

Table XXV

Operative procedure	Reference <i>Abstracts corresponding to references can be found using the listing "RCTs by alphabetical order" or "RCTs by topic."</i>	Summary
<p style="text-align: center;">EVLA + phlebectomy versus USGFS</p>	<p>Lattimer C R, Kalodiki E Azzam M, Geroulakos G. Validation of a New Duplex Derived Haemodynamic Effectiveness Score, the Saphenous Treatment Score, in Quantifying Varicose Vein Treatments. <i>Eur J Vasc Endovasc Surg.</i> 2012;43:348-54.</p>	<p>66 patients classified C2-C6 with GSV incompetence and refluxing SFJ Group I (N=28): UGFS <i>versus</i> Group II (N=38): EVLA II 1470 nm diode laser, delivering intermittent energy (sequential withdrawal) phlebectomy under local anesthesia Results at 3 months of follow-up: Patients were evaluated by DUS and APG to build a saphenous treatment score (STS) There was no difference above knee in terms of STS improvement between the 2 procedures</p>
	<p>Lattimer C R, Azzam M, Kalodiki E Shawish E Geroulakos G. Cost and Effectiveness of Laser with Phlebectomies Compared with Foam Sclerotherapy in Superficial Venous Insufficiency. Early Results of a Randomised Controlled Trial. <i>Eur J Vasc Endovasc Surg.</i> 2012;43:594-600.</p>	<p>100 patients classified C2-C6 with GSV incompetence and refluxing SFJ Group I (N=50): UGFS <i>versus</i> Group II (N=50): EVLA II 1470 nm diode laser, sequential withdrawal + phlebectomy under local anesthesia Results at 3 months of follow-up: <i>Above knee GSV obliteration rate, AVVQ, VCSS, VFI:</i> no significant difference between groups Group I significantly outperformed EVLA in terms of cost, treatment duration, pain, analgesia requirements and recovery.</p>

	<p>Lattimer C R, Kalodiki E, Azzam M, Makris GC, Somiyajalu S, Geroulakos G. Interim results on abolishing reflux alongside a randomized clinical trial on laser ablation with phlebectomies versus foam sclerotherapy. <i>International Angiology</i> 2013;22(4):394-403.</p>	<p>100 patients classified C2-C6 with GSV incompetence and refluxing SFJ Group I (N 50):UGFS <i>versus</i> Group II (N 50) EVLA II 1470 nm diode laser, sequential withdrawal + phlebectomy under local anesthesia Results at 15 months of follow-up: Occlusion of the GSV was more effective in group II (EVLA) 42/44 (93. 5%) than in group I 31/46 (67.4%). However both techniques were equally effective at abolishing global venous reflux with 43% in Group I (UGFS) and 41% in group II (EVLA) The high reflux rate was not related to deterioration of quality of life and this reflux was largely asymptomatic</p>
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Abbreviations:

APG= air plethysmography; AVVQ =Aberdeen Varicose Vein Questionnaire; DUS= duplex ultrasound; EVLA = endovenous laser ablation; GSV= great saphenous vein; SFJ= saphenofemoral junction; UGFS= ultrasound guided foam sclerotherapy; VCSS= venous clinical severity score ; VFI= venous filling index