

**Table XXXXV. Deep vein internal valvuloplasty and VV
1article .1RCT.**

Operative procedure	Reference	Summary
<p>Deep vein internal valvuloplasty and VV interventional treatment outcome</p>	<p>Marakova NP, Lurie F, Hmnelniker SM. Does surgical correction of the superficial femoral vein valve change the course of varicose disease? JVS 2001;33:331-68</p>	<p>Single center study. 125 extremities with GSV+/- perforator incompetence, (superficial) femoral vein+/- popliteal vein incompetence CEAP clinical severity C2-C4 Group I (n=62 LL): GSV stripping, or/and subfascial perforators ligation +/- tributary stab avulsion. Group II (n=63 LL): GSV stripping, or/and subfascial perforators ligation, +/- tributary stab avulsion+ Internal valvuloplasty of the (superficial) femoral vein according to Kistner's technique performed first. Outcome at 4-5 years Group I: 65% of the extremities showed stable improvement, PREVAIT was present in 11% and in 24% the venous disease was aggravated. Group II: 86% of the extremities showed stable improvement and PREVAIT was present in 5 % and in 10% the venous disease was aggravated. P<0.05. After valvuloplasty, the corrected valve remained competent during follow-up in 45 extremities. Reappearance of reflux was observed in 12 extremities, Extremities in group II demonstrated superior results in comparison with group I (clinical improvement in 92% and 66% of extremities, respectively (P < .005).</p>

Abbreviations: GSV = great saphenous vein; LL=Lower limb; PREVAIT=presence of varices after interventional treatment