



European Independent Foundation  
In Angiology/Vascular Medicine  
Education, Research, Prevention



**6th European PAD and Vascular Days**

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**Message for 2019: Chronic venous disease**

Slogan: **Varicose veins?**

- **Not just a cosmetic problem !**
- **No More Venous Ulcers !**

The term Chronic venous disease (CVD) can be defined as structural and functional abnormalities of the venous system of long duration manifest either by symptoms and/or signs indicating the need for investigation and/or care. The prevalence of CVD in the adult population has been reported to be as high as 60%, particularly affecting populations

in the developed world. Varicose veins are extremely common, with a variable reported incidence ranging from 20% to 64%. The more advanced stages of venous disease, chronic venous insufficiency (CVI), appear to affect about 5% of the population, with the prevalence of the end stages of CVI (active and healed venous ulcers) estimated at 1-2%. Severe CVD may also lead to loss of limb or loss of life. It has become clear that CVD is an important cause of patient distress and significantly impacts on healthcare resources.

The most important risk factors of CVD are age, gender (it is more common in women), obesity and positive family history.

Symptoms include aching, heaviness, leg-tiredness, cramps, itching, burning sensations, swelling and the restless leg syndrome, as well as cosmetic dissatisfaction. Signs include telangiectasias, reticular and varicose veins, edema, and skin changes such as pigmentation, lipodermatosclerosis, dermatitis and ultimately ulceration. CVD is usually caused by primary abnormalities of the venous wall and valves and/or secondary abnormalities resulting from previous deep venous thrombosis (DVT) that can lead to reflux, obstruction or both. Rarely, congenital malformations lead to CVD.

Compression therapy is the basic and most frequently used treatment of varicose veins, venous edema, skin changes, and ulcerations. Compression is recommended to decrease ambulatory venous hypertension to patients with CVD in addition to lifestyle modifications that include weight loss, exercise, and elevation of the legs during the day whenever possible. Venoactive drugs are available for treatment of symptoms of varicose veins and are also been used to decrease ankle swelling and accelerate ulcer healing. As conservative treatment has its limitation, new guidelines recommend endovascular or surgical treatment of varicose veins instead of conservative management to improve symptoms, cosmetics and quality of life.

- [Venous risk auto-test](#)