

Clinical Indication: Recurrent VV's Clinical History: ? SVI ? DVI

Findings:

BILATERAL LOWER LIMB ARTERIAL DUPLEX

Right

Remnant and competent SFJ. Absent GSV consistent with previous venous treatment.

Small incompetent veins which could be traced to the pelvic region traced down the medial thigh and continued into the medial calf before tracking posteriorly to drain into the distal SSV approximately 10cm above the ankle.

The SPJ and SSV were competent until the above varix drained into the distal SSV after which the SSV was incompetent and supplied varices at the ankle.

Varices in the medial thigh contained chronic non-occlusive thrombus and post thrombotic scarring, consistent with previous venous intervention.

A 3mm incompetent perforator in the distal posterior thigh was also noted to supply calf varices.

No evidence of DVI.

Incompetent SFJ and GSV. The thigh GSV measures approx 10mm in diameter in the proximal thigh and 8mm distally and is straight within the fascia. It leaves the fascia mid thigh and branches in the mid-distal thigh and in the calf to supply medial and posterior varices but remains incompetent to ankle.

Varices in the proximal calf contained chronic non-occlusive thrombus.

Competent SSV.

No evidence of DVI.

Reported By:

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