

High crossectomy without vascular sectioning vs classic saphenectomy.

Randomized clinical trial: Analysis of recurrent varicose [Crossectomía alta sin sección vascular frente a safenectomía clásica. Ensayo clínico aleatorizado: Análisis de la recidiva varicose]

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Background. This study was designed with the purpose of defining a new surgical procedure for varicose veins surgery and to be compared with classic crossectomy in terms of reducing varicose recurrence rate. Material and methods. Double-blind randomized clinical trial. For easy access, we selected 150 patients who came to Phlebology Unit Consultation, meeting the criteria for inclusion in the study with their informed consent, to be included in a study group using random table numbers table numbers. Group 1: (CS) Saphenectomy classic 75 patients. Group 2: (HCWVS) High crossectomy without vascular sectioning. In both groups the monitoring was conducted at 12 and 24 months by Eco-Doppler study. Results. The incidence of varicose recurrence at 12 months follow up was 69.3% in the group of patients undergoing CS, while in the group receiving HCWVS was 29.3% ($p < 0.0001$). These differences, though minor, remain statistically significant at 24 months of evolution (76% vs. 48%, $p = 0.0004$). The most common type of recurrence is the type I with statistically significant differences at 12 and 24 months. Conclusions. High crossectomy without vascular section has a global recurrence probability significantly lower than with classic saphenectomy at 12 months (29.3% vs. 69.3%), which remains, though smaller, statistically significant at two years of evolution (48% vs. 76%). The recurrence reticular type rate is significantly lower in the group of patients undergoing high crossectomy without vascular section compared to those undergoing saphenectomy with classic crossectomy.

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