



## ENDOVENOUS ABLATION OF POPLITEAL PERFORATORS

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**Disclosure**

Speaker name:

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☐ I have the following potential conflicts of interest to report:

☐ Consulting

☐

☐ Shareholder in a healthcare company

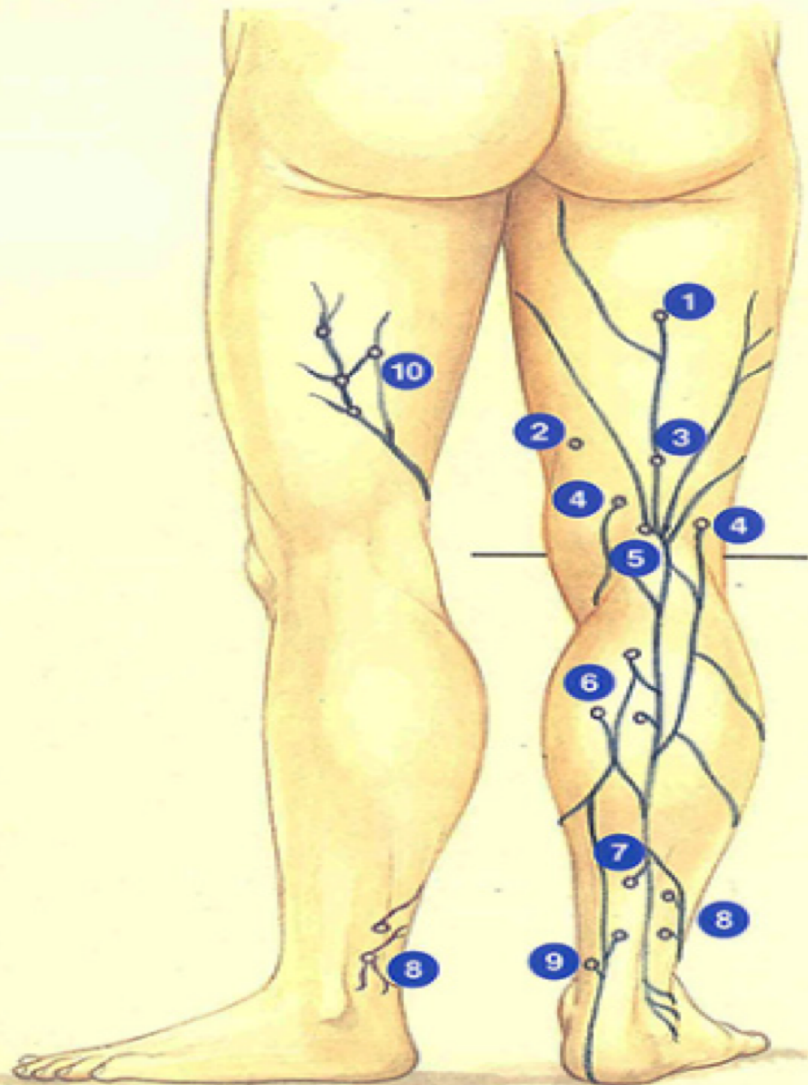
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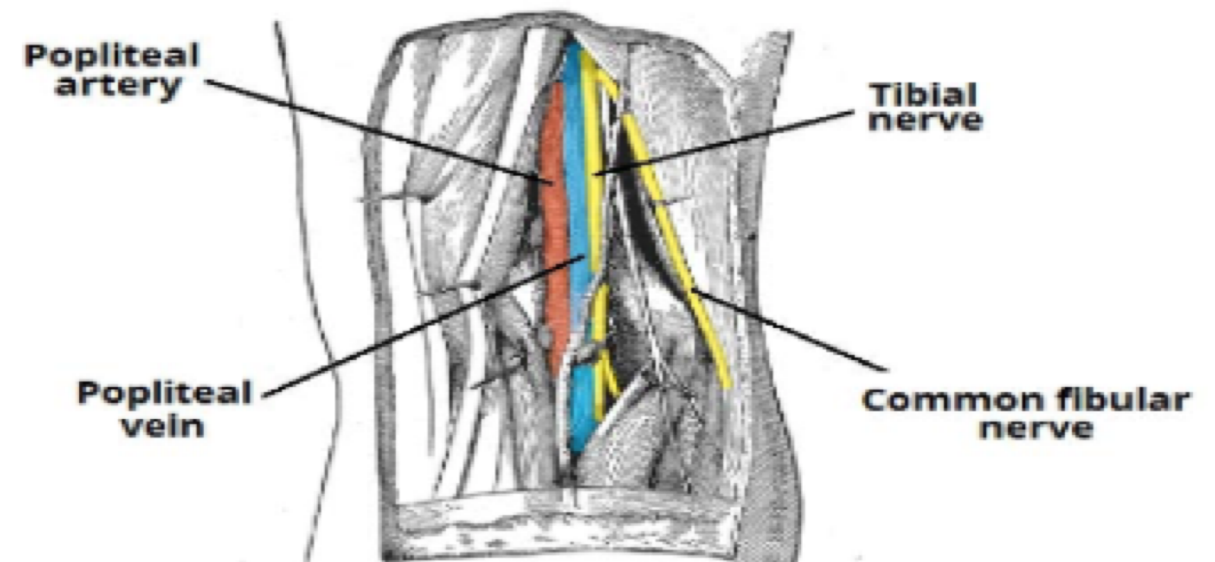
# The Problem

- Popliteal fossa perforators are often found in recurrent varicose veins after small saphenous vein ablation .
- Redo surgery in the popliteal fossa can be challenging because of fibrotic tissue , large vessels and nerves adhesions .



Perforating veins of the short saphenous territory.  
General aspect.

1. Profunda femoris perforating veins
2. Superficial perforating veins
3. Subfascial trunk, parallel to the skin
4. Perforating veins of the popliteal fossa
5. Saphenopopliteal junction
6. Medial gastrocnemius perforating veins
7. Gillot's lower pole perforating veins
8. Peroneal perforating veins
9. Medial perforating veins of the ankle
10. Perforating veins of the lateral surface of the thigh



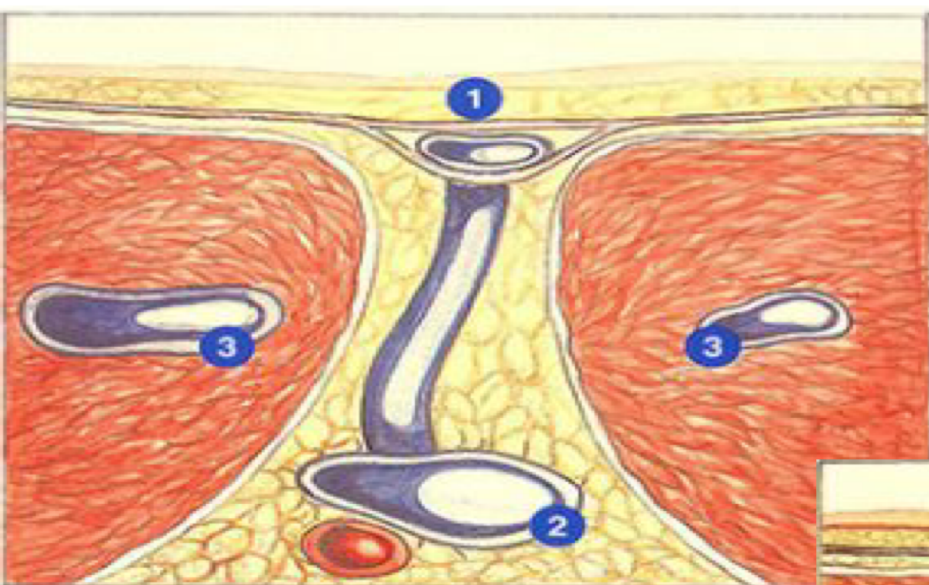


Figure 97. Direct perforating vein.

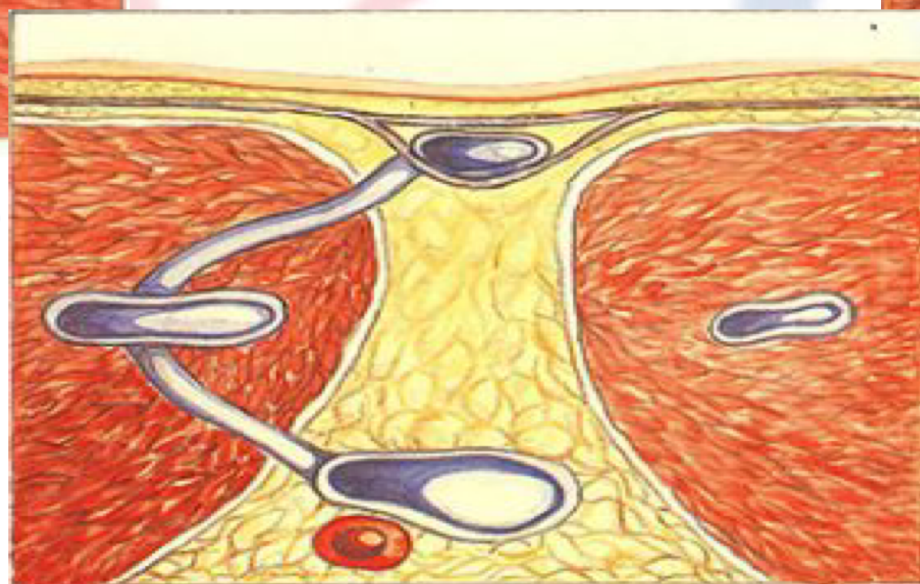


Figure 98. Indirect perforating vein.

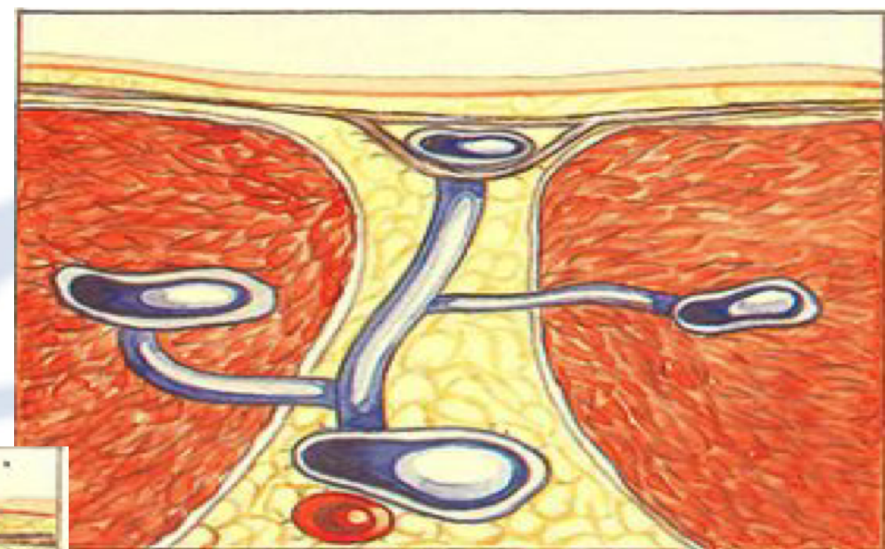
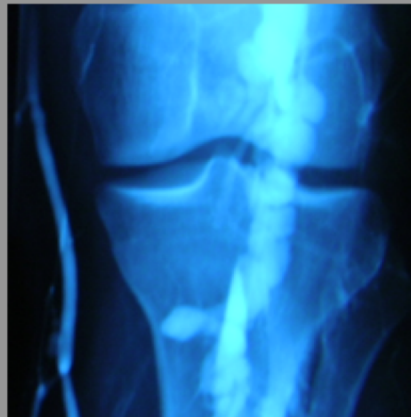


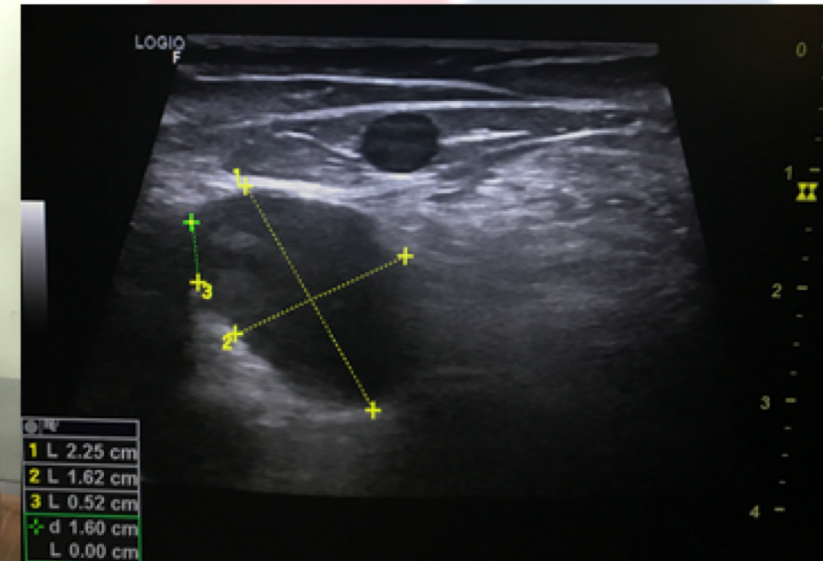
Figure 99. Branched perforating vein.



DO NOT FORGET THAT A POPLITEAL PERFORATOR APPEARING AFTER REMOVAL OF A SMALL SAPHENOUS VEIN CAN BE SYMPTOMATIC OF A POPLITEAL VEIN COMPRESSION

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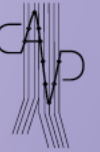
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## Which thermal technique ?

- Radio-frequency catheters have a rigid tip which cannot cross easily the tortuosities typical of these perforators .
- Radial laser fibers have the same problem , while bare fibers can be dangerous to the surrounding structures in case of perforation .



## Steam ablation

- Material :  
112 patients treated , 60 % redo surgery .
- Steam ablation with Veno Steam® device  
lateral holes catheter .
- Mean energy delivered : 180 J / cm
- LMWH for 7 days post op .



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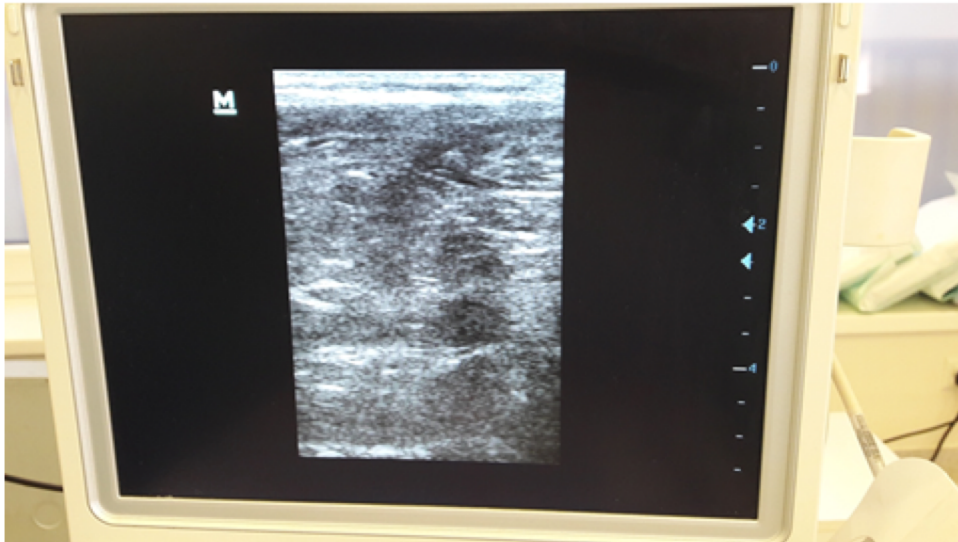
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## Complications

- No DVT or PE
- Pigmentation 15 patients , none at 2 years
- 8 light burns at entry point , healed in 6 weeks
- No paresthesia or hypoesthesia

## Results

- Closure rate 98 % at 1 month ( N = 106 )
- 93 % 1 year ( N = 93 )
- 88 % 3 years ( N = 78 )
- Pain 1,4 post operatively ,  
70 % no pain killers .

## The other option : FOAM

- Deep venous reflux associated with a dilated Popliteal Fossa vein reversed with endovenous laser ablation and sclerotherapy

DP. Link , J.Fencis , J.Carson

Case report in Radiology 2013



## Conclusions

- Steam ablation of popliteal fossa perforators is safe and efficient .
- Redo open surgery can now be avoided
- Ultra Sound Guided Foam can be an option if no large dilatation is detected close to the Popliteal vein .