

Title VNUS® Radiofrequency Ablation (RFA) for Varicose Vein

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Aim

To review evidence on the safety, efficacy/effectiveness and cost-effectiveness of using VNUS° radiofrequency ablation (RFA) compared with the conventional surgical or other endovenous techniques in the treatment of patients with varicose vein.

Conclusions and results

There was good to fair level of retrievable evidence to indicate that the VNUS® radiofrequency ablation (RFA) was effective in the treatment of patients with varicose vein. Findings indicated that patients who underwent the Closure™ procedure were associated with a faster recovery and less postoperative pain. Patients resumed normal activities within one day or two, and returned to work more than a week earlier. Patient satisfaction, quality of life improvement, and analgesic requirements significantly favoured RFA treatment. There was also evidence to suggest that VNUS® radiofrequency ablation (RFA), performed under local/tumescent anaesthesia in an outpatient or office-based setting, was likely to be a cost-effective and reasonable strategy for the treatment of primary great saphenous vein (GSV) reflux.

Recommendations

VNUS® radiofrequency ablation (RFA) also called the Closure™ procedure can be used as alternative for conventional surgical or other endovenous techniques in the treatment of patients with varicose vein

Methods

Literatures were searched through electronic databases specifically PubMed, Medline, Cochrane, Ovid, Horizon scanning databases, other websites; US FDA, MHRA and from non scientific database - Google search engine. In addition, a cross-referencing of the articles retrieved was also carried out accordingly to the topic. Relevant articles were critically appraised and evidence graded using US/Canadian Preventive Services Task Force

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