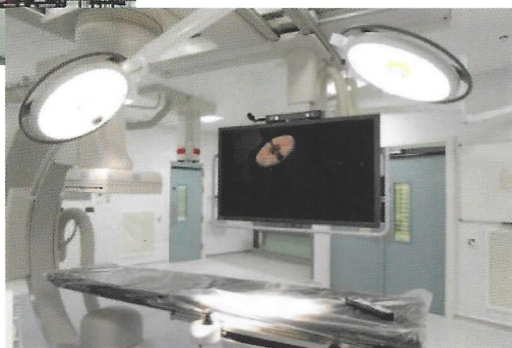


South West Vascular Surgeons

**39th Annual Meeting
Gloucestershire Hospitals NHSFT
Cheltenham Vascular Network
Friday 10th March 2017**



**Incorporating the Second SWVS
Masterclass
Thursday 9th March 2017**

Never believe the representative; Endovenous Treatment with 810Nm and 1470Nm Lasers

Mr. T Ranaboldo, Ms. L Lockwood, Mrs. L Harris, Mr. C Ranaboldo

Department of Vascular Surgery, Salisbury NHS Foundation Trust

Introduction

Since 2005 we had used an 810Nm laser (Angiodynamics, Latham, NY) for the endovenous ablation of superficial venous reflux. In 2014 our machines were deemed end of life and they were replaced by the same supplier with 1470Nm devices. On the recommendation of the company the treatment protocol was changed from 70J/cm to 50 J/cm., with a reduction in patient discomfort claimed. We questioned the supplier for evidence of similar efficacy for 1470 wavelength compared to our old 810Nm machines; receiving lots of reassurance but little evidence. This report compares patient experience and the long-term treated vein occlusion rates between devices.

Methods

All patients were treated using local anaesthetic, for superficial venous reflux, using a standard protocol by one of 5 practitioners. A patient experience questionnaire was used to measure post procedural discomfort. With the 810Nm Laser the treatment objective was to deliver at least 70J/cm. The manufactures recommended settings delivering 50J/cm were used by all practitioners following the replacement of the old lasers.

Later 3 users increased energy back to 70J/cm. Patients were followed up 1 year after treatment with Duplex ultrasound.

Results

Post procedural discomfort was reduced with the 1470 Nm Laser compared to 810 Nm.

The occlusion rates at 1 year post treatment are shown below

	N	Occluded at 1 year	%
810Nm	477	448	93.9
1470Nm	45	33	73.3

This observation is very unlikely to have arisen by chance (Fishers Exact Test $p < 0.0001$, used throughout)

Comparison of patients treated with the 1470Nm laser with energy partitioned at 60J/cm found that 3 of 22 (13%) of had a non-occluded vein one year after treatment compared to 9 of 23 (39%) ($p = 0.05$)

- At the higher energy delivery, the 1470Nm laser produced similar outcomes compared to 810Nm.
- At lower energies, the difference in outcome remains ($p < 0.001$)

Conclusion

The 1470 Nm laser causes less post procedural discomfort. Low energy settings produce a high frequency of non-occluded treated veins at one year follow-up.

MAIN PROGRAMME – Friday 10th March 2017

09.30 Registration, Coffee & Visit Trade Stands

09.55 Welcome: Mr Jonothan Earnshaw

10.00 Asymptomatic patients with carotid disease **R Bulbulia**

10.10 Alternatives to supervised exercise for claudication **N Chinai**

**Session 1 - Trainee Presentations: Chairmen:
Mr Keith Poskitt & Miss Francesca Fratesi**

10.20 Bigger is not always better – single centre experience with large aortic grafts (36mm)

M. Au, M.T. Juszczak, E. Sideso
Department of Vascular Surgery, John Radcliffe Hospital, Oxford

10.30 Outcome after referral for treatment in men aged 75 or over with a screen-detected abdominal aortic aneurysm.

Glenda Turton, Jonothan Earnshaw on behalf of the Gloucestershire and Swindon AAA Screening Service.
Department of Vascular Surgery, Gloucestershire Hospitals NHS Foundation Trust

10.40 Aortic neck diameter. An overlooked feature that predicts poor long-term outcome after EVAR.

Dominic P.J. Howard^{1,2} D Phil, Conor D. Marron¹ MD, Ediri Sideso³ MD, Phillip Puckridge¹ MD, Eric L.G. Verhoeven³ MD, PhD, James I. Spark¹ MD, on behalf of the Global Registry for Endovascular Aortic Treatment (GREAT) Investigators
¹ Dept. of Vascular and Endovascular Surgery, Flinders Medical Centre, Adelaide, Australia
² Dept. of Vascular Surgery, Oxford University Hospitals NHS Trust, Oxford, UK
³ Dept. of Vascular and Endovascular Surgery, Paracelsus Medical University, Nuremberg, Germany

10.50 Survival after infrarenal EVAR. Experience of 387 EVAR patients with and without adverse post-operative surveillance findings

Hardy T, Dhillon A, Hossaini S, Olivier J, Ward T, Balasubramanian K, Augustine K, Keogan R, Coulston J, Evers P, Darvall K, Hunter J, Stewart A
Somerset and North Devon Vascular Unit, Musgrove Park Hospital

11.00 Cerebral cross-perfusion and the Circle of Willis: does physiology trump anatomy?

Katherine Hurst, Korana Musicki, Zoltan Molnar, Elizabeth Hardy, Ashok Handa
John Radcliffe Hospital, Oxford UK

High-dependency care after carotid surgery: need or luxury?

Urriza Rodriguez D, Matthews L, Tunney D, Nordon I, Kukreja R
Department of Vascular Surgery, University Hospital Southampton NHS Foundation Trust.

11.20 Low risk of ischaemic stroke distal to asymptomatic carotid stenosis on contemporary medical treatment: population-based cohort study

Dominic P.J. Howard^{1,2} DPhil, MT Cooney¹ MD, Z. Mehta¹ PhD, L Li¹ DPhil, PM Rothwell¹ for the Oxford Vascular Study

¹ Oxford Vascular Study, Stroke Prevention Research Unit, University of Oxford
² Dept. of Vascular Surgery, Oxford University Hospitals NHS Trust, Oxford, UK

11.30 A six-year experience of the investigation and management of iliac artery endofibrosis.

Peake LK¹, Hinchliffe RJ^{1,2}

1. School of Social and Community Medicine, University of Bristol
2. North Bristol NHS Foundation Trust

11.40 May Thurner Syndrome in positional changes- a pilot study.

Hindi F, Godfrey AD, Tripathi S, Atchley J, Grewal P, Pemberton RM
Department of Vascular Surgery, Portsmouth Hospital, Portsmouth

11.50 How does the 'Angiosome Concept' fare in the real world

N. Chinai, K. Balasubramaniam, P.S. Evers, I.D. Hunter, A.H.R. Stewart, J.E. Coulston
Department of Vascular and Endovascular Surgery and Department of Radiology, Taunton and Somerset NHS Foundation Trust

12.00 Morphometric predictors of mortality, morbidity and length of hospital stay following lower limb revascularisation

M. T. Juszczak^{1,2}, B. Taib², J. Raf², L. Iazzolino², S. Neequay², F. Torella²

1) Department of Vascular Surgery, Oxford University Hospitals
2) Liverpool Vascular and Endovascular Services, Royal Liverpool Hospital

12.10 Effects of variable width valvulotomy use on early infra-inguinal bypass patency rates

Dando A, Hall S, Templeton A, Baxter S
University Hospital Southampton NHS Foundation Trust, Southampton General Hospital, UK

Invited Speakers

- 12.20** Research opportunities in the South West **R Hinchliffe**
- 12.30** Advice for a modern vascular trainee
A Stewart
P Bevis
R Winterborne
- 12.45** GIRFT – Getting It Right First Time – Update **Mike Horrocks**
- 12.55** Lunch and Trade Exhibition

PLEASE ENSURE YOU MAKE THE MOST OF THE OPPORTUNITY DURING THE LUNCH HOUR TO VISIT THE TRADE STANDS

13.55 South West Vascular Surgeons Business Meeting

Session 2 - Trainee Presentations: Chairmen: Mr. Lasanthe Wijesinghe & Mr. Sachin Kulkarni

- 14.10** A single centre's experience of SFA stents
Lucinda Frank, Fjalar Elvarsson, Rachael Morley, Neil Collin, Graham Collin, Alexander Horsch, Peter Mezes, Pavel Kavcic and Andy Wenle
Department of Vascular Surgery, North Bristol NHS Trust
- 14.20** Does an inpatient diabetic podiatrist reduce the rate of revisional minor and major amputation in diabetics following digital amputation?
Roels N, Boulton Z, Guy A, Warren R, Birchley D.
Department of Vascular Surgery, Royal Devon and Exeter NHS Foundation Trust, Exeter
- 14.30** Are we cutting it when it comes to major lower limb amputations?
Urriza Rodriguez D, Kinloch D, Storer N, Baxter S
Department of Vascular Surgery, University Hospital Southampton NHS Foundation Trust
- 14.40** Perioperative compliance with VSGBI quality improvement framework for major lower limb amputation in Oxford
R Aslam, LJ Hands
Department of Vascular Surgery, John Radcliffe Hospital, Oxford

14.50

Trends in antiplatelet therapy pre and post carotid endarterectomy – a sticking point in current practice?

A Stimpson, N Tanner, S Stevens, J Ma, B Tinsley, C Brown, L Hopkins, D Loughran, S Tate, K Boyce, D Bosanquet, RL Harries Vascular Surgery Group, Welsh Barbers Research Society
Sponsored by L Fiegelstone, Department of Vascular Surgery ABM University Health Board

15.00

Long term outcome and Cardiovascular risk stratification in Carotid endarterectomy

Godfrey AD, Kuhan G, Lee C, Wijesinghe LD*
Regional Vascular Unit, Royal Bournemouth & Christchurch Hospital NHS trust, Bournemouth

15.10

Obtaining and acting on patient experience feedback in a vascular network: review of results after six months

Clíodhna Ní Ghuidhir, Dr. Mary Weisters, Mr. Patrick Lintott, Mr. Jeremy Perkins, Mr. Ed Sideso
Thames Valley Vascular Network: Buckinghamshire Healthcare NHS Trust, Oxford University Hospitals NHS FT, Royal Berkshire Hospitals NHS FT

15.20

Can we enhance the Bristol Bath and Weston Vascular Network Enhanced Recovery Programme?

A Chambers, D Hocking, J Rogers, D Gane, R J Winterborn
Department of Vascular Surgery, Bristol Bath and Weston Vascular Network

15.30

Popliteal injury following blunt force knee trauma... the missed diagnosis?

Godfrey AD, Hindi F, Pemberton RM, Grewal P
Department of Vascular Surgery, Portsmouth Hospital, Portsmouth

15.40

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Department of Vascular Surgery, Salisbury NHS Foundation Trust

Invited Speakers

- 15.50** Foam Sclerotherapy – 10 years on **S Ashley**
- 16.00** Evidence based use of compression stockings **B Campbell**
- 16.10** Presentation of prizes and close