Studies on the relationship between perforating vein insufficiency and iliac compression syndrome.

Ling Lin, Zhihua Huang, Zhiping Huang, Ping Liao, Bo Ye, Lei Liu, Chaoqing Guo, Jinfeng Tang*

Department of Clinical Laboratory, Ganzhou City People's Hospital, Ganzhou, PR China

Abstract

Objective: To study correlation among number (n), diameter (d) and blood reflux time (t) and the Left Common Iliac Vein (LICV) stenosis degree of the expansion of Perforating Veins (PVs), so as to guide the clinical formulation and adjust the treatment plan.

Methods: Retrospective analysis of 45 PVs patients with LCIV in different degrees of compression in our hospital from 2010 to 2012 was done. LCIV was divided into 50-69%, 70-99%, 30-49% and occlusion of the stenosis in order to avoid the error of the left iliac vein stenosis. Pearson correlation analysis among the number, diameter and blood reflux time of PVs and LCIV were performed.

Results: Pearson correlation analysis among the number, diameter and bood back flow time of PVS, and the degree of stenosis was done, and these results showed that correlation coefficients among the number, diameter and blood return the PVs between flow time and the degree of stenosis were rp-n=0.872, rp-d=0.934, rp-t=0.891 (P<0.001), respectively. The avoid relates exists positive correlation and correlation was significant.

Conclusion: With the increase of LCIV stenosis, the number of PVs and the diameter increased, and the time of blood flow were prolonged.

Keywords: Perforating vein, Iliac compression syndrome, Left common iliac vein.

Introduction

Venous insufficiency is a complex condition in which the veins do not efficiently return blood from the lass to the heart. Venous insufficiency develops slowly and its complications often appear years or even decades after the onset of symptoms [1]. Its origin is multifactorial and curical manifestations are widely varied, ranging from dilated cutaneous veins and varicose veins, to edema, skin discoloration, and ulcers in advanced cases. The most common symptoms are pain, fatigue, heaviness, warmth and swelling of the leg, all of which are more intense when standing and under environmental conditions of heat and humidity [2]. Venous insufficiency can affect the superficial venous system or the deep venous system, or both, but the most common situation is involvement of the superficial venous system, the main manifestation of which is varicose veins. The estimated prevalence of venous insufficiency varies depending on the criteria used. On the basis of varicose veins in the physical examination, prevalence has been estimated to range from 30% to 40% in the general adult population [3], and to affect up to 50% of women [4]. If we consider the detection of reflux in the superficial venous system by hemodynamic study, prevalence can range from 9% in males to 15% in females [5,6].

Iliac compression syndrome, also known as iliac vein compression syndrome, May-Thurner syndrome and Cockett

Accepted on April 6, 2017

syndrome, includes a series of clinical symptoms that occur as a result of compression of the left common iliac vein between the right common iliac artery and the underlying vertebrae [7]. There are lot of studies on iliac compression syndrome however few concern the relationship between perforating vein insufficiency and iliac compression syndrome..

In this study, we would investigate the correlation among number (n), diameter (d) and blood reflux time (t) and the Left Common Iliac Vein (LICV) stenosis degree of the expansion of Perforating Veins (PVS), so as to guide the clinical formulation and adjust the treatment plan.

Subjects and Methods

PVs patients with LCIV in different degrees of compression in our hospital from 2010 to 2012 were collected, all patients were diagnosed by venography and clinic syndrome. A retrospective analysis of PVs patients with LCIV in different degrees of compression was done. LCIV was divided into 50-69%, 70-99%, 30-49% and occlusion of the stenosis in order to avoid the error of the left iliac vein stenosis. Pearson correlation analysis among the number, diameter and blood reflux time of PVs and LCIV were performed. All experimental procedures were approved by the Care and Usage Committee of the Hospital, and the patients' informed consent was collected.