



# UIP NEWSLETTER

OCTOBER 2024



## Remembering Pauline

The International Union of Phlebology deeply thanks all the Colleagues around the world who have honoured our Educational Committee Chair Pauline Raymond-Martimbeau by means of several online and personal contributions.

Considering the huge professional and personal value showcased by Dr. Raymond-Martimbeau, UIP has decided to dedicated this newsletter to her and to all the ones who will like to leave a message and/or a picture in her honour by a simple click on this link

**Leave your message**

<https://www.uip-phlebology.org/remembering-pauline>

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# IN MEMORIAM

It is with a heavy heart that the Canadian Society of Phlebology announces the recent and sudden passing of Dr. Pauline Raymond-Martimbeau. A huge hole remains in all of our lives professionally. I have been surprised at how often my thoughts have gone to Pauline since her passing and have been reminded of our shared loss.

Pauline was a legend in our field, a pioneer, a physician, and a leader. I have known her for 20 years and am very grateful for that. I felt I could always count on her, whether for support, or an opinion, and it was always given with enthusiasm. Her tireless dedication, energy, passion, capacity to teach & treat patients, and further Phlebology, not only in Canada, but internationally, was incredibly admirable. She often had a twinkle in her eye, and always a spark for life, adventure, and learning. I will never forget that. Family was clearly very important to her. She had such a big heart.

Our thoughts and love are with her family, her partner Louis, her beautiful daughters Stéphanie and Claude-Émilie, her grandchildren, and her siblings. A loss like this is so very difficult, and we draw together around them in support.

Last, but not least, Pauline was also a true friend. I will miss her greatly as we all will and do. She is gone now physically, but never forgotten. We all carry a piece of her inside of us, and that is how she will carry on as a force of good in our lives. Rest in peace, Pauline.



Dr. Janna Bentley  
Canadian Society of Phlebology President

*Pauline was a legend in our field, a pioneer, a physician, and a leader.*



# IN MEMORIAM

## Pauline Raymond-Martimbeau

by Lorena Grillo

It is with deep sadness that we announce the passing of Dr. Pauline Raymond-Martimbeau, an eminence in the field of phlebology and a beloved member of the International Union of Phlebology (UIP) community. Her contributions to the science, practice and teaching of phlebology have left an enduring legacy that will continue to inspire generations of physicians and researchers.



Pauline Raymond-Martimbeau was a pioneer. A graduate of the University of Montreal, she pursued postgraduate studies in phlebology and vascular surgery in Paris, France. This early exposure to the pioneers of phlebology awakened in her a lifelong passion for the advancement of venous and lymphatic medicine. Throughout her career, she became a leader and mentor, known for her tireless pursuit of innovation, her dedication to excellence and her unwavering belief in the power of education.

Her professional accomplishments are extraordinary. Dr. Raymond-Martimbeau served as president of the Canadian Phlebology Society from 1993 to 2016, where her leadership shaped the vision and impact of the organization. She also served as vice president of the UIP and treasurer of the American College of Phlebology (now the American Society of Vein and Lymphatics). She chaired numerous influential committees, including the ACP International and Education Committees, demonstrating her ability to lead with vision and purpose.

Her contributions were recognized worldwide and she was distinguished as an Member of Honour of the UIP, the French Society of Phlebology and the French College of Vascular Pathology. She received numerous awards, including the Gold Medal of the University of Montreal, the Jobst Research Award and the NASP Award, cementing her reputation as a leader and innovator in the field.

Dr. Raymond-Martimbeau's academic work has been equally impactful. She is the author of more than 100 scientific articles and five textbooks, including the influential *Ambulatory Phlebectomy*, which remains a cornerstone for physicians worldwide. As associate editor-in-chief and editorial board member of leading medical journals, she brought rigor and knowledge to the scientific community. Her voice resonated at national and international congresses, where she gave hundreds of research presentations and lectures, sharing her knowledge and inspiring her colleagues.

# IN MEMORIAM

## Pauline Raymond-Martimbeau

by Lorena Grillo

Pauline was not only a scholar and a leader, but also a passionate educator. She dedicated her life to mentoring young physicians and promoting medical education. As an official professor and tutor at the Quebec College of Physicians and Surgeons, she played a pivotal role in training the next generation of phlebologists. Her passion for teaching extended beyond borders, with a focus on underserved medical communities. She envisioned a more inclusive future for phlebology, where excellence in education and research would be accessible to all.

Her influence extended far beyond her professional accomplishments. Pauline was known for her warmth, grace and unwavering strength. She faced challenges with dignity and inspired others with her determination and kindness. She was a friend, a mentor and a role model to many, and her influence will be deeply felt for years to come.

For the Communications and Public Relations Committee and the Executive Committee, it is an honor and a solemn duty to reflect on Pauline's remarkable life. Her passing is an immeasurable loss to the global phlebology community, but her legacy lives on in the countless lives she touched and the advances she promoted.

Let us remember Dr. Pauline Raymond-Martimbeau not only for her extraordinary achievements, but also for the values she championed: excellence, integrity, inclusiveness and a deep commitment to creating a better world through medicine and education. As we continue her work, let us strive to embody her spirit in all that we do.

Pauline, you will be greatly missed, but your memory and legacy will remain with us forever. Rest in peace, dear friend, mentor and pioneer. Your impact on the vein world (and all of us) will never be forgotten.



**Lorena Grillo, MD**  
**UIP Vice President**

# Remembering Pauline

*“While all the vein-lymphatic world mourns the departure of our Educational Committee Chair, we should all also feel blessed in having enjoyed part of our path with such a Professional and Person. The tragedy in the close up offers us the chance of a wider vision in the long shot, leading us to treasuring our relationships among colleagues from all continents, reminding us to use the same professional determination and personal niceness our “Queen Pauline” showcased so beautifully”.*

**Sergio Giancesini, UIP President**





*The passing of Dr. Pauline Martimbeau is a tremendous loss for venous and lymphatic academic community, and the countless lives she touched—from her patients and their families to her students, and colleagues.*

*As we mourn her passing, we remain fiercely committed to preserving her legacy of a passionate and tireless practitioner and educator, and to advancing her work to promote best practice in venous and lymphatic medicine.*

**Fedor Lurie, Scientific Committee Chair**

*I had the immense pleasure of being succeeded in the UIP Education Committee by Pauline, an example of a mentor who undoubtedly leaves her mark and legacy on all of us*

**Oscar Bottini, Congress & Events Chair**

*A person who deserved everyone's respect for her amazing energy and conviction...A great professional and selfless educator*

**Zaza Lazarashvili,  
Northern Europe Vice-President**

*I find it difficult to speak in the past tense about Dr. Pauline Raymond-Martimbeau. I feel as if this never happened. She was a dear friend and colleague, funny, always constructive critic and with extraordinary experience and wisdom, but for me the most important thing was the moments of relaxed conversation over a cup of coffee.*

*Every time I think of her, I remember happy and funny situations, and I want this to be the way I remember her.*

*Nobody dies if they are remembered. Let's remember her forever. Love you Pauline*

**Rodrigo Rial, Southern Europe Vice-President**

# Remembering Pauline

*Being an educator myself, I deeply admire professionals who devote their energy and their whole life to transmitting knowledge and becoming a reference for their colleagues. I have shared little time with Professor Martimbeau but enough to know her personal integrity and scientific conviction”*

**Gabriela Sfarcich,  
UIP Communications Officer**

*Dearest Pauline,*

*It is with a heavy heart that we say farewell. Only now that you have departed can we truly look back on your legacy to Phlebology, not only in for Canada, but for all of us around the world. Even at the end, you were still working towards improving standards, producing educational material for levels of training. All we can do now is to commit to continuing your legacy and ensuring that your work is completed.*

*I personally shall miss your dignity and good humour, and am comforted by the high esteem and respect that your colleagues and friends have shared over the past few days.*

**David Connor, UIP Executive Director**

*Dear Family, Friends, and the Medical Community,  
I wish you all find comfort in knowing the immense impact of Pauline’s life and teachings across the world. Her brilliance, compassion, and dedication have transcended time and space, leaving a legacy that will continue to inspire generations. Pauline was more than a pioneer in her field—she was a beacon of light and a source of strength to everyone she encountered. Her influence on the medical community and beyond is immeasurable, and her spirit lives on in the countless lives she touched.*

*Her legacy is a testament to her extraordinary life, and her contributions will forever resonate within us. Let us honor her by carrying forward her vision and values in our work and in our hearts. To her family and friends, and to all of us who were privileged to know her, my deepest love and appreciation go out to you during this time of loss. May her memory bring comfort and inspire us always.*

**Lorena Grillo  
South and Central America Vice President**

# Remembering Pauline

*Pauline was truly a giant in the field of Phlebology. Her talents as an educator and leader in the study of venous disorders were unmatched. Pauline's contributions to the UIP were immense. Despite her health challenges in recent years, she masterfully led the development of a slide deck on basic phlebology as the Chair of the UIP Education Committee. Her energy and wisdom were essential to its success.*

*She will be deeply missed by the UIP and its member societies, all her colleagues around the world, her patients and her family.*

*I will miss her as a mentor, a colleague, a leader and a friend. She was an icon for the Canadian Society of Phlebology.*

*Repose en paix belle âme,*

**Douglas Hill, MD**

**Past President, Canadian Society of Phlebology  
Member, UIP Education Committee**

*On behalf of the members of the Educational Committee of the UIP, we extend our heartfelt condolences to the global community of Phlebology following the profound loss of our esteemed chair and a true icon in the field.*

*Her unique dedication, visionary leadership, and remarkable contributions have left an indelible mark on our profession. As a mentor, she inspired many with her passion for education and commitment to advancing the science of Phlebology.*

*In this time of mourning, we honor her memory and the legacy she leaves behind. We are united in our grief and in our appreciation for the impact she had on all of us.*

*With deepest sympathy,*

**Wassila Taha**

**On Behalf of the UIP Education Committee**

*Dear Pauline, your passion and dedication to the field of phlebology inspired many around the world. Your legacy will be remembered.*

*Farewell, my friend!*

**Willy Chi**



**LAMENTAMOS EL SENSIBLE FALLECIMIENTO DEL**  
**DRA. PAULINE MARTIMBEAU**

La Dra. Pauline Martimbeau, desde Canadá, fue una gran amiga de la flebología mexicana. Sus enseñanzas y ejemplo fortalecieron nuestra disciplina, dejando un legado imborrable.

**HASTA SIEMPRE  
DESCANSE EN PAZ**

**Nota de Duelo**

La junta directiva de la SVFL hace llegar las más sentidas palabras de condolencias a la comunidad flebologica mundial que hoy lamenta el deceso de la **Dra Prof. PAULINE MARTIMBEAU**

Ex pdta de la Sociedad Canadiense de Flebología  
 Miembro del Comite Educativo de la UIP

Descanse en Paz

La Junta Directiva

Caracas 6 de Noviembre 2024

La Sociedad Panamericana de Flebología y Linfología expresa su más sentido pésame por el fallecimiento de nuestra amiga y Dra.

**Pauline Martimbeau**

Su legado dejará huella imborrable en nuestra Sociedad y en nuestros corazones, así como en los que tuvieron el privilegio de conocerlo.

Hacemos partícipes de nuestras más sinceras condolencias a su familia.

QUE DESCANSE EN PAZ  
 06 DE NOVIEMBRE DEL 2024

**EAVLA**  
 Egypt Africa Venous Lymphatic Association

**Board & Members**

Extend sincere condolences

Sharing sympathy for the great loss of Prof **Pauline Martimbeau**

A great icon of our field

May her soul rest in eternal peace

**SEFMI**

*In Loving Memory of*

**Dr. Pauline Raymond-Martimbeau**

The Ecuadorian Society of Phlebology and Microcirculation (SEFMI) sends our condolences on the passing away of Dr. Pauline Raymond-Martimbeau, a respected leader in the phlebology field and past president of the Canadian Society of Phlebology. Her passion and dedication have left an unforgettable mark on medicine and all who had the privilege of knowing her. Our deepest condolences to her family.

Dr. Victor Villota  
President SEFMI

Dr. Ernesto Intriago  
Founder & vice-president SEFMI



**COBOFLIN**

*In Loving Memory of*

**Dr. Pauline Raymond Martimbeau**

The Bolivian Community in Phlebology and Lymphology deeply regrets the passing of Dr. Raymond Martimbeau, she was an extraordinary person who touched the lives of many. Her legacy as a leader in the field of phlebology and dedication will leave a mark in our lives and will live in our hearts. May the memories of her love, smile and kindness bring comfort to her family at this difficult time. May she rest in peace

**ARGENTINIAN COLLEGE OF  
Venous and Lymphatic Surgery**

*Prof. Pauline Raymond-Martimbeau*

The Argentinian College of Venous and Lymphatic Surgery expresses its deepest condolences to the family, friends and colleagues of Prof. Pauline Martimbeau who passed away today. Prof. Martimbeau leaves an indisputable legacy in the world of Phlebology and her memory as an excellent professional and great human being will always be with us.

REST IN PEACE

**IN MEMORIAM**

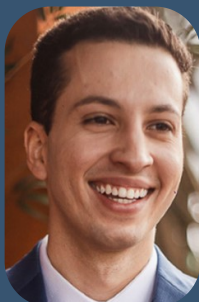
The Australasian College of Phlebology regretfully announces the passing of Dr Pauline Raymond-Martimbeau, Emeritus Fellow of the ACP, earlier this month.

Dr Raymond-Martimbeau was a Past-President of the Canadian Society of Phlebology, responsible to the education and training of countless Phlebologists around the world. She was the Chair of the Education Committee and Member of Honour of the International Union of Phlebology, having organised the World Congress of Phlebology in Montreal in 1992. She authored over 100 scientific articles and multiple textbooks in phlebology.

The ACP joins with the international community in mourning the loss of Pauline and in honouring the legacy to phlebology education that she has contributed.

*Pauline Raymond-Martimbeau*  
 1945-2024

## Trustworthy evidence-based versus untrustworthy guidelines: Detecting the difference



João Pedro Lima, MD

Department of Health Research  
Methods, Evidence, and Impact  
at McMaster University

The paper "*Trustworthy evidence-based versus untrustworthy guidelines: detecting the difference*," published in *BMJ Family Medicine and Community Health*, discusses the development of clinical practice guidelines and the importance of distinguishing trustworthy guidelines from those that lack rigor. Trustworthy guidelines provide clear recommendations, reflect patient values and preferences, and incorporate evidence-based findings to assist clinicians and patients in making informed healthcare decisions.

Historically, very few guidelines have adhered to optimal development standards. Untrustworthy guidelines often lack clarity, omit key perspectives, fail to manage conflicts of interest, and do not use patient-important outcomes. We sometimes refer to this traditional approach as GOBSAT—'good old boys sitting around a table.' Those recommendations often rely on a subset of the available evidence and ignore patient preferences. The paper highlights that guideline trustworthiness is a continuum; each dimension can be fully or partly met, and higher adherence to these standards increases credibility and utility in clinical decision-making.

To help clinicians determine whether to follow a recommendation, the authors outline eight key domains that differentiate trustworthy from untrustworthy guidelines: clarity, panel composition, conflict of interest management, outcome selection, summary of the

evidence, values and preferences consideration, strength of recommendations, and presentation/rationale for recommendations. Trustworthy guidelines are clear, actionable, and developed by multidisciplinary panels, including diverse stakeholders such as clinical experts, patient partners, and methodologists. They transparently manage conflicts of interest and select outcomes important to patients.

To ensure a comprehensive summary of the literature, trustworthy guidelines rely on systematic reviews that assess the quality of the evidence using frameworks like GRADE (Grading of Recommendations Assessment, Development, and Evaluation) approach. They explicitly consider patients' values and preferences, along with the trade-offs between benefits, harms, and burdens, to determine the strength of the recommendations. Finally, they should not only present recommendations but also the rationale used to issue them in a transparent, user-friendly manner. This can be accomplished by adopting tools such as the GRADE Summary of Findings (SoF) tables and Evidence to Decision (EtD) frameworks.

In summary, the article serves as a valuable resource for clinicians by providing a comprehensive framework for assessing the trustworthiness of clinical practice guidelines. This, in turn, empowers healthcare professionals with the tools necessary to make informed, evidence-based decisions in their daily practice. Following those suggested steps, clinicians can ensure they apply the best available evidence and involve patients in the decision-making process.

João Pedro Lima, MD

Department of Health Research Methods, Evidence, and  
Impact at McMaster University

Email: [limaj1@mcmaster.ca](mailto:limaj1@mcmaster.ca)

# UIP 2025: BUENOS AIRES, ARGENTINA



Buenos Aires 2025

## YOUR WISHES FOR UIP 2025



Planning has begun for the **UIP World Congress in Buenos Aires in 2025.**

Start thinking now about what **YOU** would like to see at the Congress, as we will be releasing our **"Wishing Box"** for your suggestions.

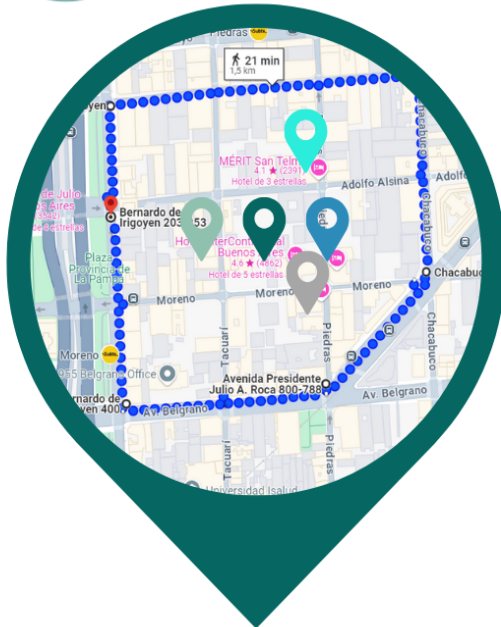
## LOCATION VENUE



The **XXI UIP World Congress** will take place in a specific area of the historic San Telmo neighborhood in the city of Buenos Aires.



### Phlebology World Hub:



The **UIP Phlebology World Hub** will encompass nine blocks between Bernardo de Irigoyen St., Chababuco St., Hipolito Yrigoyen St., Belgrano Av. and Julio Roca President Av., which we have specially prepared for this event.

[View Map](#)



#### MAIN ACOMMODATIONS OPTIONS:



Intercontinental Buenos Aires Hotel



Design Suites Buenos Aires Hotel



Merit San Telmo Hotel



Two Buenos Aires Hotel



City Hotel Buenos Aires

The main scientific, commercial, and social activities will be centered at the **Intercontinental - Design Hotel**. This hotel hub, located in the iconic San Telmo neighborhood, integrating the **Two, Merit** and **City** hotels as the primary center of activity, comfortably placed, at a walking distance, making possible to attend the event for all economic ranges.

## ACCOMMODATION OTHER OPTIONS



### OTHER ACCOMMODATIONS OPTIONS:

-  NH City  
Buenos Aires
-  NH 9 de Julio
-  NH Latino
-  HR Luxor Hotel
-  Howard Johnson  
Plaza
-  Grand Brizo Buenos  
Aires

There are other excellent accommodation options around the **UIP Phlebology World Hub**. These are located close to the Intercontinental-Design Hotel, making it possible to walk to the venue



### Accommodations & travel :

#### Mail:

Info@uipbuenosaires.com  
cs.event@uipbuenosaires.com

#### Web Site:

<https://uipbuenosaires.com/>

#### Phone Number:

+ 54 11 7390-1004 / 11 7390-1005

Junin 875, 10 Floor Ap. 9 , Ciudad de Buenos Aires, Argentina

# INTERNATIONAL ANGIOLOGY: ACCESS

International Angiology, the *Official Journal of the International Union of Phlebology*, provides discount online journal access to members of UIP Member Societies.

- Tier 1\* societies - €45.00 per member, including taxes for online access
- Tier 2 and 3 societies\* - Free access
- Residents (Tier 1, 2 and 3) - Free access

Requests for access come directly from the Member Society for its members. If the member society does not wish to provide access, requests can come from individuals, providing they can provide proof of their membership status.

## Accessing the Journal - UIP Member Societies

1. Download: The membership template spreadsheet from the UIP website:

<https://www.uip-phlebology.org/uip-official-journal>

**DOWNLOAD**

2. Email your completed spreadsheet to International Angiology  
[journals.dept@minervamedica.it](mailto:journals.dept@minervamedica.it)

Ensure you include the detail of the Member society requesting access.

**EMAIL**

3. Payment: The society receives an invoice for Journal Access from International Angiology

**PAYMENT**

4. Once paid, each individual member receives journal access instructions from *International Angiology*

**ACCESS!**

\* UIP Tiers are defined by the UIP Constitution (Schedule 4), <https://www.uip-phlebology.org/constitution>

# INTERNATIONAL ANGIOLOGY ABSTRACTS

## Interventions for the treatment of recurrent varicose vein disease arising from the saphenofemoral junction or the great saphenous vein: A systematic review and meta-analysis

**Alkis BONTINIS<sup>1</sup>, Vangelis BONTINIS<sup>1</sup>, Georgios KOUDOUNAS<sup>2</sup>, Argirios GIANNOPOULOS<sup>1</sup>,  
Christos KARKOS<sup>2</sup>, Dimitrios VIRVILIS<sup>3</sup>, Angeliki CHORTI<sup>1</sup>, Kiriakos KTENIDIS<sup>1</sup>**

<sup>1</sup>Department of Vascular Surgery, Aristotle University of Thessaloniki, AHEPA Hospital, Thessaloniki, Greece;

<sup>2</sup>Vascular Unit, Fifth Department of Surgery, Aristotle University of Thessaloniki, Hippokratio Hospital, Thessaloniki, Greece; <sup>3</sup>Department of Vascular and Endovascular Surgery, St Francis Hospital and Heart Center, Roslyn, NY, USA

\*Corresponding author: Georgios Koudounas, georgekoudnas@gmail.com

<https://doi.org/10.23736/S0392-9590.24.05323-9>

### ABSTRACT

**Introduction:** We investigated the safety and feasibility of the available interventions in the treatment of recurrent varicose vein disease.

**Evidence acquisition:** A systematic search on Medline, Scopus, and Web of Science for articles published by August 2024 was performed. Primary endpoints included duplex ultrasonography (DUS)-identified recurrence and clinical recurrence

**Evidence synthesis:** Twenty-eight studies, eleven describing endovenous thermal ablation (EVTA), four ultrasound-guided foam sclerotherapy (UGFS), and thirteen surgery (high ligation with or without stripping) encompassing 2228 limbs, were included. The overall DUS-detected recurrence estimate was 11.84% (95% CI: 7.15-17.40). EVTA displayed the lowest recurrence of 4.27% (95% CI: 0.37-10.75), followed by UGFS 11.19% (95% CI: 6.80-16.42) and surgery 23.27% (95% CI: 15.35-32.19). Statistically significant differences were observed between surgery and both EVTA ( $P < 0.01$ ) and UGFS ( $P = 0.01$ ). The overall clinical recurrence estimate was 24.91% (95% CI: 10.40-42.96) with EVTA portraying the lowest clinical recurrence of 2.37% (95% CI: 0.00-16.81), followed by surgery 31.08% (95% CI: 14.43-50.63). Subgroup analysis identified statistically significant differences between EVTA and surgery ( $P = 0.01$ ). Whereas non-statistically significant differences were identified between the included interventions regarding paresthesia and deep vein thrombosis (DVT), surgery exhibited higher wound infection estimates compared to EVTA of 0.00% (95% CI: 0.00-0.80) versus 4.34% (95% CI: 2.21-7.02,  $P < 0.01$ ). The pooled hematoma and lymphatic complication estimates for surgery were 5.04% (95% CI: 0.50-12.87) and 5.71% (95% CI: 2.91-9.22) respectively.

**Conclusions:** This review demonstrated the superior efficacy of EVTA over surgery in treating recurrent varicose vein disease corroborating its use as the preferred treatment, when feasible. Additionally, UGFS displayed comparable outcomes to EVTA. The notable recurrence estimates associated with surgery call into question its suitability within this context.

(Cite this article as: Bontinis A, Bontinis V, Koudounas G, Giannopoulos A, Karkos C, Virvilis D, et al. Interventions for the treatment of recurrent varicose vein disease arising from the saphenofemoral junction or the great saphenous vein: a systematic review and meta-analysis. *Int Angiol* 2024 Nov 19. DOI: 10.23736/S0392-9590.24.05323-9 )

**Key words:** Varicose veins; Laser therapy; Ablation techniques; Sclerotherapy; Pathologic neovascularization .

## Current evidence on the effectiveness and safety of oral anticoagulants in superficial venous thrombosis: a systematic review and meta-analysis

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<sup>1</sup>Department of Cardiovascular Medicine, Universitas Pelita Harapan, Banten, Indonesia; <sup>2</sup>Jakarta Varices Clinic, Jakarta, Indonesia; <sup>3</sup>Department of Vascular Surgery, Sint-Andriesziekenhuis Tiel, Belgium

\*Corresponding author: Vito A Damay E-mail: vito.damay@uph.edu

<https://doi.org/10.23736/S0392-9590.24.05309-4>

### ABSTRACT

**Introduction:** Previous studies suggest fondaparinux as an effective regimen for superficial venous thrombosis (SVT), but the inconvenience of prolonged parenteral injections has prompted investigations into oral anticoagulants (OACs). This study aims to evaluate the current evidence on the effectiveness and safety of OACs in the treatment of SVT.

**Evidence acquisition:** Following the PRISMA 2020 guidelines, we conducted a systematic review and meta-analysis registered in PROSPERO (CRD42024535625). A comprehensive literature search was performed across multiple databases up to April 2024. Studies were included if they involved adult patients diagnosed with SVT, treated with OACs, and reported relevant efficacy and safety outcomes. Both randomized controlled trials (RCTs) and observational studies were considered. Data extraction and risk of bias assessments were independently performed by two authors.

**Evidence synthesis:** The search identified 1531 studies, with six studies (three RCTs and three prospective cohort studies) meeting inclusion criteria. Meta-analysis for Rivaroxaban-treated group showed DVT occurrence was 1.30% (95% CI 0.17-3.07%), SVT extension was 0.32% (95% CI: 0.00-1.58%), SVT recurrence was 0.75% (95% CI: 0.00-3.30%), clinically relevant non-major bleeding was 1.95% (95% CI: 0.46-4.11%), minor bleeding was 5.68% (95% CI: 3.02-9.01%). These estimates were for patients treated with rivaroxaban 10-20 mg once daily over 42 days to 37 months. No major bleeding was reported with rivaroxaban 10 mg once daily.

**Conclusions:** This systematic review and meta-analysis demonstrate that OACs, especially rivaroxaban, are effective and safe for the treatment of SVT. They offer a convenient alternative to parenteral anticoagulants, potentially improving patient compliance and outcomes. However, further large-scale studies are warranted to confirm these findings.

(Cite this article as: Damay VA, Ivan I, Vuylsteke M. Current evidence on the effectiveness and safety of oral anticoagulants in superficial venous thrombosis: a systematic review and meta-analysis. Int Angiol 2024 Nov 04. DOI: 10.23736/S0392-9590.24.05309-4 )

**Key words:** Anticoagulants; Factor Xa inhibitors; Meta-analysis; Rivaroxaban; Venous thrombosis



## Effects of light compression on chronic venous disease, edema and comfort in women during pregnancy and postpartum period: A prospective randomized study

**Aleksandra FRYDRYCH-SZYMONIK<sup>1</sup>, Katarzyna OCHAŁEK<sup>1</sup>,  
Agnieszka JANKOWICZ-SZYMAŃSKA<sup>2</sup>, Zbigniew SZYGUŁA<sup>3</sup>**

<sup>1</sup>Department of Clinical Rehabilitation, Faculty of Motor Rehabilitation, University of Physical Education, Kraków, Poland; <sup>2</sup>Department of Physiotherapy, Faculty of Health Sciences, University of Applied Sciences in Tarnów, Tarnów, Poland; <sup>3</sup>Department of Sports Medicine and Human Nutrition, Institute of Biomedical Sciences, Faculty of Physical Education and Sport, University of Physical Education, Kraków, Poland

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<https://doi.org/10.23736/S0392-9590.24.05208-8>

### ABSTRACT

**Background:** Lower limb edema associated with venous disorders is an increasingly common problem in pregnant women. The study aimed to assess the use of compression class 1 (ccl1=18-21 mmHg) in lower limb edema and CVD prevention in pregnant and postpartum women.

**Methods:** 51 pregnant women (second trimester) were randomly recruited into either a study group CG with compression ccl1 or a control group NCG, both with physical activity (PA) recommendation. The assessment concerned venous system condition, limb size, and compression comfort. Edema was diagnosed as  $\geq 10\%$  measurement increase.

**Results:** Venous reflux (8/22 CG, 1/16 NCG) and an onset of CVD (6/22 CG, 1/16 NCG) were diagnosed in the first measurement. After postpartum, a significant reduction of the great saphenous vein (GSV) diameter in the proximal part of the left lower limb in CG ( $P=0.014$ ) and expansion of the small saphenous vein (SSV) in the proximal part of the left lower limb in NCG ( $P=0.028$ ) were observed. An analysis of the limb sizes in the second measurement revealed a significant increase of all circumferences and volumes in the NCG, and of lower leg volumes in the CG. Edema was diagnosed in five women in the NCG in the second measurement. Consequently, compression was recommended for the new group (NCG+C), and a significant edema reduction ( $P=0.026$ ) occurred in the third measurement.

**Conclusions:** Compression ccl1 reduces the risk of edema, venous insufficiency, and improves women's quality of life during pregnancy and postpartum. (Cite this article as: Bozkurt AK, Balkanay OO, Dinc R. Comparative analysis of VenaBlock and VenaSeal Systems for catheter-guided endovenous cyanoacrylate closure in treating chronic venous insufficiency of the lower extremity: effectiveness and feasibility. *Int Angiol* 2024;43:331-41. DOI: 10.23736/S0392-9590.24.05143-5)

**Key words:** Pregnancy; Edema; Prevention and control; Compression bandages

## Management of arterial hypertension in patients with peripheral arterial disease

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### ABSTRACT

Hypertension is a major risk factor for peripheral arterial atherosclerotic disease (PAD). Hypertension deteriorates arterial wall function and the morphology of all layers of arteries. Endothelial cell injury enhances permeability and promotes migration of cholesterol and monocytes into the vessel wall. Increased blood pressure (BP) through hyperplasia of smooth muscle cells initiates remodeling of the arterial wall that increases peripheral resistance. Further, hypertension, particularly in patients with dyslipidemia, provokes atherosclerosis in different vascular territories, including the lower legs. Guidelines recommend treatment of hypertension in patients with PAD to reach the target BP of <130/80 mmHg. However, systolic BP (SBP) <120 mmHg may worsen oxygen delivery to the diseased leg and is related to a higher rate of cardiovascular (CV) events. Therefore, there is a J-shape relationship between SBP and the rate of primary outcomes. Any class of antihypertensive drugs, including beta-blockers, can be used for the treatment of hypertension in patients with PAD. Angiotensin converting enzyme (ACE) inhibitors may have some additional benefit over other antihypertensive drugs including improvement of perfusion of the diseased leg and are recommended even in patients with critical limb ischemia. In conclusion: hypertensive patients with PAD are at increased risk for CV events and treatment of raised BP is indicated, but SBP <120 mmHg and DBP <70 mmHg may contribute to adverse limb outcomes and other CV events. Consequently, PAD patients may require a different BP target than those without PAD.

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**Key words:** Atherosclerosis; Hypertension; Antihypertensive agents

# INTERNATIONAL ANGIOLOGY ABSTRACTS

## Automated 3D ultrasound bridges the gap between novices and experts in diameter assessment of abdominal aortic aneurysms

Natasha M. SVENDSEN \*, Jonas P. EIBERG, Laurence ROUET, Qasam M. GHULAM, Lene T. SKOVGAARD, Magdalena BRODA, Alexander ZIELINSKI, Karin YEUNG, Ulver S. LORENZEN

[DOI: 10.23736/S0392-9590.24.05278-7](https://doi.org/10.23736/S0392-9590.24.05278-7)



## Aorto caval fistulas

Lazar B. DAVIDOVIC, Igor B. KONCAR, Aleksa L. JOVANOVIC \*, Marko V. DRAGAS, Nikola S. ILIC, Milos M. SLADOJEVIC, Andreja D. DIMIC, Filip B. PETROVIC

[DOI: 10.23736/S0392-9590.24.05221-0](https://doi.org/10.23736/S0392-9590.24.05221-0)



## Safety of adjuvant open axillary access during complex thoracoabdominal aortic endovascular procedures

Fabricio BARAHONA \*, Gaspar MESTRES, Xavier YUGUEROS, Donovan RUIZ, Victoria GAMÉ, Daniel GIL-SALA, Carla BLANCO, Vicente RIAMBAU

[DOI: 10.23736/S0392-9590.24.05258-1](https://doi.org/10.23736/S0392-9590.24.05258-1)



## STABILISE for acute type B aortic dissection

Tatiana COTÃO, Joel SOUSA \*, Armando MANSILHA

[DOI: 10.23736/S0392-9590.24.05279-9](https://doi.org/10.23736/S0392-9590.24.05279-9)



## Superficial temporal artery access for transfemoral or transbrachial carotid artery stenting in selected patients considered unfit for carotid surgery

Piotr MYRCHA, Izabela TARANTA, Włodzimierz HENDIGER, João ROCHA-NEVES, Kosmas I. PARASKEVAS \*, Peter GLOVICZKI

[DOI: 10.23736/S0392-9590.24.05231-3](https://doi.org/10.23736/S0392-9590.24.05231-3)



## Successful treatment of chronic venous in-stent restenosis using a Phoenix atherectomy device

Fabian LINDEN \*, Thomas MIHU, Norbert FREY, Christian ERBEL

[DOI: 10.23736/S0392-9590.24.05279-5](https://doi.org/10.23736/S0392-9590.24.05279-5)



## Prognostic value of body composition parameters by computed tomography in patients with lower extremity arterial disease: a single-center retrospective-prospective analysis

Natalia MYSIAK, Agata STANIEWSKA, Beata SZUKAY, Krzysztof TOJEK, Jacek BUDZYŃSKI \*

[DOI: 10.23736/S0392-9590.24.05227-1](https://doi.org/10.23736/S0392-9590.24.05227-1)



## Dyslipidemia and lower extremity arterial disease

Kosmas I. PARASKEVAS \*, Pavel POREDOS, Agata STANEK, Ales BLINC, Arkadiusz JAWIEN, Pier Luigi ANTIGNANI, Armando MANSILHA, Dimitri P. MIKHAILIDIS

[DOI: 10.23736/S0392-9590.24.05266-0](https://doi.org/10.23736/S0392-9590.24.05266-0)



# UIP MONTH 24



an **OPEN TO EVERYONE** zoom @  
**10 am** NYC time - **4 pm** Rome time - **10 pm** Bangkok time  
to hear **YOUR vision, YOUR ideas, YOUR needs**  
and to remember that

UIP starts with «U»



for YOUR topic reservation please write to [president@uipmail.org](mailto:president@uipmail.org)

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>

Meeting ID: 889 1360 5824

Passcode: 916415

YOU



YOU

On behalf of all the International Union of Phlebology (UIP), I'd like to bring to all the healthcare professionals and the public attention the **UIP March 24 initiative**.

UIP was founded on March 24, 1959 and in the following 64 years it has been surely succeeding in bringing the vein & lymphatic world together, counting now on 81 Scientific Societies from all continents.

In order to honor **UIP March 24, 1959** birthday, every 24 of the month at 4 pm Rome time, myself and eventually available Executive Committee members will have an open to everyone zoom call where all the vein-lymphatic world and the public are invited to join to present their vision, ideas and eventual needs.

This glimpse of the current Phlebo-Lymphology around the world will provide the opportunity to analyze how the UIP can serve at best its member societies, while advocating for both colleagues and patients independently by their belonging or not to the UIP.

It's the UIP hope that you will like to take part in this initiative, so to develop together "present actions" while looking together at the brightest future.

Pre-submitted topics for discussion will have precedence in the hour dedicated to this initiative: in case, feel free to send yours at [president@uipmail.org](mailto:president@uipmail.org).

# UIP MONTH 24

The zoom call will be recorded so to allow everyone to enjoy the content on demand in case.

Looking forward for demonstrating together that **UIP starts with "U"**, UIP looks forward for **listening to "U"** at this zoom link:

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>

**Meeting ID: 889 1360 5824    Passcode: 916415**

Whatever need, do not hesitate to reach out to me ([gnsstrg@unife.it](mailto:gnsstrg@unife.it) ; t. +393498012304)



*UIP Executive Committee 2022-2025*



Sergio Ganesini, MD PhD  
FACS

m. gnsstrg@unife.it  
t. +393498012304

UIP 2023-2027 president

# EVENTS UNDER THE AUSPICES OF THE UIP

## Report from the XXXVIII SIF National Congress

### The XXXVIII SIF National Congress was held in Verona on 10-11-12 October.

It was an important event, with an excellent turn out, at which esteemed national and international speakers presented and discussed the most pertinent topics in phlebology including: hemodynamics; treatment of saphenous insufficiency; deep venous disease; lymphology; aesthetics; pharmacological treatment options; medicolegal issues; communication and artificial intelligence; and pharmacological therapy of thromboembolic disease.

In line with the SIF's focus on young professionals and on teaching, two specialised courses took place during the congress, one on eco color doppler diagnostics and another on compression therapy and bandages.

Today, more than ever, there is a need for meaning. In addition, several young professionals were amongst those invited to speak, and as per tradition, the Pierina Benzoni Award was awarded for the best presentation by a young professional. That goes beyond simply having knowledge. A global scientific society must help to satisfy this need by bringing our brightest minds and best resources together in common projects, overcoming prejudices and social barriers in doing so.

Phlebology, like all fields in medicine, faces new challenges. It must reconcile seemingly irreconcilable concepts, such as promoting innovation whilst adhering to established guidelines. The availability of new technology and the need to limit expenditure pose further challenges. The rapid speed of change and the slowness of biological processes, global communication and respect for privacy, as well as the maintenance of one's identity and the push towards globalization all present further contradictions. Only by synergizing our best efforts will we find an effective equilibrium in healthcare provision.

During the congress, elections were held for the renewal of the corporate offices, and in view of healthy rotation, the baton will soon be passed on to the newly appointed board of directors to whom we wish a collaborative and constructive two-year term.

From left to right: Bruno Amato (Incoming president),  
Paolo Tamellini (2024 Meeting President),  
Roberto Dimitri (President)



# EVENTS UNDER THE AUSPICES OF THE UIP

## Report from the v-WINdonesia World Congress



**v-WINdonesia World Congress gathered 1034 colleagues from 79 nations in the institutional venue that hosted the G20: the Bali International Congress Center.**

A v-HELP (v-WIN Humanitarian Education in Lymphology & Phlebology) mission was developed in the pre-congress days, engaging 150 international doctors by means of frontal lectures, hands-on and real live operating room activities.

During the congress governmental figures were involved not only from the Indonesia side, rather also from Italy, Paraguay and Georgia, in order to stimulate the clinical governance engagement in the different nations.

With this same vision, the next V-Italy Summit will be hosted in the Italian Ministry of Health on Sept 3-6, looking forward for globalizing the evidence, while nationalizing the recommendations. This is part of a scientific path started in 2019 with the publication of a document on similarities and controversies in global guidelines and followed in 2022 by the publication of a document on evidence-based data in vein-lymphatic care. The prosecution of the project, so called V.A.L.I.D. project (acronym of Venous And Lymphatic International Document) has been presented at v-WINdonesia World Congress and it will be delivered at the following event in Rome.



# EVENTS UNDER THE AUSPICES OF THE UIP

## Report from the Congress of the French Society of Phlebology

**The congress of the French Society of Phlebology took place from 14 to 15 November 2024 at the Cité Internationale Universitaire in Paris. Over 400 participants attended, and many countries were represented.**

The congress was dedicated to Pauline Raymond-Martimbeau, and a vibrant tribute was paid to her by the entire international community.

The main theme of the congress was controversies and guidelines in phlebology, with the aim of reaching a general consensus on the various treatments available.

A joint session with the V-Win foundation, represented by Sergio Giancesini, enabled us to tackle the theme of artificial intelligence in phlebology and to share the major interest of the new v-registry global project. During this session, we were fortunate enough to hear the views of Anne Servoir, a lawyer, as we will have to be very wary of any data leaks inherent in medical secrecy, intellectual property and the protection of our patients' privacy.



The world of phlebology is moving forward, let's stay connected, let's move forward hand in hand, but let's always protect our patients.

At the same time, we organised a session with Club Mousse, a session dedicated to sclerotherapy, a session dedicated to deep vein pathologies and their various interventional treatments, and an SFMV session shared with our hospital and university colleagues. Finally, a 'Michel Perrin' session gave us the opportunity to focus on the latest research currently being published.

The SFP Congress ended with the SFP buzz, where Edoardo Cervi and Olivier Pichot came to present the possible devices of tomorrow. The future of phlebology is on the way

We will of course be with you at the next UIP congress in Argentina in 2025. We need to move forward together, hand in hand, because together we are always stronger.

Happy New Year to everyone!

Best wishes

Nicolas Néaume and Matthieu Josnin



# EVENTS

One of the main UIP visions is to **promote productive relationships among societies**. With this vision, we report both **events with UIP auspices and events without**, so to inform everyone about possible educational activities. The hope is also to offer a tool useful for the colleagues organizing future meetings, so to avoid overlapping among events.

For more information about events visit: <http://www.uip-phlebology.org/events>

If you would like your event to appear in the UIP Newsletter, contact us at [communications@uipmail.org](mailto:communications@uipmail.org)

## EVENTS CALENDAR

### NOVEMBER 2024

**82nd Annual Meeting of the French Society of Phlebology**  
14-15 NOVEMBER 2024  
*PARIS, FRANCE*

### NOVEMBER 2024

**AFLIPBA IV Provincial Conference**  
15-17 NOVEMBER 2024  
*CARILÓ, ARGENTINA*

### APRIL 2025

**World of Phlebology in Prague**  
22-25 APRIL 2025  
*PRAGUE, CZECH REPUBLIC*

### MAY 2025

**ACP2025 Annual Scientific Meeting of the Australasian College of Phlebology**  
9-12 MAY 2025  
*GOLD COAST, AUSTRALIA*

### JUNE 2025

**15th Balkan Venous Forum**  
12-15 JUNE 2025  
*GOLDEN SANDS, BULGARIA*

### JUNE 2025

**Veins and Lymphatics in Focus**  
20-21 JUNE 2025  
*THE NETHERLANDS*

### OCTOBER 2025

**XXI UIP WORLD CONGRESS**  
8-11 OCTOBER 2025  
*BUENOS AIRES, ARGENTINA*



# UIP SOCIETY MEMBERSHIP: BENEFITS

**Did you know that as a member of UIP Society you can have access to different benefits?**

- ✓ Access to **International Angiology** -  
(Free access for medical residents and for Tier 2 and 3 society members)\*
- ✓ Access to **UIP Education Modules** (Free access for Tier 2 and 3)\*
- ✓ Access to **latest news, UIP Newsletter**
- ✓ Access to **UIP Discussion Forums**

*\*Tier: refers to the category of membership. If unsure about the classification of your country, please check on our website.*

## Accessing the Member Portal

1. Contact your society and ask them to add your name to the members of the UIP website.
2. The society uploads a membership list through their society page (Instructional Videos available online).
3. You will receive an email confirming your username and password.

### *International Angiology*

The Journal of Vascular  
Biology, Medicine, Surgery &  
Phlebology



Let your society know if you  
require International Angiology  
access\*.

*\*fees apply for Tier 1 countries*

### *UIP Education Modules*

Accessing the UIP Education  
Modules



1. Go to the **Online Education page**.
2. Click "**Enrol Now**".
3. Complete the forms with the information requested.

### *UIP Discussion Forums*

Accessing the UIP Discussion  
Forums



1. Log in the UIP website with your username and password.
2. Access the Discussion Forum through the member portal.

# UIP ANNOUNCEMENTS

## INVITATION FOR NEWSLETTER CONTENT UIP SPEAKER BOX

The UIP is delighted to offer all its members to report a comment in future editions of the UIP newsletter. Topics can be related to evidence based science, phlebotomy advancement, problem solving in clinical practice. If you are interested in submitting a comment, send a 300 word summary to:

[communications@uipmail.org](mailto:communications@uipmail.org)

## SPONSORSHIP OPPORTUNITIES

The UIP welcomes sponsorship for its newsletter from Industry. If you are interested in placing and advertisement or sponsoring the UIP newsletter, please contact us at:

[execdirector@uipmail.org](mailto:execdirector@uipmail.org)

### ABOUT US



The UIP Newsletter has been produced and distributed from Australia and Argentina, with the contribution of the members of the UIP.

The UIP Newsletter Editor is Gabriela Sfarcich from Argentina.

Advertising opportunities are available, and contributions and enquiries are welcome!

### SOCIAL MEDIA



#### ***Keep in touch!***

Follow our social media accounts and make sure you will be notified of updates, deadlines and important news!