

Table V

Operative procedure	Reference <i>Abstracts corresponding to references can be found using the listing "RCTs by alphabetical order" or "RCTs by topic."</i>	Summary
Open surgery with various types of tributary phlebectomy.	Aremu M, Mahendran B, Butcher W, Khan Z, Colgan MP, Moore J et al. Prospective randomized controlled trial : conventional <i>versus</i> powered phlebectomy. <i>J Vasc Surg.</i> 2004;39:88-94.	141 patients and 188 lower extremities VV in GSV territory General anesthesia Group I (N=100): OS with tributary stab avulsion <i>versus</i> Group II (N=88): OS with tributary avulsion using Trivex® Results at 2 to 52 weeks of follow-up: <ul style="list-style-type: none"> · Fewer incisions in group II (Trivex®) compared with group I (P<0.0001) · No difference between groups in terms of operative time (P =0.16) · No difference between groups in terms of patient satisfaction and cosmetic result
	Scavée V, Lesceu O, Theys S et al. Hook phlebectomy <i>versus</i> transilluminated powered phlebectomy for varicose veins surgery. Early results. <i>Eur J Vasc Endovasc Surg.</i> 2003;25: 473-5.	80 patients VV in GSV territory General or spinal anesthesia Group I (N=40): OS with tributary stab avulsion <i>versus</i> Group II (N=40): OS with tributary avulsion using Trivex® Results at 6 weeks of follow-up: <ul style="list-style-type: none"> · Fewer incisions in group II (Trivex®) compared with group I (P<0.0001) · More bruising in group II (Trivex®) compared with group I (P=0.06) · No difference between groups in terms of postoperative pain, number of complications, residual varices, cosmetic result
	Ray-Chaudury SB, Huq Z, Souter RG, McWhinnie D. A randomized controlled trial comparing transilluminated powered phlebectomy with hook avulsions: an adjunct to day surgery. <i>The Journal of One Day Surgery.</i> 2003;13:24-7.	98 patients VV in GSV territory Group I: OS with tributary stab avulsion <i>versus</i> Group II: OS with tributary avulsion using Trivex® Post-operative results: No difference in terms of postoperative pain
	Chetter I C, Mylankal, K J, Hughes H, Fitridge R. Randomized clinical trial comparing multiple stab incision phlebectomy and transilluminated powered phlebectomy for varicose veins. <i>Br</i>	62 patients symptomatic with complicated VV in GSV territory Group I (N=33): OS with multiple stab incision phlebectomy <i>versus</i> Group II (N=29): OS with transilluminated powered phlebectomy

	<p><i>J Surg.</i> 2006;93:169-74.</p>	<p>Post-operative results:</p> <ul style="list-style-type: none"> · No difference in terms of surgery duration · Less incisions in group II compared with group I · More skin bruising and pain in group II compared with group I
	<p>Krasznai AG, Sigterman TA, Willems CE, Dekkers P, Snoeijs MGJ, Wittens CHA et al. Prospective study of a single treatment strategy for local tumescent anesthesia in Muller phlebectomy. <i>Ann Vasc Surg.</i> DOI/j.avsg. 2014.10 .028</p>	<p>101 patients C3-4, Ep, As, P r 2-4 scheduled for ambulatory Muller phlebectomy under LA Group I: anesthetic solution Lidocain 1%+ epinephrine in sodium bicarbonate 1.4% <i>versus</i> Group II: anesthetic solution Lidocain 1%+ epinephrine in saline 0.9% standard solution. Post-operative results:</p> <ul style="list-style-type: none"> · Significantly less pain during injection in group I compared with group II (P<0.01) · No significant difference between groups in terms of peroperative and postoperative pain

Abbreviations:

OS= Open surgery; Hl= High ligation + Saphenous stripping+/- Perforator ligation +/- tributary phlebectomy; GSV: Great Saphenous Vein; LA= local anesthesia; VV= varicose veins.