

Varicose vein interventions – PRIOR APPROVAL

NICE has published detailed guidance on what treatment should be considered for varicose veins and when interventions for varicose veins (endothermal ablation, sclerotherapy or surgery) should be offered. Surgery is a traditional treatment that involves removal of the vein, patients can get recurrence of symptoms which may need further treatment. Treatments like endothermal ablation or ultrasound-guided foam sclerotherapy are less invasive than surgery and have replaced surgery in the management of most patients. However surgery is the most appropriate in some cases. Patients with symptomatic varicose veins should be offered treatment of their varicose veins. Compression hosiery is not recommended if an interventional treatment is possible.

<https://www.nice.org.uk/guidance/qs67>

1.1 Intervention in terms of, endovenous thermal (laser ablation, and radiofrequency ablation), ultrasound guided foam sclerotherapy, open surgery (ligation and stripping) are all cost effective treatments for managing symptomatic varicose veins compared to no treatment or the use of compression hosiery. For truncal ablation there is a treatment hierarchy based on the cost effectiveness and suitability, which is endothermal ablation then ultrasound guided foam, then conventional surgery.

1.2 Refer people to a vascular service if they have any of the following:-

1. Symptomatic * primary or recurrent varicose veins.
2. Lower-limb skin changes, such as pigmentation or eczema, thought to be caused by chronic venous insufficiency.
3. Superficial vein thrombophlebitis (characterised by the appearance of hard, painful veins) and suspected venous incompetence.
4. A venous leg ulcer (a break in the skin below the knee that has not healed within 2 weeks).
5. A healed venous leg ulcer.

*Symptomatic: “Veins found in association with troublesome lower limb symptoms (typically pain, aching, discomfort, swelling, heaviness and itching).”

For patients whose veins are purely cosmetic and are not associated with any symptoms do not refer for NHS treatment

1.3 Refer people with bleeding varicose veins to a vascular service immediately.

1.4 Do not offer compression hosiery to treat varicose veins unless interventional treatment is unsuitable.

For further information, please see:

<https://www.nice.org.uk/guidance/qs67>

<https://www.guidelinesinpractice.co.uk/nice-referral-advice-11-varicoseveins/300594.article>

<https://www.nice.org.uk/guidance/cg168>