Table XXXXVI. Saphenous ablation with or without SEPS2 articles. 2 RCTs

Operative procedure	Reference	Summary
HL+S+ Tributary phlebectomy. <i>versus</i> HL+S + Tributary phlebectomy. + SEPS	Kianifard B, Holdstock J, Allen C, Smith C, Price B, Whiteley MS. Randomized clinical trial of the effect of adding subfascial endoscopic perforator surgery to standard great saphenous vein stripping. <i>Br J Surg</i> . 2007;94:1075-80.	Monocenter study 68 patients with primary GSV incompetence +Leg Perforator incompetence. No SSV incompetence, no major deep vein anomaly including reflux. PREVAIT excluded CEAP clinical classification C1-C5 Group I (n=34): HL +S+ Tributary phlebectomy versus Group II (n=34): HL +S+ Tributary phlebectomy + SEPS Results at 1 week to 1 year of follow-up: The addition of SEPS was not associated with significant morbidity and had no effect on VV recurrence rate or HRQoL outcomes, but did reduce the number of incompetent perforators
Saphenous ablation with or without SEPS in presence of C5-C6	Nelzen O, Franson I, for the Swedish SEPS Study Group. Early results from a randomized trial of saphenous surgery with or without subfascial endoscopic perforator surgery in patients with venous ulcer BJS 2011;98:495-500	Multicenter study. Seventy- five patient C5-C6, presenting incompetent saphenous veins GSV+/- SSV) and medial leg incompetent perforators with healed or open ulcer. Exclusion criteria : deep veins reflux grade III. No data on possible vein obstruction. Group I (n=37): Saphenous stripping+ stab avulsion <i>versus</i> Group II (n=38) Saphenous stripping+ stab avulsion + SEPS Follow-up at 1 week and 12 months

	Results:
	There was no short-term benefit in ulcer healing for adding SEPS to
	saphenous ablation

Abbreviations: GSV = great saphenous vein; PREVAIT=presence of varices after interventional treatment; SEPS= subfascial endoscopic perforator ligation; SSV=small saphenous vein