

第 21 回

Congress of the Asian society
for Vascular Surgery が

10 月 21 日（水）～24 日（土）、
韓国にて **WEB** 開催されます。

当院からは

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ライブ配信にて学術発表を
されますのでご紹介します。

ASVS 2020

The 21st Congress of the Asian Society for Vascular Surgery

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Coex, Seoul, Korea

Roadmapping the Future of Vascular Surgery



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Save the Date

Abstract Submission Deadline
Abstract Acceptance Notification
Pre-registration Deadline

July 31 (Fri), 2020
August 14 (Fri), 2020
August 31 (Fri), 2020

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Abstract Submission No. : OA-0061
**How to effectively use lightweight graduated elastic stockings for
venous ulcers**

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ABSTRACT

BACKGROUND

Compression therapy is essential for patients with chronic venous insufficiency with venous ulcer, treatment is often difficult. We examined the difference between Bandages group and Stockings group in terms of healing of venous ulcers.

METHOD

Period is between February 2019 and July 2020. After operation for varicose veins, patients using bandages and stockings for venous ulcers were picked up 5 cases respectively. Patients with diabetes were excluded in this study because there is possibility that these diseases make infection worse and lead to a bad condition. Patients with severe perforators in the lower leg were excluded. The ulcer size was 10 cm² or more. We compared the bandaged group with the stocking group during the postoperative ulcer recovery period.

RESULT

There was no difference between Bandages group and Stockings group in terms of Healing period, Ulcer size and depth, and Date of operation. Wearing lightweight graduated elastic stockings as it is, the compression pressure of the ankle is around 22 mmHg. In addition, we put a urethane pad on the inside of the ankle and measured with Pico-press, the compression pressure increased by about 10 mmHg. From here, gauzes with ointment are applied to the wound, and the compression pressure increases by 10mmHg again. Finally, even with light stockings, the compression pressure of the ankle become more than 40mmHg. This pressure was the appropriate pressure used for chronic venous insufficiency.

CONCLUSION

We could not adjust the "influencing factors" and different patient

backgrounds this time. This is why accurate examination requires patient background matching between the two comparison groups, but in fact, it is difficult to control multiple factors in ulcer patients. Patients with venous ulcers need to continue high pressure compression therapy for a long period of time. Compression therapy using elastic stockings leads to good self-management for patients with venous ulcers.

The point of postoperative nursing care of the difference between endovenous ablation and NTNT ablation for varicose veins

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ABSTRACT

Introduction: Since 2011, endovenous ablation for varicose veins has been covered by national insurance system in Japan. Currently, the standard treatment for varicose veins at our facility is endovenous ablation with laser or radiofrequency and endovenous phlebectomy by stab avulsion. Since 2019, NTNT ablation using VenaSeal has been covered by national insurance system in Japan. We started this treatment in our hospital from January of this year. In this study, we compared the difference of postoperative nursing care for endovenous ablation and NTNT ablation using VenaSeal.

METHOD: The period is from January to March 2020. The subjects were 36 patients (M/F: 12/24, 71.8±9.7) each who underwent endovenous ablation, 18 patients respectively and NTNT ablation using VenaSeal, 18 patients respectively. The items to be examined were via interviews using the VAS scale for patient complaints such as the postoperative pain and numbness. In addition, changes in the postoperative appearance related to the extent of internal bleeding and an allergic reaction.

RESULT: Immediately after operation, the average VAS on endovenous ablation was 1.1 ± 2.2 , which declined after peaking at 30 days. On the other hand, in NTNT, it was 0.7 ± 0.8 immediately after, which was a continuously low value. In result, internal hemorrhage and neuralgia were seen early after operation (7 ± 4.3 days) in endvenous ablation cases. On the other hand, complication cases were caused 32.6 ± 5.3 days on average after operation in NTNT ablation using VenaSeal.

CONCLUSION: The point of nursing care is to understand the difference between postoperative complications and the onset process due to the surgical procedure, and explain it to the patient before operation.