

Microphlebectomy It's Not Vein Stripping

I performed microphlebectomy on Kathy the other day. She was pleasantly surprised that her incisions were so small, as she had a standard phlebectomy procedure 20 years ago, and she had significant scarring.

As I have discussed in previous articles (MotherLodeVeinInstitute.com), venous reflux and varicose veins are treated now with either endovenous thermal ablation, microphlebectomy or sclerotherapy. When blood flows in the reverse direction down our veins (venous reflux) because of broken vein valves, increased pressure is delivered to the veins under the skin. The veins that are the source of venous reflux are typically treated with endovenous thermal ablation and the bulging varicose veins under the skin are typically treated with microphlebectomy. In the past, patients in this situation were treated with vein stripping and standard phlebectomy. Now, they are treated with endovenous thermal ablation and microphlebectomy.

Approximately 2400 years ago Hippocrates performed the first standard phlebectomy procedure to treat a varicose vein. The incisions created during these procedures were one to two inches long and because of this, there was much more scarring.

This procedure remained unchanged for 2400 years until Dr. Mueller, a Phlebologist, from Neuchatel Switzerland developed a new technique in 1956. He was able to remove bulging varicose veins through tiny 2mm incisions with a special blunt hook that he designed. Dr.

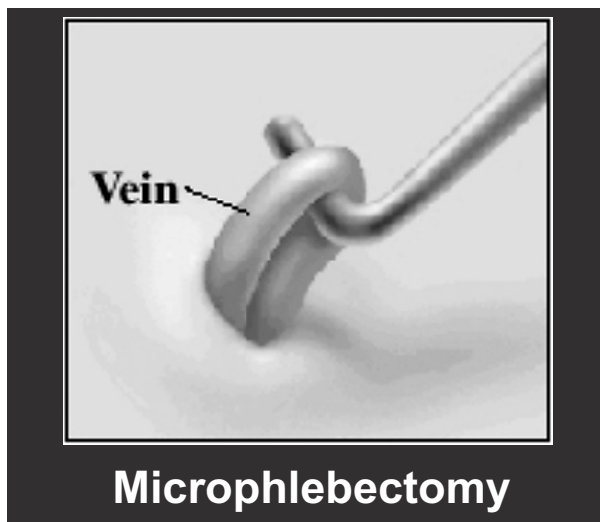
Mueller's technique was initially poorly received by physicians, but eventually his technique became accepted throughout the world as the new "gold standard" technique for the removal of varicose veins because of its minimally-invasive nature. This procedure has many names, including microphlebectomy, ambulatory phlebectomy, stab phlebectomy and microextraction.

The advantages of Dr. Mueller's technique is that it can be easily performed in the office setting, under the same tumescent anesthesia that is used to perform endovenous thermal ablation; hospital care is not needed. Intravenous sedation and general anesthesia is also not required. The small incisions are closed with adhesive steri-strips, and sutures are usually not needed.

It is important to remember that removal of bulging varicose veins using micro-phlebectomy treats only part of the problem. The underlying veins that are the source of the venous reflux are typically treated with endovenous thermal ablation, which

has replaced vein stripping (discussed last time-see MotherLodeVeinInstitute.com).

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For a personal consultation with Dr. Hopkins call 532-5528 to make an appointment. Dr. Hopkins is a General Surgeon, Certified by the American Board of Surgery, and a Phlebologist, Certified by the American Board of Phlebology.

The Mother Lode Vein Institute has offices in Jackson (256-9499) and Sonora (532-5528)

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