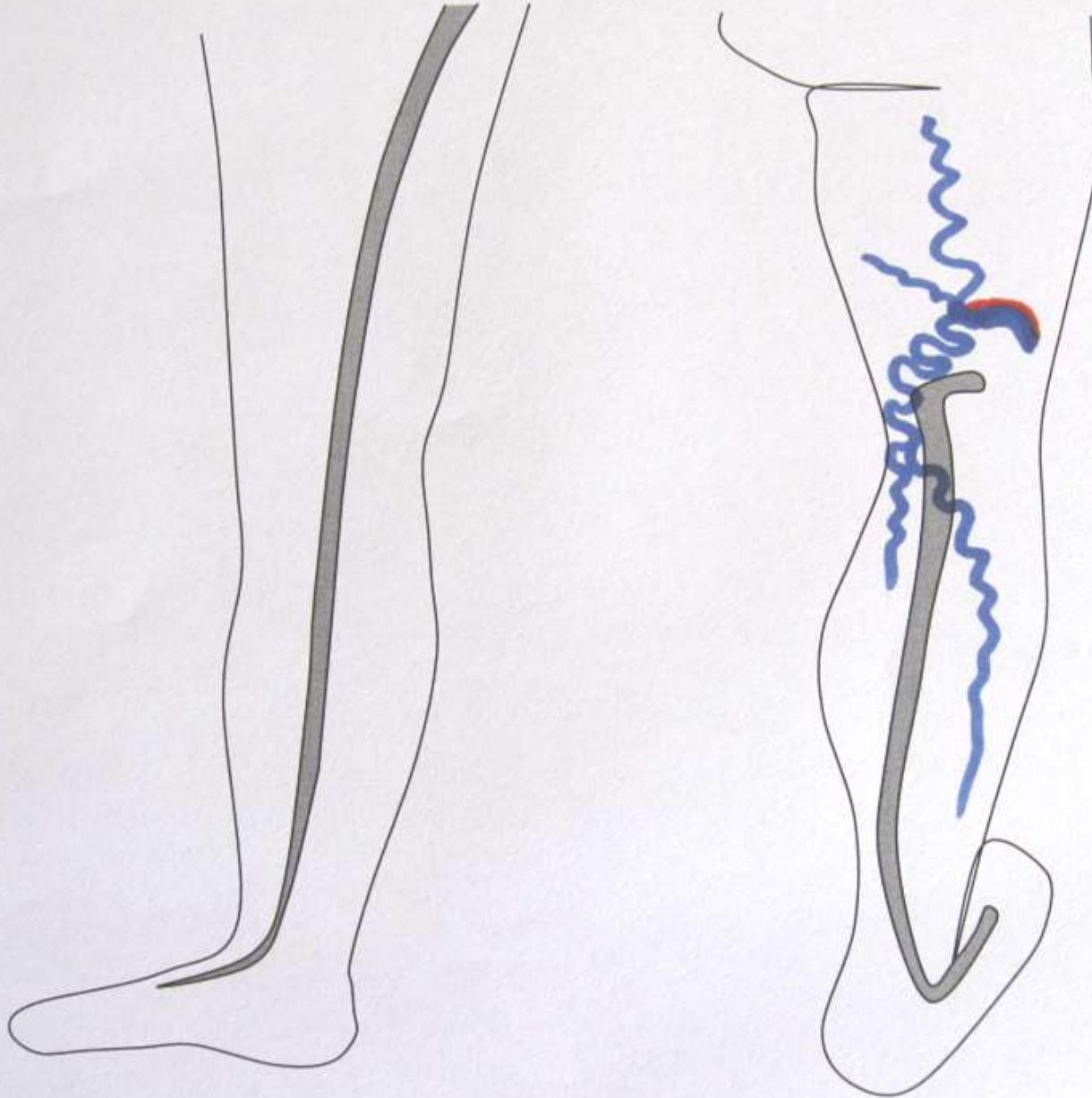
Klasik VSP reflüsü (SPB)



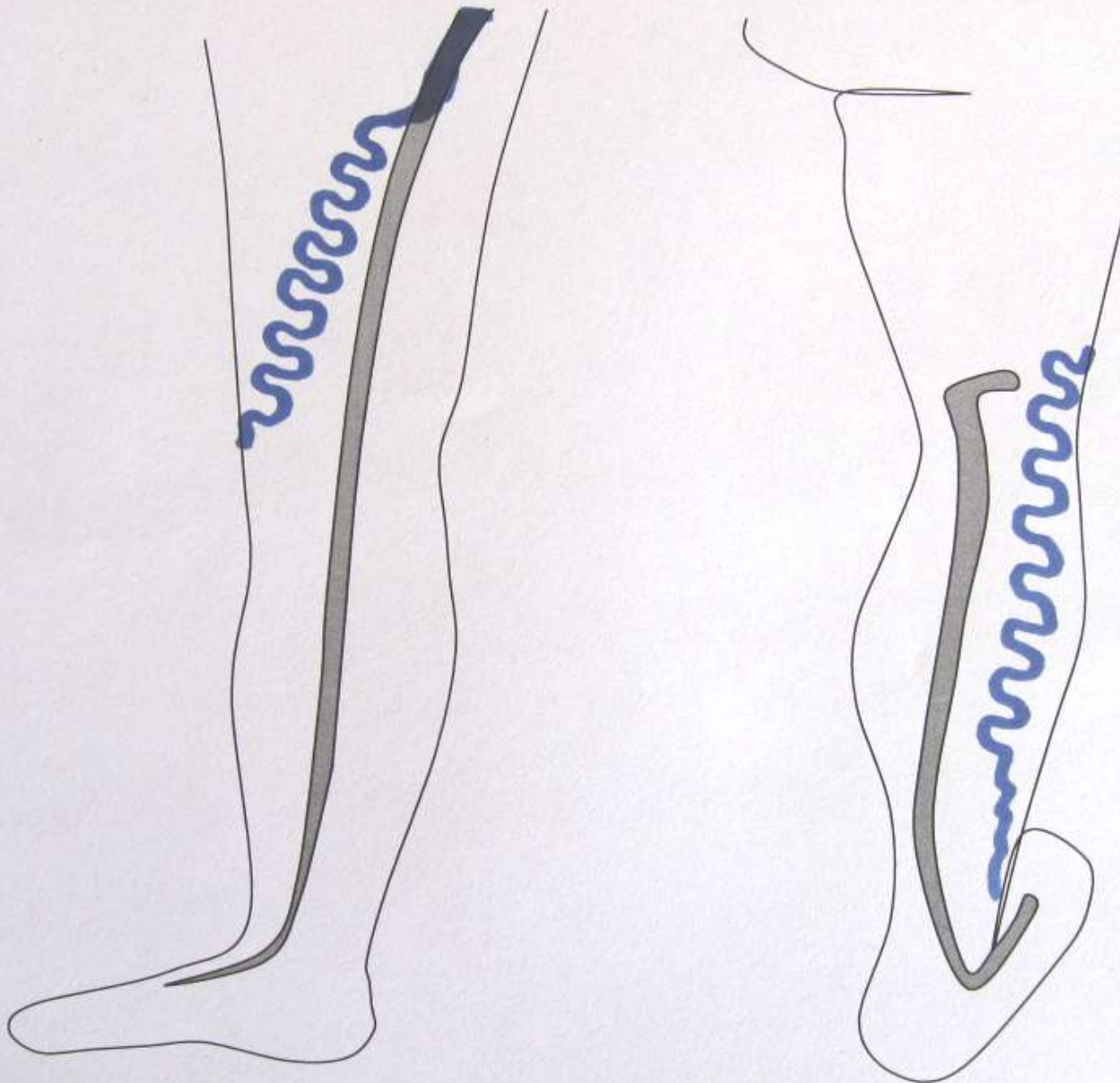
Gonadal-pelvik ven reflüsü



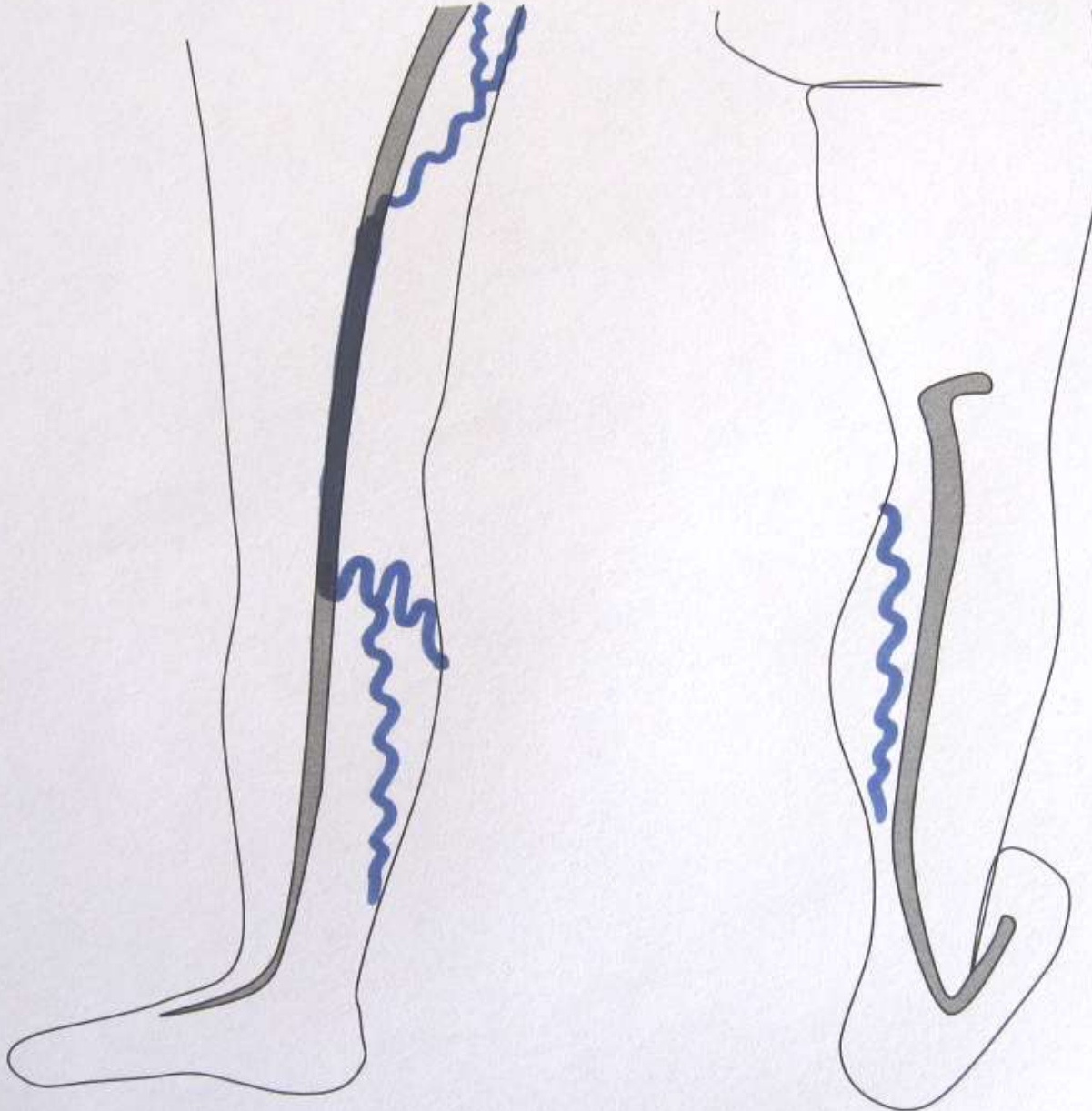
Perforan ven reflüsü



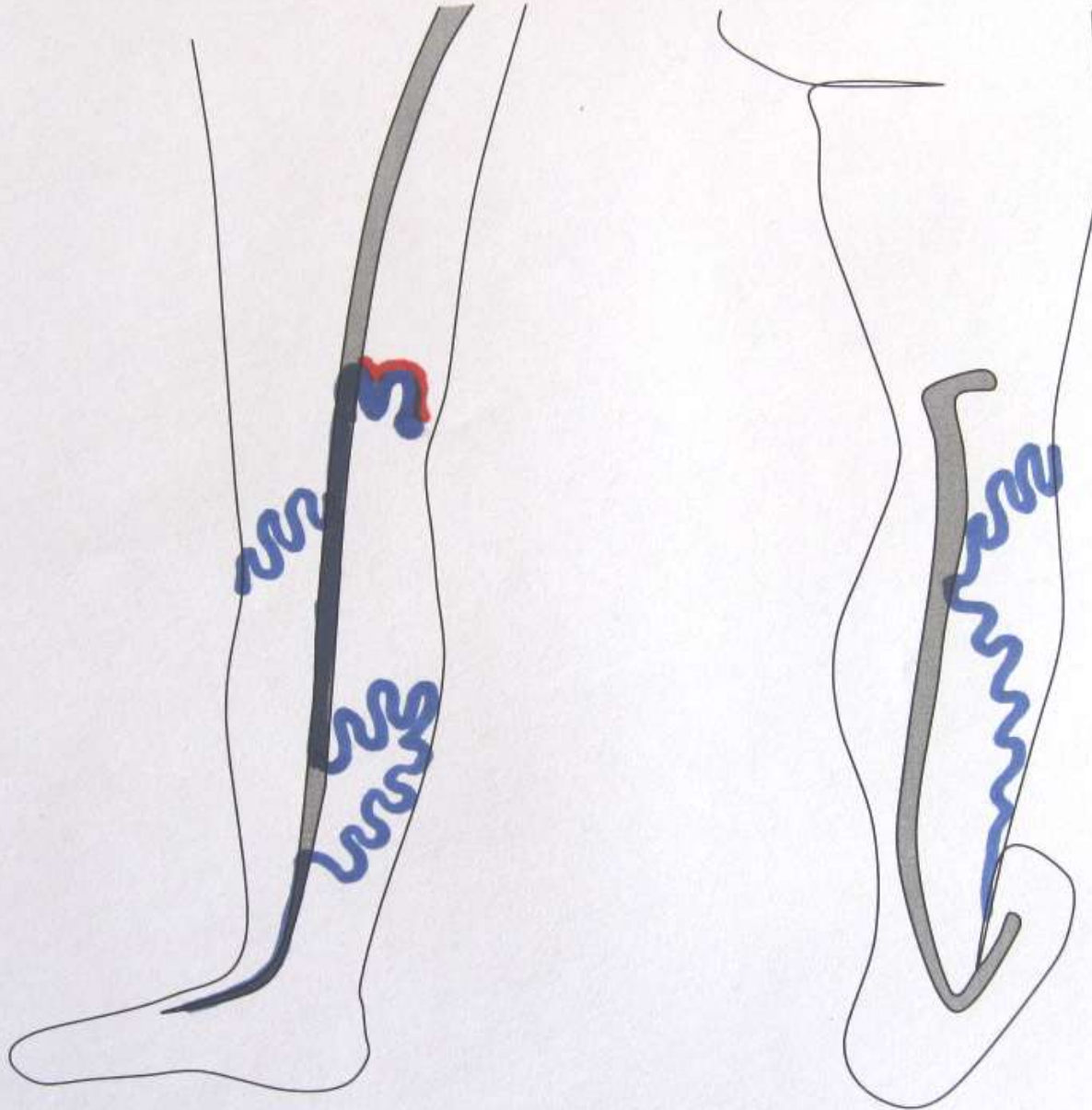
VSM + Anterolateral dal reflüsü



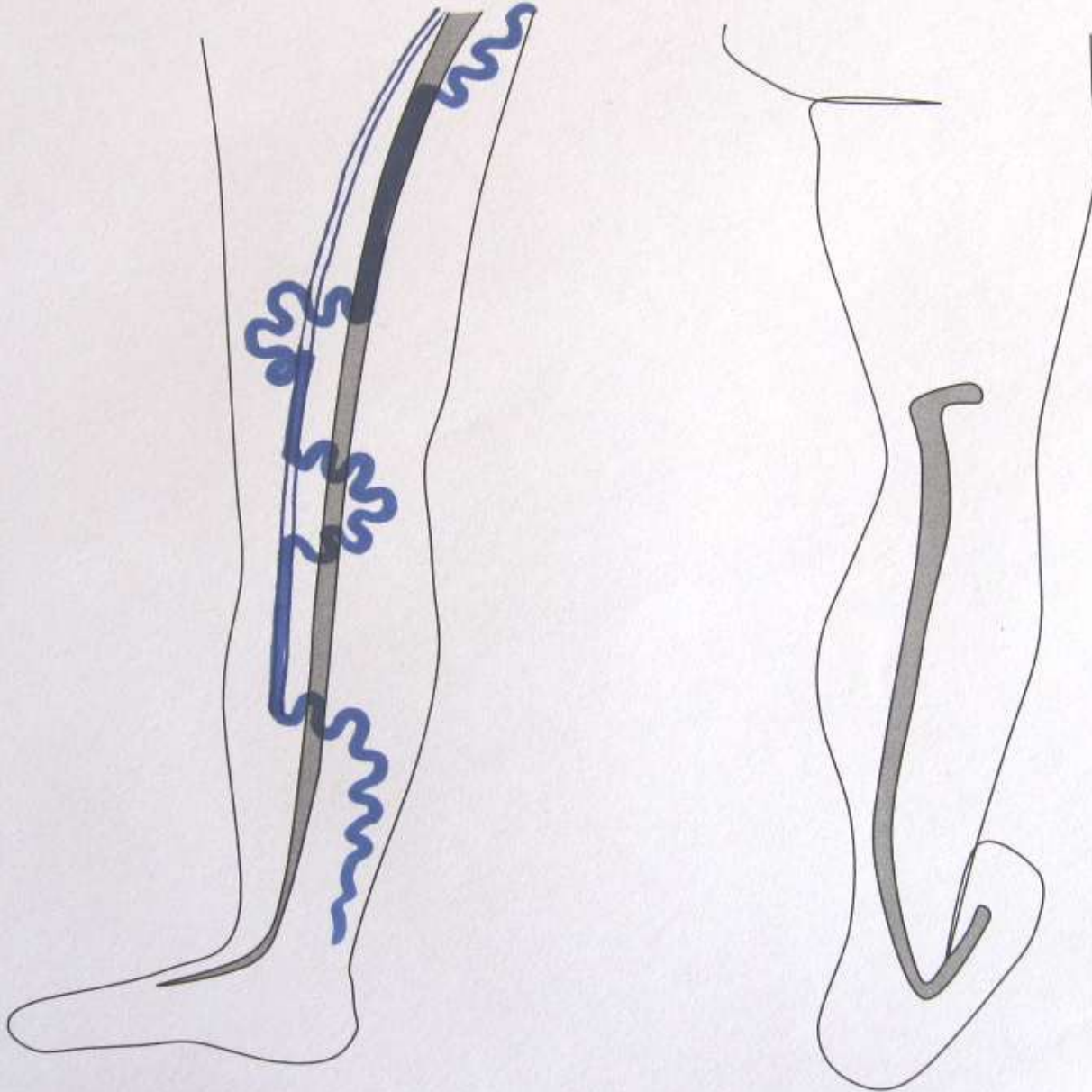
Gonadal ven + VSM reflüsü



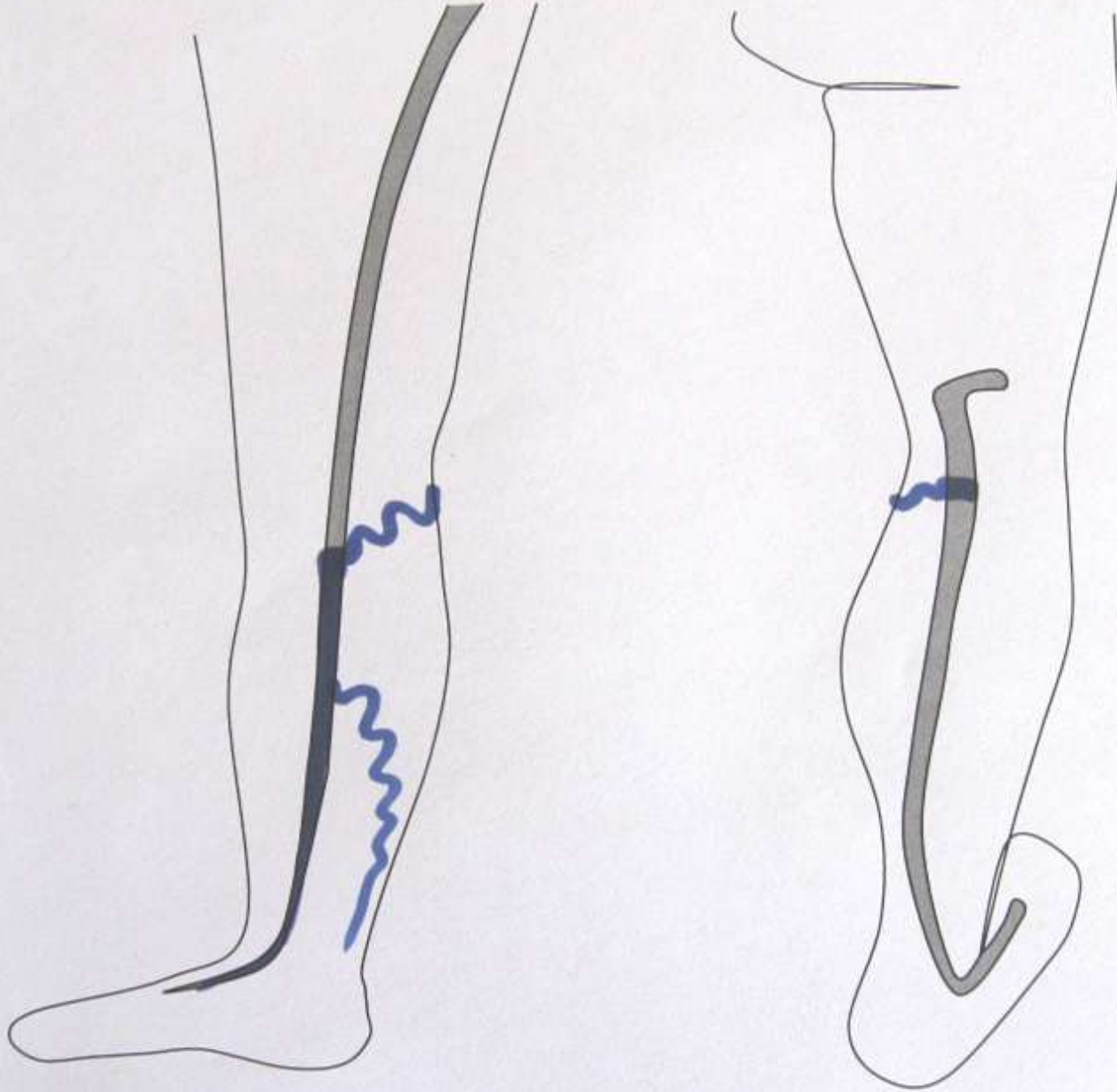
Hunter perforanı + VSM reflüsü



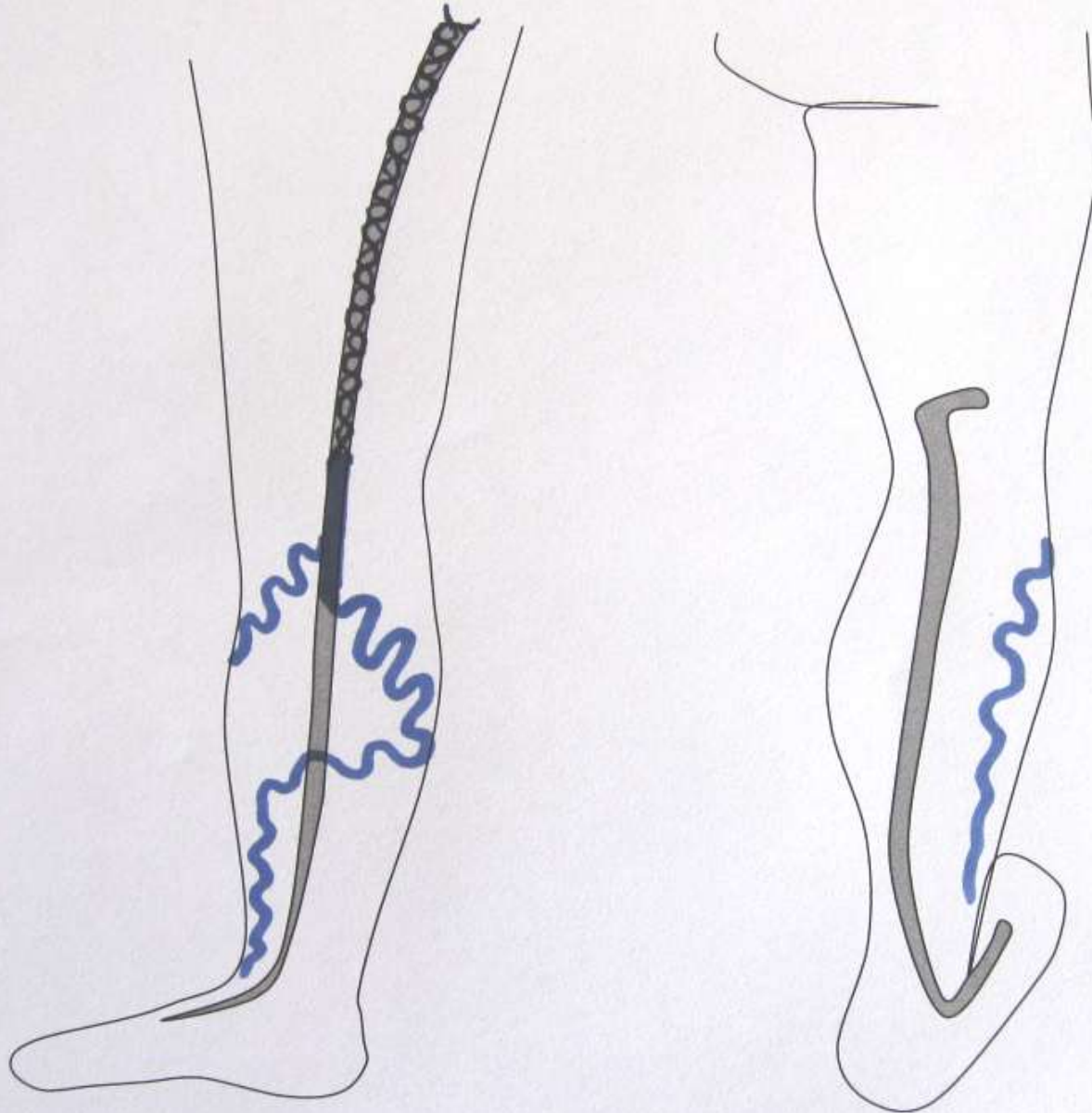
Gonadal + çift VSM reflüsü



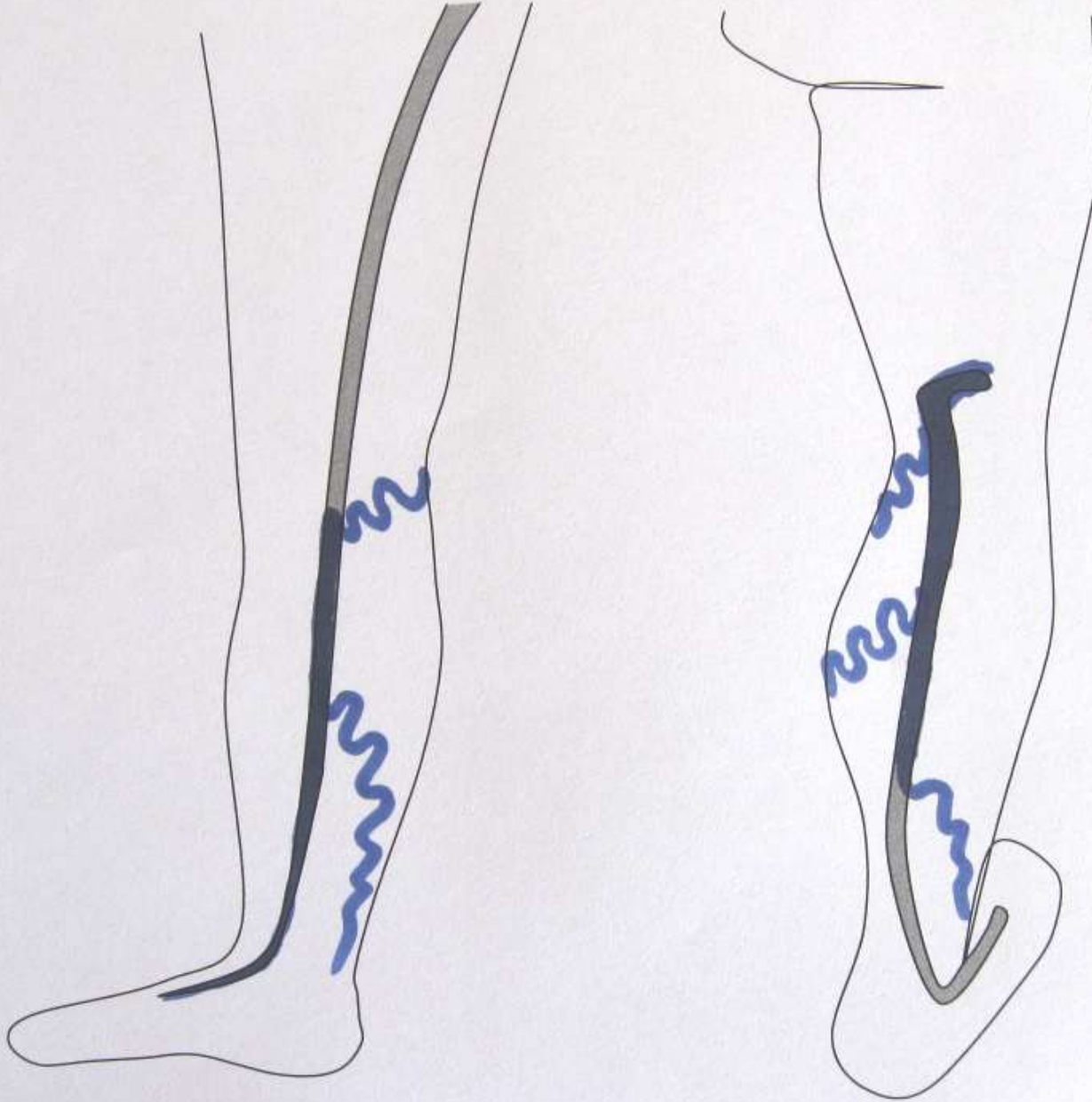
İzole yan dal + VSM reflüsü



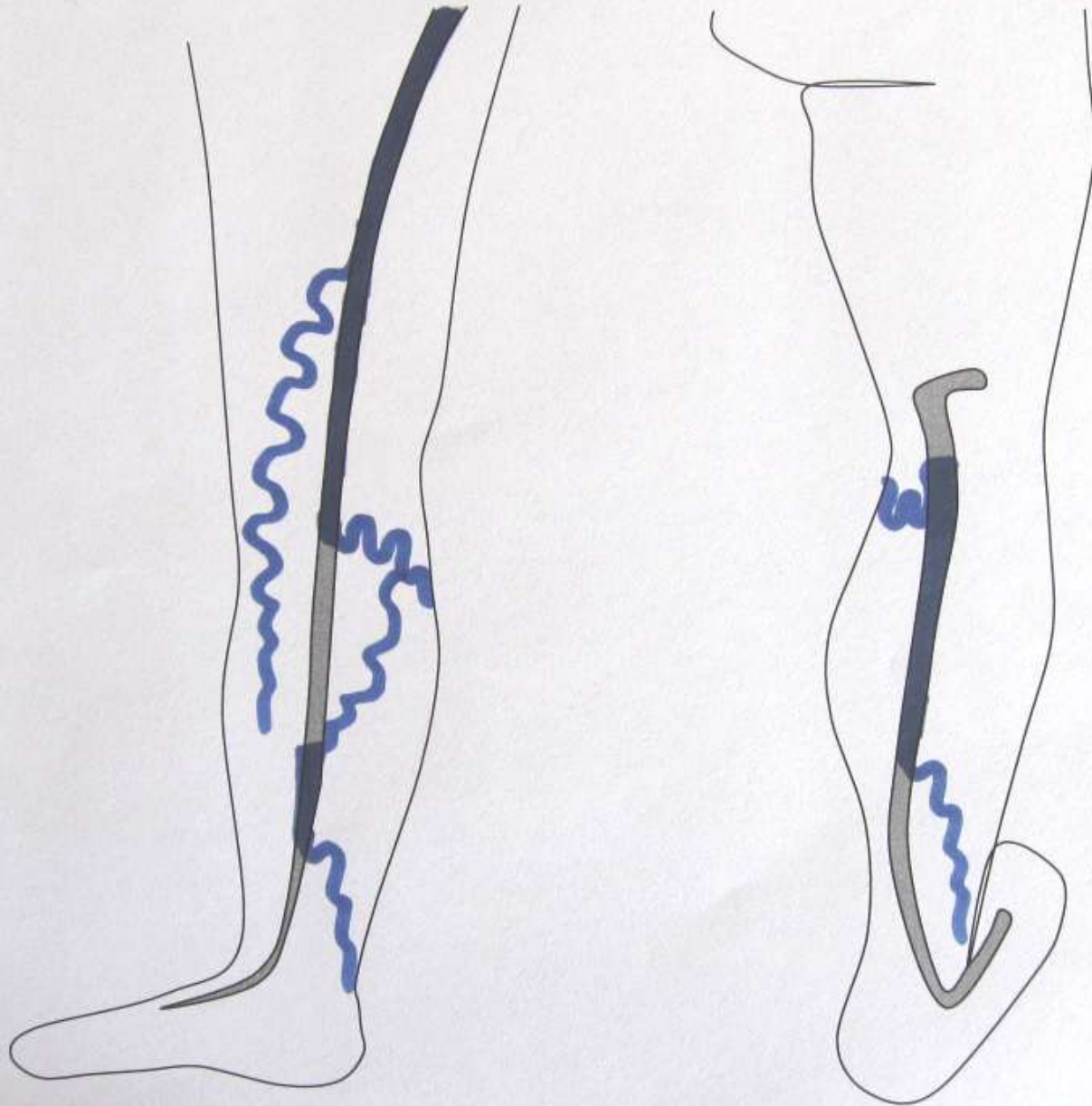
L&S sonrası nüks VSM reflüsü



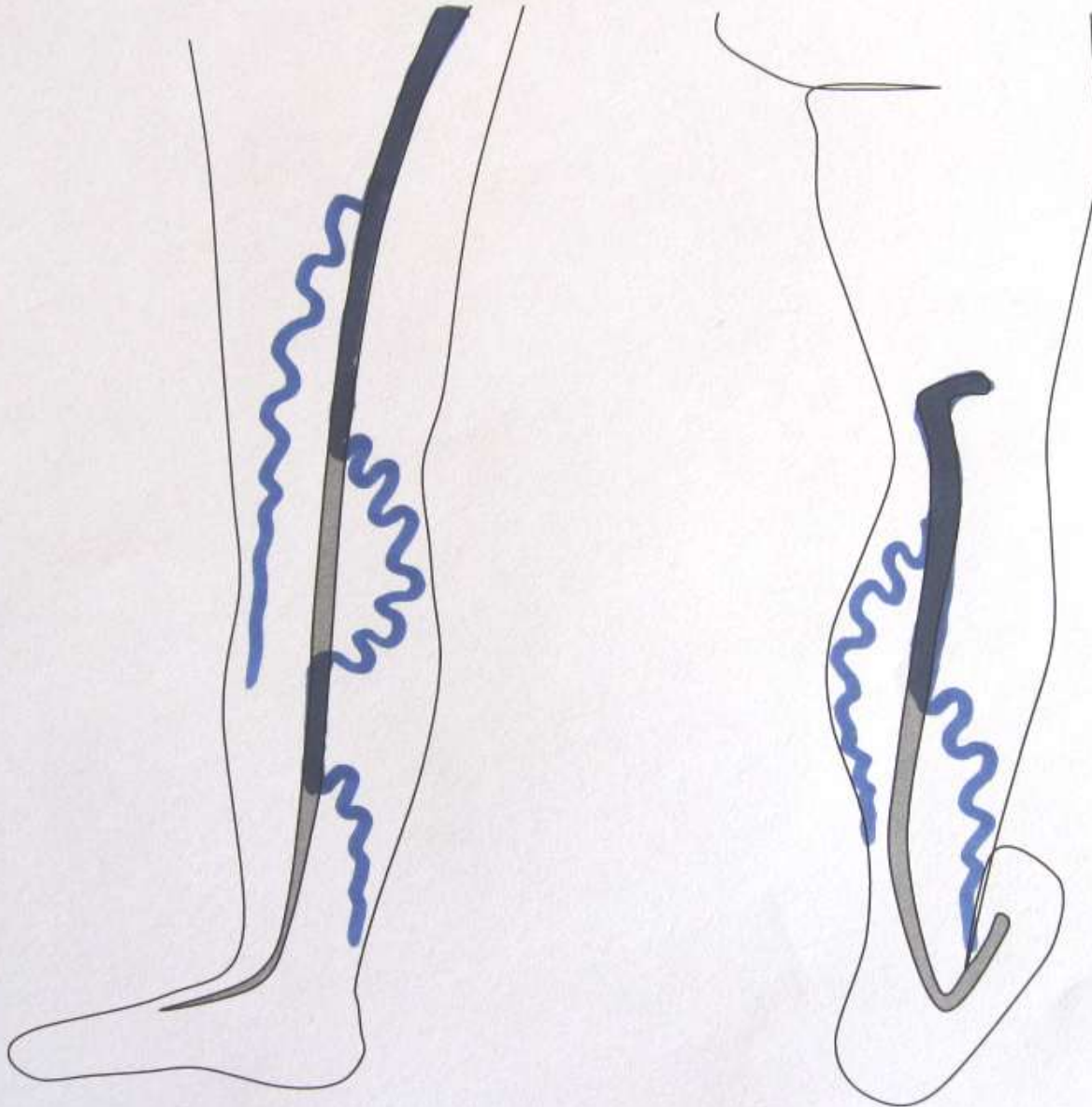
VSP ye bađlı VSM reflüsü



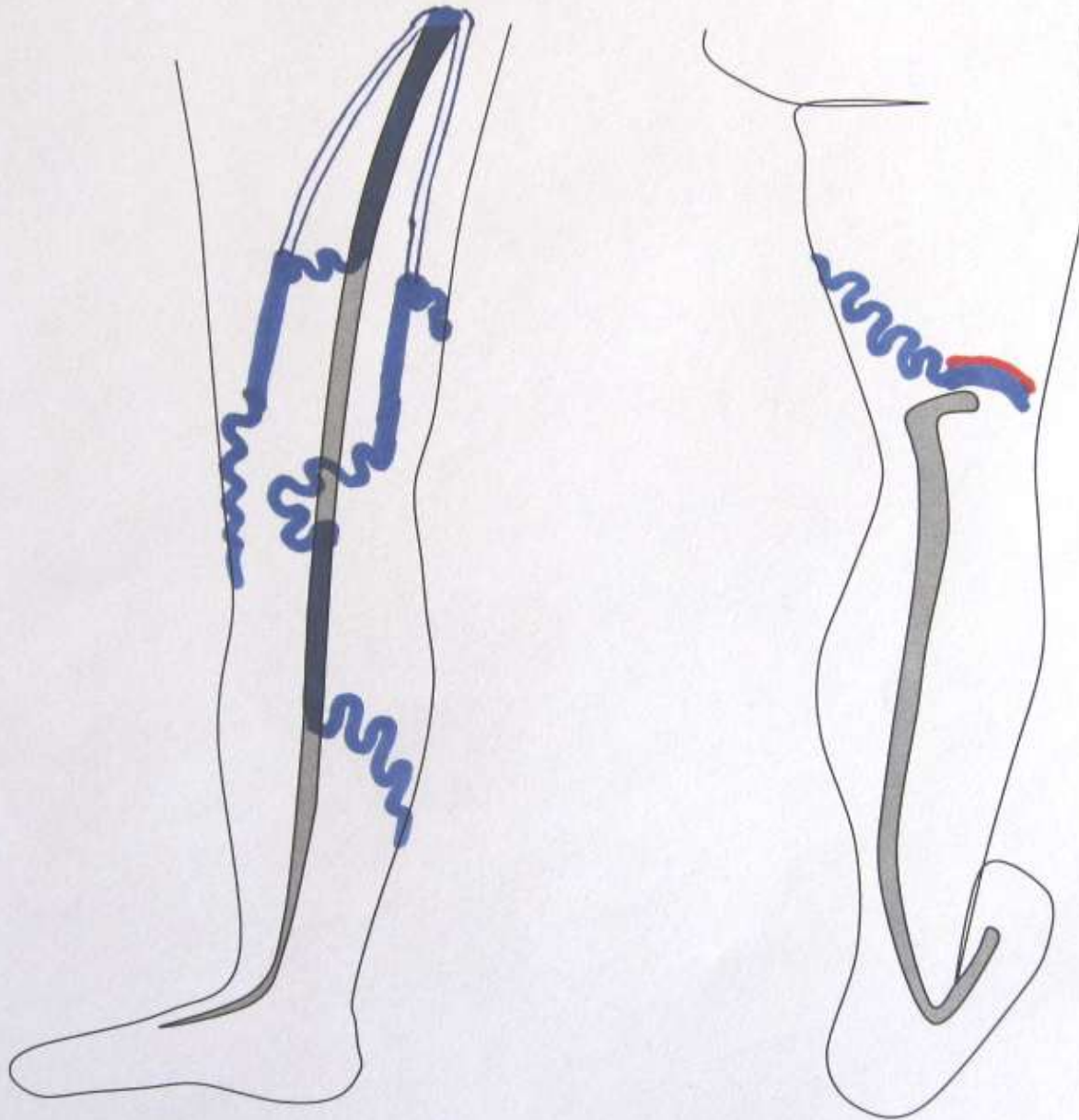
Klasik VSM + sekunder VSP reflüsü



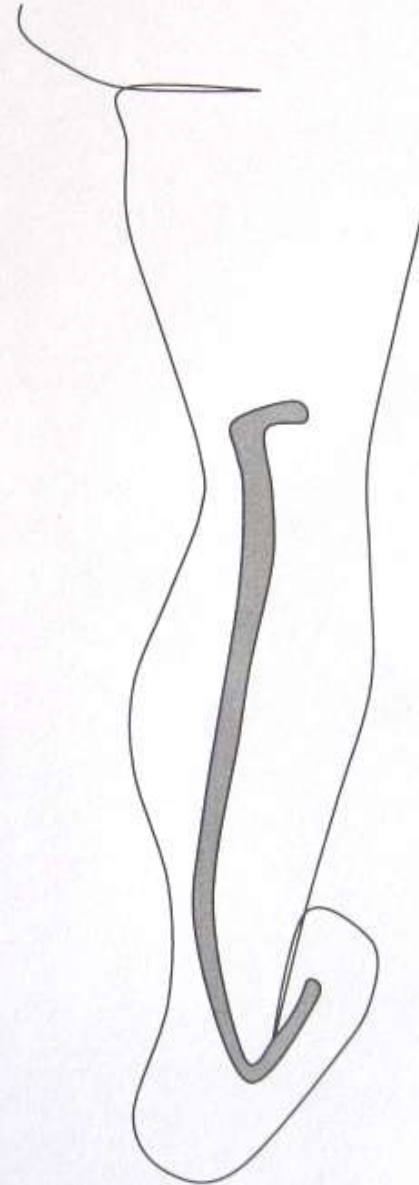
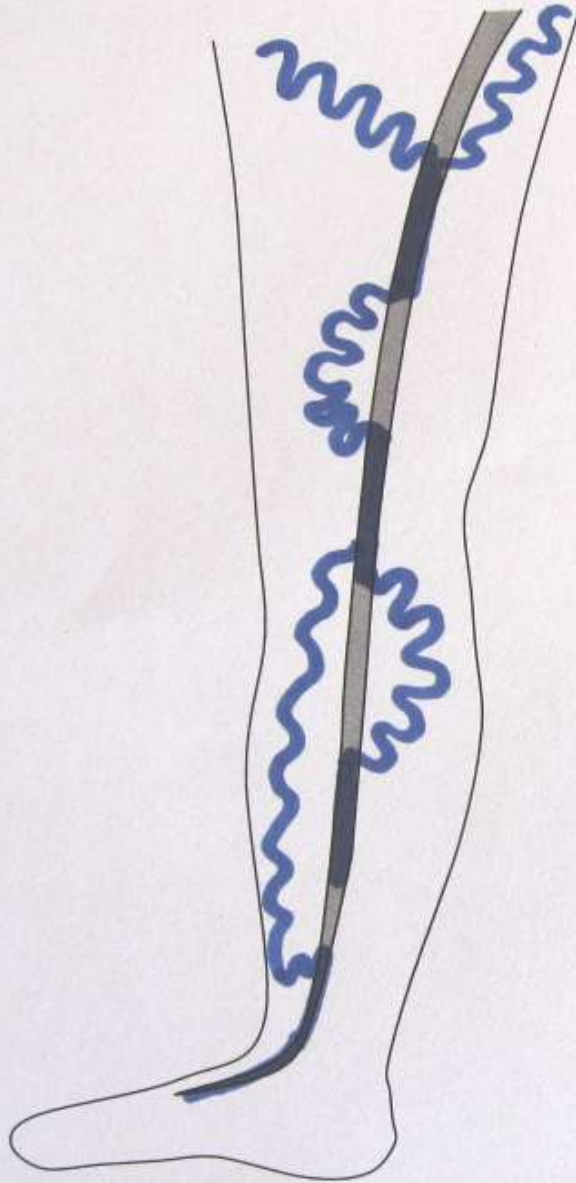
VSM + VSP reflüsü



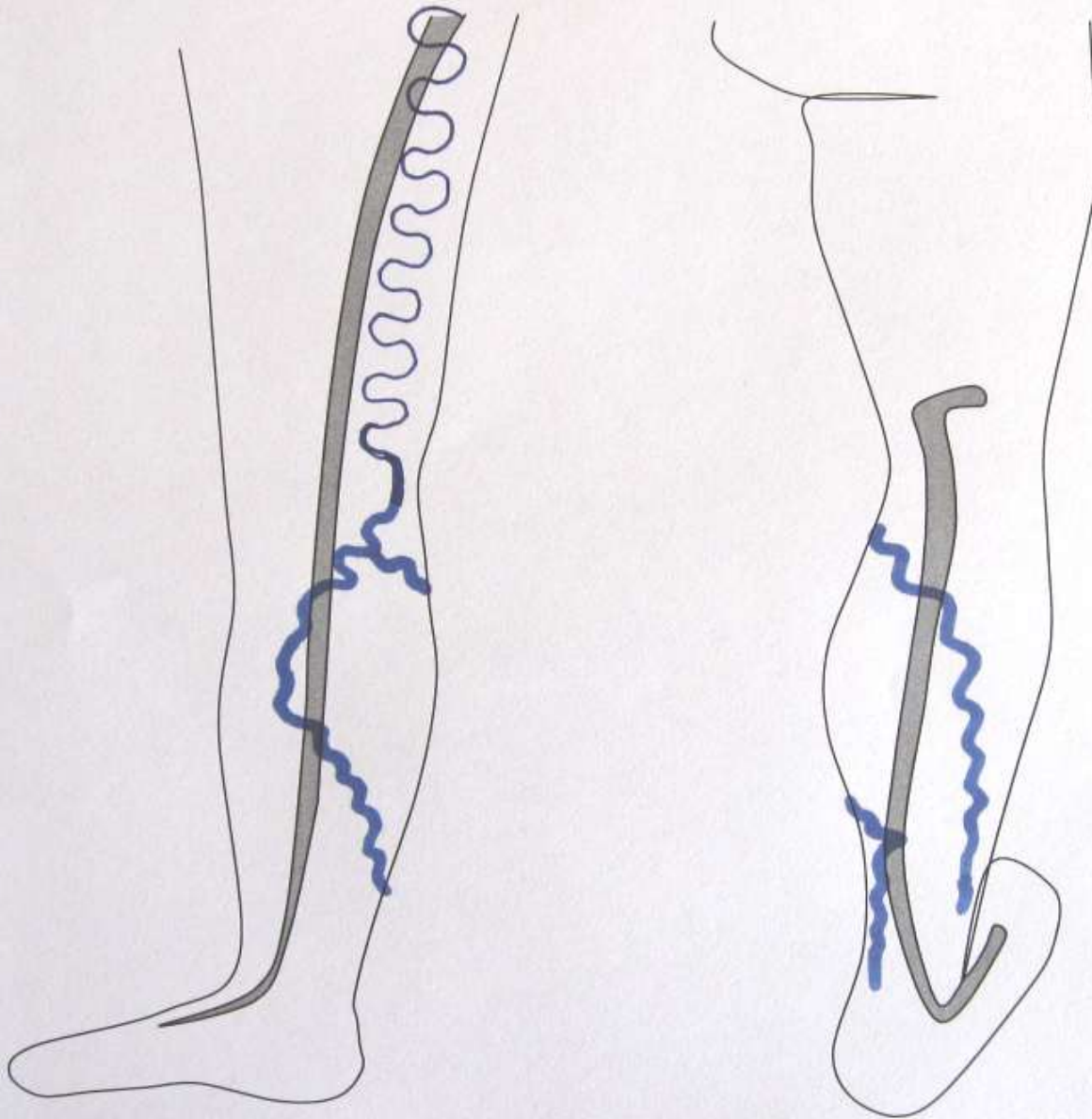
Komplike VSM + Perforan reflüsü



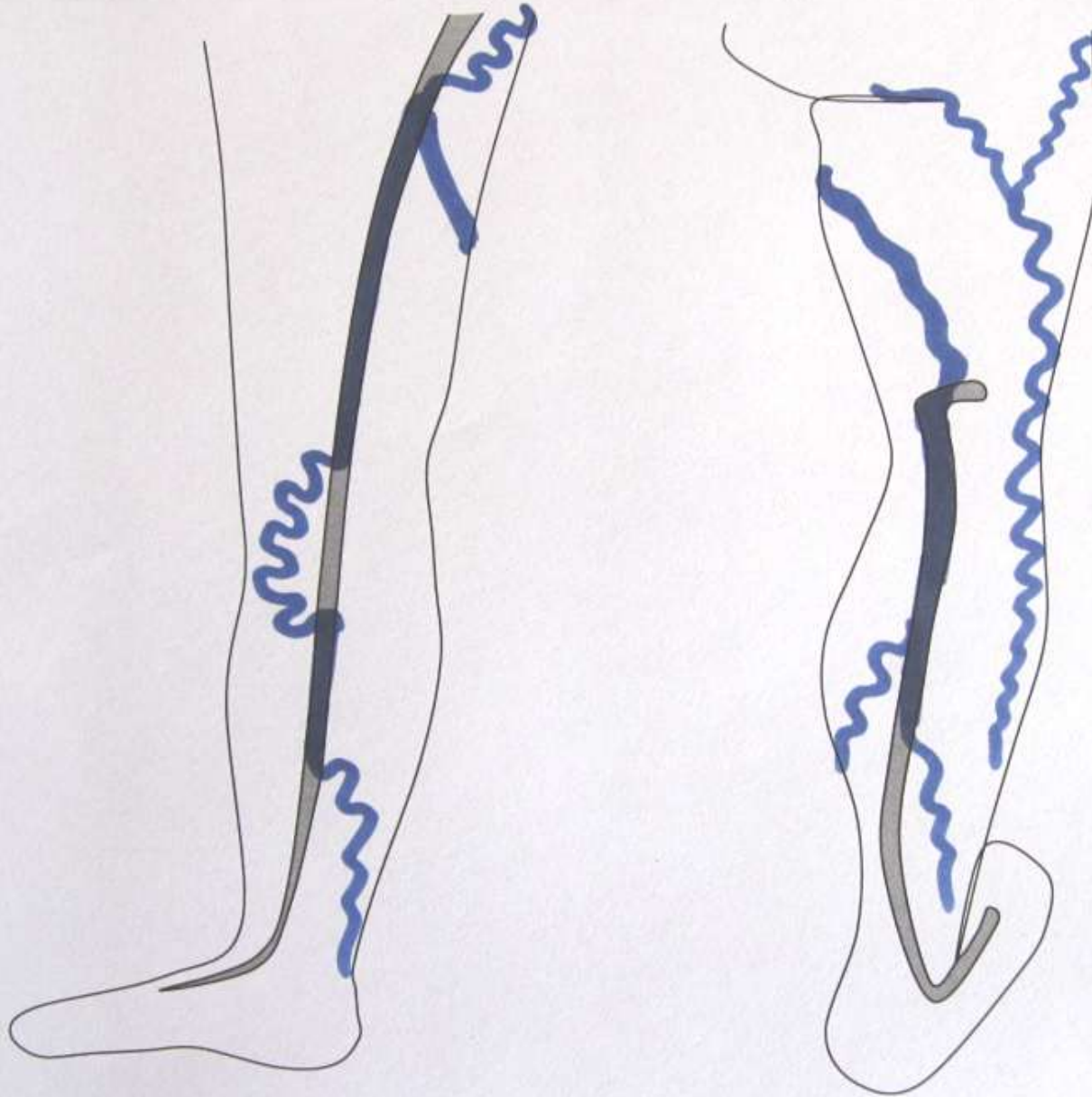
Gonadal ven + yamalı VSM reflüsü



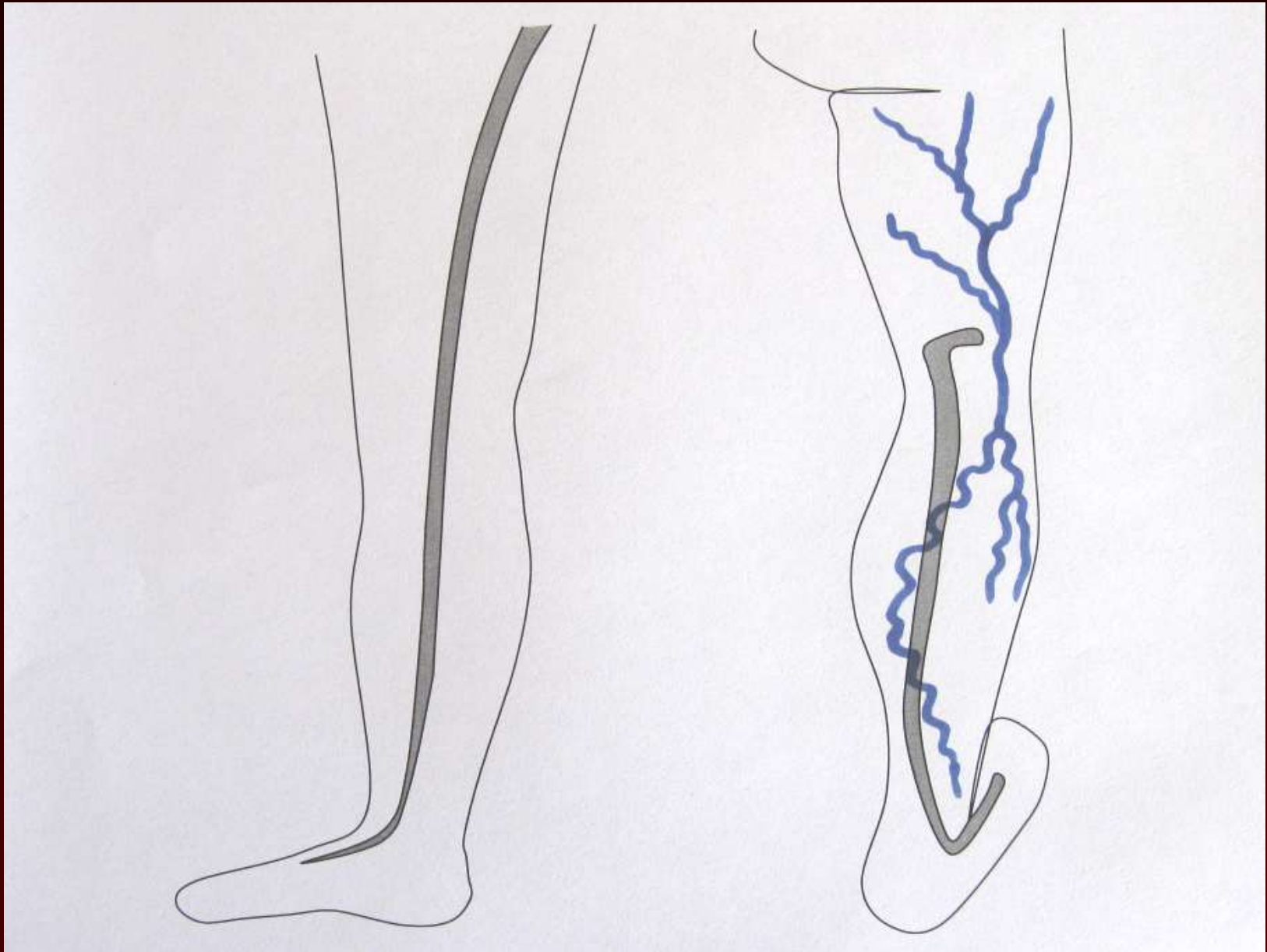
Gonadal-pelvik ven reflüsü (US ?)



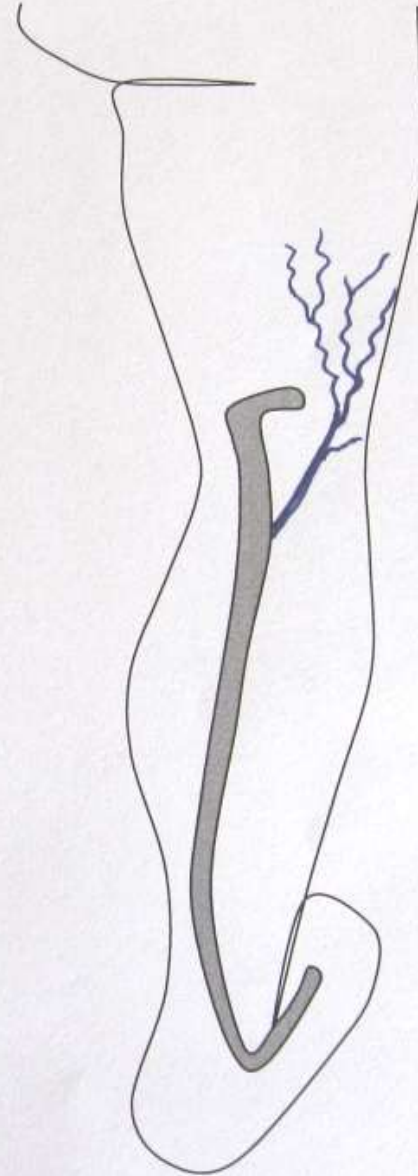
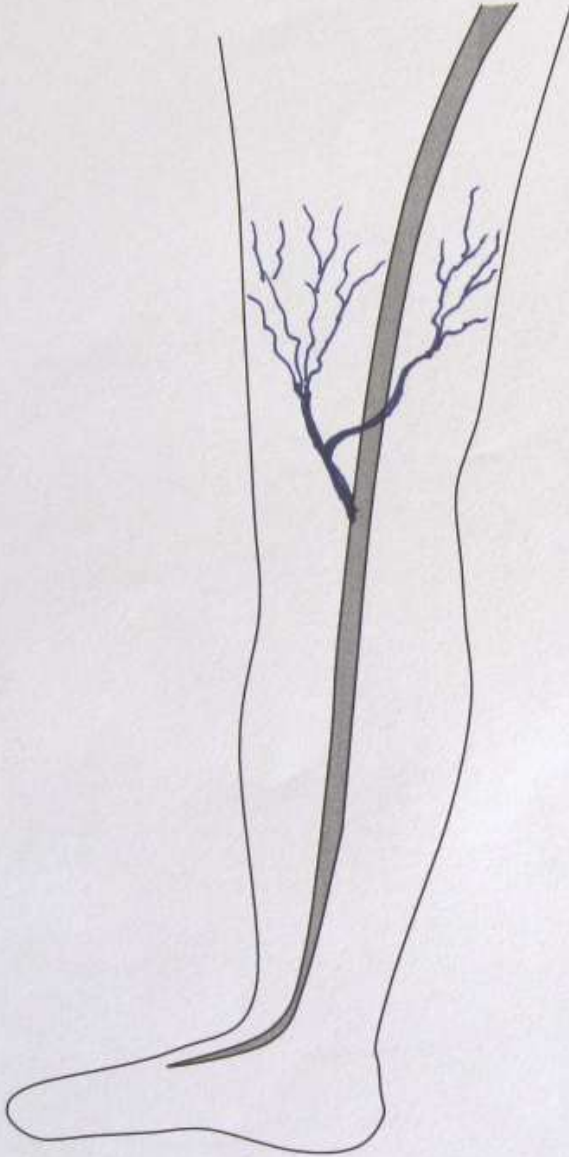
Gonadal + VSM + VSP reflüsü



Lateral subdermal plexus (LSP) reflüsü

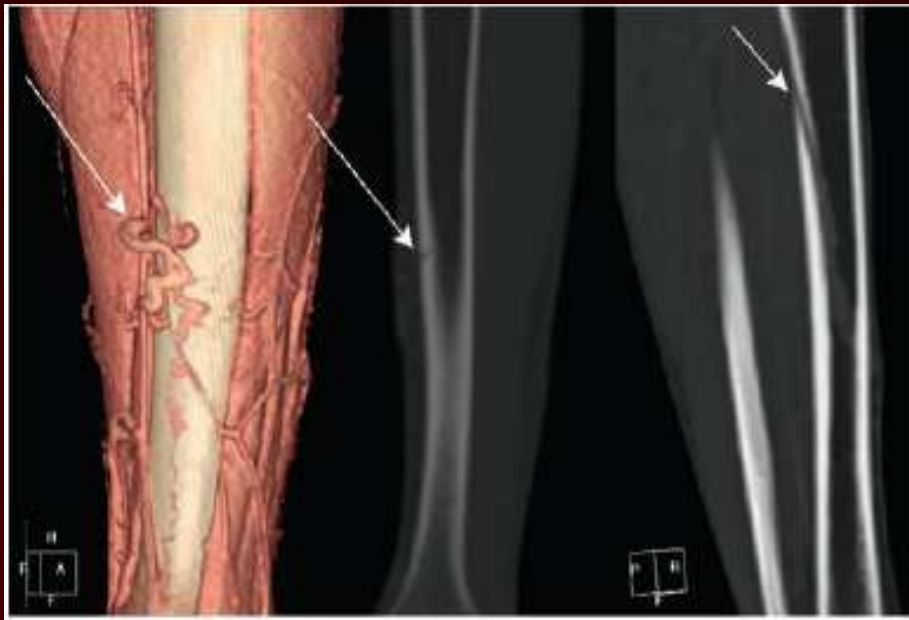


İzole yan dal reflüsü

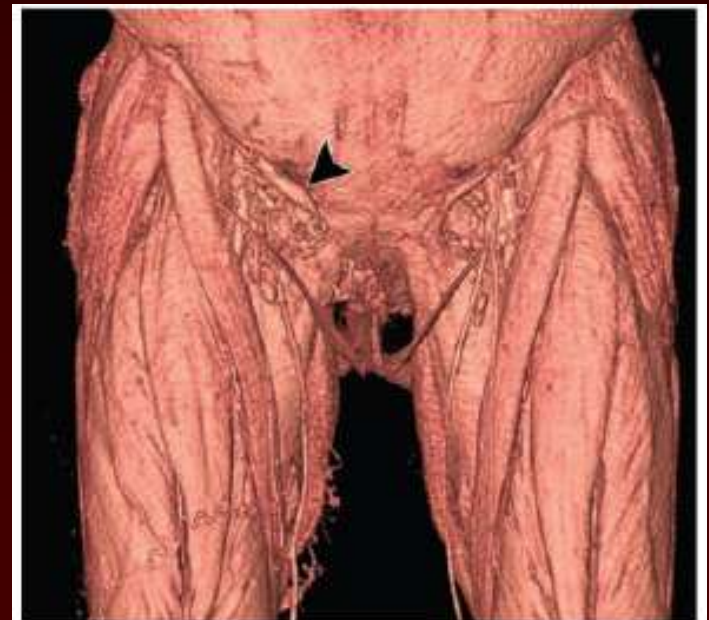


Unusual causes of varicose veins in the lower extremities: CT venographic and Doppler US findings. Radiographics. 2009 Mar-Apr

Intraosseal perforan yetmezliđi

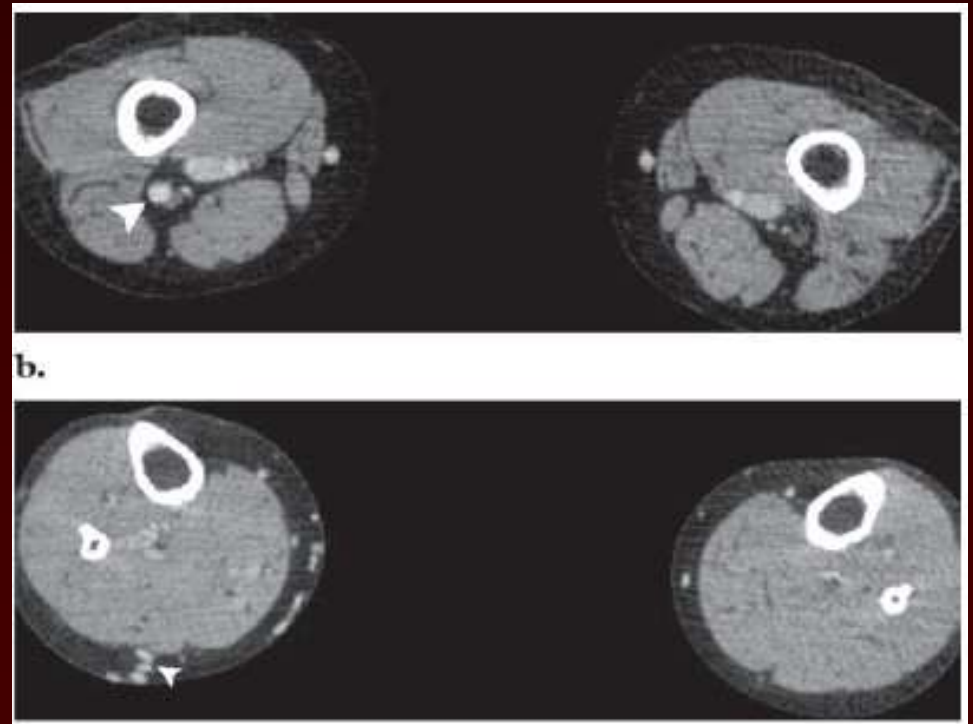


Round ligament varisleri



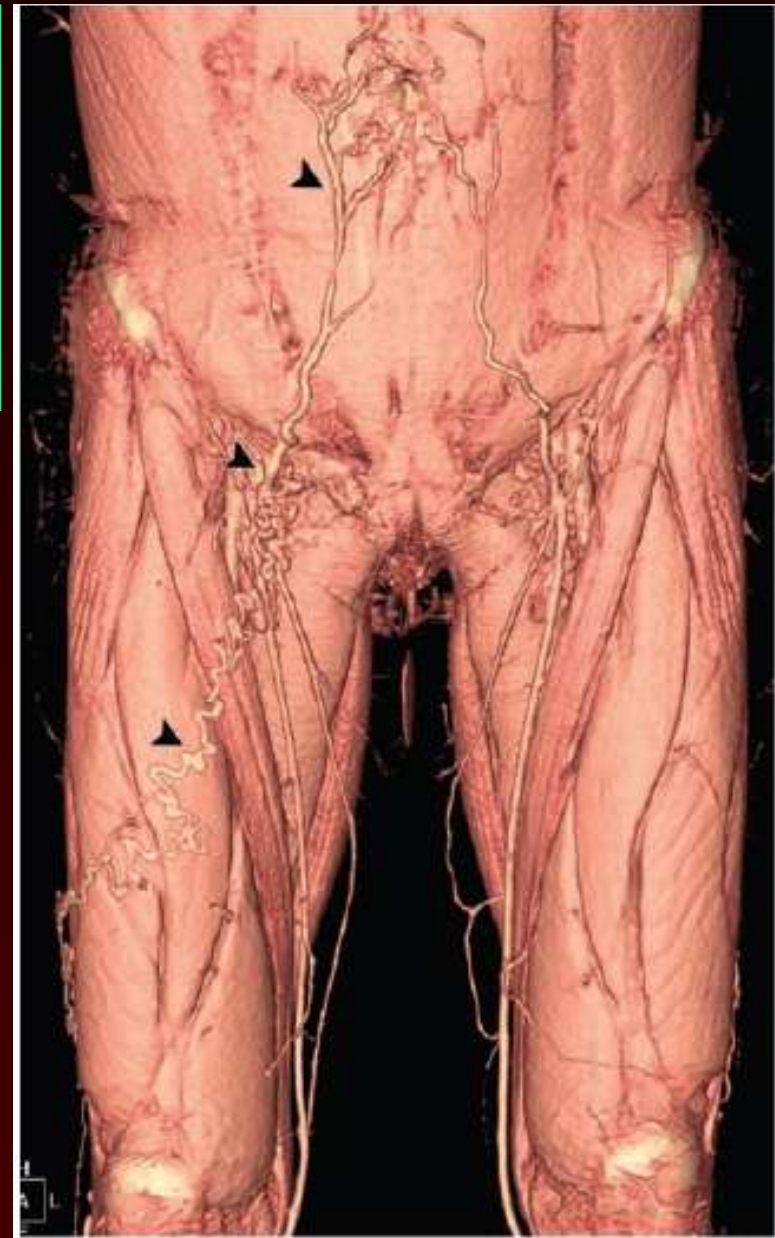
Unusual causes of varicose veins in the lower extremities: CT venographic and Doppler US findings. Radiographics. 2009 Mar-Apr

Persistan siyatik ven yetmezliđi



Unusual causes of varicose veins in the lower extremities: CT venographic and Doppler US findings. Radiographics. 2009 Mar-Apr

Klippel-Trenaunay sendromu



Portosistemik kollateral varisleri