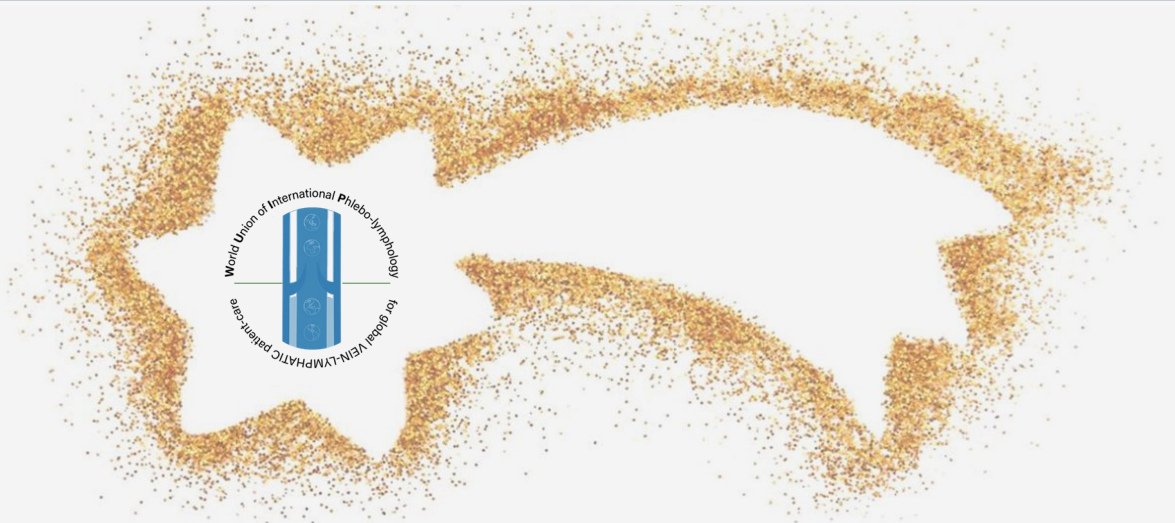


WUIP NEWSLETTER

2025 - 2026



Click here to leave YOUR wish to the vein-lymphatic world.
Feel free to invite also your colleagues to do the same
in the «double YOU» vision of the WUIP

<https://www.uip-phlebology.org/wuip-wish-2026>

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PRESIDENTIAL REMARKS

On behalf of all the **World Union of International Phlebology (WUIP)** Executive Committee, I'd like to take the end of the year opportunity to deeply thank the so many who made the 2025 vision of our Organization becoming an accomplished mission. Among these, medical colleagues, healthcare professionals in general, but also administrators and non-healthcare professional and industry representatives. The atmosphere of global teamwork has been deeply felt both in the 2025 World Congress preparation and execution, as well as in each and every online meeting of the 24 of the month, in honor of March 24, 1959 founding date. In this historic year, real teamwork across all continents allowed the **Union Internationale de Phlebologie (UIP)** to strengthen its history awareness while stepping forward in its present and future representation of all the vein-lymphatic world, indeed being now recognized as the World Union of International Phlebology (WUIP). The increase Member Societies by more than 10%, in the last 2 years, with 90 Societies included in the Organization, represent the evidence of the constant grow, for which I'd like to express our appreciation to all the ones who joined and to the ones who will like to join. In this sense, I also thank the colleagues who accepted the invitation to join **the presidential working groups** dedicated to **Advocacy, Awareness, Academic Institutional and Multi-specialty engagement**, together with the new members of the **Engagement Working Group, Educational and Scientific committee**. It's never a woman or a man show, therefore it's also of great value how in this year the above-mentioned committees have been designed with a special attention to **gender equality**.

For the same no-woman/man show principle, I personally thank all the ones who supported my proposal to remove the possibility for the President to running again for the same charge, considering also that the Emeritus President status is for life. In conclusion, thanks also to an extraordinary newly elected Executive Committee, we approach the end of the year with a WUIP in perfect conditions to serve its Member Societies at best. For this reason we remind you about the portal we created to allow everyone not only to write general wishes but first of all what YOU wish for the advancement of the vein-lymphatic world, so that we can transform this holiday season in a productive global brainstorming on how to move forward and together at best toward a great 2026.



Prof. Sergio Giancesini

University of Ferrara (ITALY)
USUHS University(Bethesda, USA)
WUIP 2023-2027 President



2025-2029 WUIP Executive Committee

HONOUR BOX: PROF. DINO SFARCICH



Prof. Dino Sfarcich has been a real Authority in the Academic World of Buenos Aires.

Moreover, his kindness and availability toward colleagues of whatever professional status has served as example for many generations.

During the 2025 World Congress he was personally joined by the Executive Committee representatives for honoring him with a special recognition.

Herein, we are delighted in introducing his professional figure.

Dino Bernardo Sfarcich, MD, PhD

Dino Bernardo Sfarcich was born in Buenos Aires, son of Italian immigrants. From an early age, he embraced the values of effort, integrity, and service that would later define both his personal life and his distinguished medical career.

He completed his primary and secondary education in Argentina's public school system and entered the prestigious Faculty of Medicine of the **University of Buenos Aires (UBA)**, where he graduated as a physician at the age of 23. He later earned his PhD at the same institution, with a doctoral thesis that reflected his deep commitment to scientific rigor and the advancement of surgical knowledge.

Dr. Sfarcich developed an outstanding academic career at the University of Buenos Aires, where he progressed through all teaching ranks in the Department of Surgery and remains, to this day, **Professor Consultus** at the **Faculty of Medicine**.

His clinical career was equally remarkable. After serving in several major public hospitals, he became Head of the Vascular Surgery Section and later Head of the General Surgery Service at Hospital Nacional Prof. Alejandro Posadas, positions he obtained through competitive examination. Since 2000, he has served as **Consultant Physician** at the same institution, where his clinical judgment and human approach have been a constant reference.

Throughout his career, Dr. Sfarcich has been an active leader within the scientific community. He served as President of the Argentine **Association of Angiology and Cardiovascular Surgery**, President of the **Society of Thoracic and Cardiovascular Surgery**, and chaired multiple national congresses and scientific meetings. His academic production includes more than 150 scientific publications and over 230 participations as speaker, moderator, or panelist at national and international events.

Recognized nationally and internationally, he is a **Member Emeritus of the Argentine Academy of Surgery**, **Honorary member of the Argentine Medical Association**, among many other honorary distinctions. His professional journey allowed him to practice medicine both in Argentina and abroad, building lasting relationships with some of the most prestigious vascular surgeons and scientists worldwide.

Beyond his exceptional academic and professional achievements, Dr. Sfarcich is widely admired for his moral integrity, dedication to the medical profession, generosity toward younger colleagues, and profound human warmth—qualities that have left an enduring mark on all who have worked with him.

WUIP MEMBER SOCIETIES past, present and future

Panamerican Society of Phlebology and Lymphology

Phlebology and Lymphology are naturally joined in a specialty that has steadily grown in all the world, and Latin America in particular, over the last century and in the first quarter of this one. The intimate relationship between these two anatomic complex pipelines, requires a consistently integrated approach to achieve positive results in our treatments.



The scientific societies in Latin America were founded through the impulse of remarkable professors that understood the challenges and the gaps the specialty needed to fill for the phlebology patients. They mirrored the itinerary European associations travelled, establishing the pillars resulting in the foundation of the UIP back in 1959. In Latinoamerica the Argentinian Society pioneered in 1968 and soon the wave spread around South America. The Panamerican Society was founded in 1981 joining different Latam societies.

The meetings are an essential way to share knowledge, establish collaborations and networks, as we grow in diversity and perspectives. Over the last several decades we have witnessed the presence of Latinoamerica hosting some of the most prestigious events in the field and cooperating in different roles in the WUIP, either institutionally or through prestigious investigators, bringing the eyes of the world to a continent that aspires to be part of innovation while working in equity for the access of their population to qualified medical services in veins and lymphatic pathologies.

The women gender perspective in Phlebology is not only a welcomed enriching approach but also a very pragmatic one, coming from the sex that suffers varicose veins the most, not only from the aesthetic point of view but rather from the whole spectrum of items affecting quality of life.



It is quite important to widen our therapeutic alternatives working along with other specialties that are intertwined in the world of veins and lymphatics, since a multidisciplinary approach is essential to optimal and integral results in benefit of our patients.

I hope we continue building this path through different continents, representing our nations at best in the global scenario of the WUIP, towards the best advocacy for our patients. Also in this sense, I remain at your disposal

Chantal Agüero, MD
Panamerican Society of Phlebology and Lymphology President
chaguerowm@gmail.com

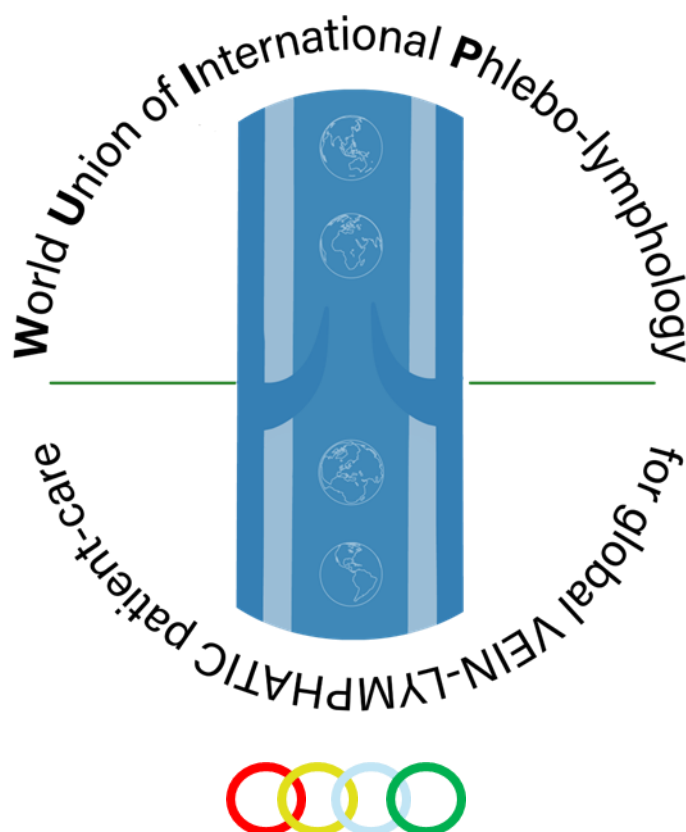


WUIP Continental Support Program

WUIP main aim is to promote synergy among the 90 member Societies, while supporting them in their national actions, without competing with their initiatives, rather enhancing them. In a constantly overgrowing multiplication of organizations, often overlapping in the same regions, WUIP offers the chance of a collaboration among the already existing national Societies by means of the WUIP Continental Support Program.

Summing up, it consists in a gentle agreement by means of a Memorandum of Understanding among the national societies of a continent, for which every year, in alphabetical order, the annual meeting of a national society becomes THE reference meeting for the other national Societies of that continent. In the occasion of that event, the boards and members of the different societies are invited with special benefits, so to favor interaction and decision-making on the steering of Phlebology and Lymphology in the region. WUIP is there to support, promote, and showcase the regional outcomes to the other continents. The participation to the WUIP Continental Support Program has NO cost for the participating entities. The detailed RATIONALE and MISSION is available below.

The MOU is available in the following page <https://www.uip-phlebology.org/wuipMOU>



If interested in joining write to:
president@uipmail.org

AFRICAN WUIP HIGHLIGHTS

The sleeping Giant is fully awoken

It's time to write the first African corner speech, and what an honor for me to do it, extending our gratefulness to Professor Sergio Giancesini and the whole executive committee of WUIP to bring this dream to life. October 25th 2025, the historical day of our continent Mama Africa when the African societies made their first presidential meeting when Professor Sergio Giancesini extended his congratulations to the newly joined (Morocco & Tunisia) societies and to the first African Vice-president in the whole history of the WUIP Professor Ayman Fakhry and celebration of the 1st African Societies presidential meeting to sharing thoughts and brainstorming the future and needs for developing better Phlebology practice in their countries and building strong bonds with World Union of International Phlebology following this road map: ? * Developing a new project to recruit more African Societies to join WUIP and invite more societies starting by Algerian, Lybian, Sudanese, Lebanese, Jordanian, Tanzanian, and South-African societies as a starting point. **Starting global research with African Societies supported by WUIP *** Issuing a monthly African Phlebology and lymphology contribution newsletter ****Building and engaging top world phlebology and lymphology authorities in the African's programs and looking forward for an adjuvant synergistic tool to share experience from and to African nations and societies. These few lines are a call to action to

all African colleagues: the door is fully opened to submit monthly contributions about met and unmet needs of the continent, scientific reports, projects, comments and constrictive eventual criticism; so, to advance together bringing Africa to Vein- Lymphatic world as well as the world to Africa. If interested in submitting material, feel free to write to president@uipmail.org and to the WUIP vice-president for Africa, prof. Ayman Fakhry, ayman_vasc@live.com. Yes, the giant is fully awaked today and will never sleep again but looking forward to the better tomorrow and working hard, the different generations, youth and seniors, hand in hand with our friends along the universe for a better phlebology and lymphology practice and welfare of the WUIP.



Sohail Ayman Fakhry, MD, MSc, EFVS, GVRF
Consultant vascular surgery, Royal Vascular Center,
Alexandria – Egypt
Gen. Secretary Egyptian Venous Forum



SPEAKER'S CORNER

Balkan vein-lymphatic state of the art and of the science: an open invitation to global synergy

The Balkan Venous Forum (BVF) is a scientific organization founded in 2010. The mission statement of the BVF is to promote venous and lymphatic health through innovative research, education and technology.

The met needs from the Balkan area refer mainly to minimally invasive open procedures practiced in public hospital and venous leg ulcers treatment. In Balkan countries, just open procedures are covered by the health insurance. Minimally invasive open procedures like cryostripping and microphlebectomies are currently practiced. Considering cryostripping's favourable safety profile and its cost-effectiveness, this procedure should be considered as a therapeutic option among endovenous procedures, sclerotherapy, or other minimally invasive interventions, especially in the Eastern Europe Public Hospitals as an alternative procedure to the classic high ligation and stripping. Venous leg ulcers treatment was one of the main concerns in this area, hundreds of patients being treated each year, especially in Serbia and Romania. Most frequently, compression therapy is used as the primary treatment for venous ulcer healing, multilayer dressings, elastic bandages, or specialized compression devices being applied. In certain cases, negative pressure wound therapy and skin graft is applied. Once the wound is closed, different procedures are used in order to perform venous ablation.

From the scientific point of view, the BVF organized during time top quality events, including scientific meetings and congresses, in-frame sessions among other societies events, hands-on workshops and trainings, etc.

One of the most important unmet needs in this region is related to lipo&lymphoedema treatment. Considering that the link between phlebology and lymphology is nowadays world-wide recognized – in reality both these disciplines being parts of a whole, one of the most important goals in the upcoming months is to bring novelty and to develop lymphology in the Balkan countries. As well, we are looking to develop young phlebologists skills, and to improve the ways we treat venous disorders patients, by providing the latest technologies and devices in the field.

In order to promote the vein-lymphatic global synergy, the BVF will be involved in upcoming events, our community being always ready to meet new colleagues, change ideas, develop and fulfil projects. Together forward in vein-lymphatic care!



Assistant Professor
Dr. Sergiu-Ciprian Matei, MD, PhD
Balkan Venous Forum 2025-2028 President

EVENTS UNDER WUIP AUSPICES

*The Canadian Vision in Phlebology:
Honouring our Past and Excited for the Future*

 SOCIÉTÉ CANADIENNE DE PHLÉBOLOGIE
CANADIAN SOCIETY OF PHLEBOLOGY

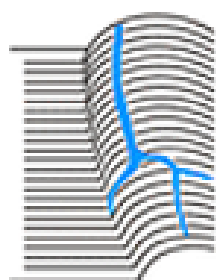
MONTREAL



ANNUAL CONGRESS
CONGRÈS ANNUEL

								
Azer S	Bayne M	Bentley J	Bordeleau C	Chakkour K	Danylewicz R	Dupuis JL		
								
Ganesini S	Giroux MF	Hill D	Hilscher L	Jaramillo J	Josnin M	Lavoie F		
								
Lo Vuolo M	Nadeau ME	Nault P	Néaume N	Pinette G	Rizk A	Towers A	Wong M	Zummo M

MAY 15-16-17 MAI, 2026
www.canadiansocietyofphlebology.org



Canadian Society of **Phlebology**



EVENTS

One of the main WUIP visions is to **promote productive relationships among societies**. With this vision, we report both **events with WUIP auspices and events without**, so to inform everyone about possible educational activities. The hope is also to offer a tool useful for the colleagues organizing future meetings, so to avoid overlapping among events.

For more information about events visit: <http://www.uip-phlebology.org/events>

If you would like your event to appear in the UIP Newsletter, contact us at communications@uipmail.org

EVENTS CALENDAR

MARCH 2026

19TH ANNUAL CONFERENCE OF VENOUS ASSOCIATION OF INDIA

25 - 27 MARCH 2026

GOA, INDIA

APRIL 2026

26TH ANNUAL SCIENTIFIC MEETING OF THE AUSTRALASIAN COLLEGE OF PHLEBOLOGY

24 - 27 APRIL 2026

MELBOURNE, AUSTRALIA

MAY 2026

50TH ANNUAL CONGRESS OF THE CANADIAN SOCIETY OF PHLEBOLOGY

15 - 17 MAY 2026

MONTREAL, CANADA

DECEMBER 2026

LE.G.ATHERING WORLD CONGRESS

17-19 DECEMBER, 2026

DUBAI, UAE



WUIP

WORLD UNION OF
INTERNATIONAL
PHLEBOLYMPHOLOGY

www.uip-phlebology.org



INTERNATIONAL ANGIOLOGY: ACCESS

International Angiology, the *Official Journal of the World Union of International Phlebology*, provides discount online journal access to members of WUIP Member Societies.

- Tier 1* societies - €45.00 per member, including taxes for online access
- Tier 2 and 3 societies* - Free access
- Residents (Tier 1, 2 and 3) - Free access



Requests for access come directly from the Member Society for its members. If the member society does not wish to provide access, requests can come from individuals, providing they can provide proof of their membership status.

Accessing the Journal - WUIP Member Societies

1. Download: The membership template spreadsheet from the UIP website:

<https://www.uip-phlebology.org/uip-official-journal>

DOWNLOAD

2. Email your completed spreadsheet to
International Angiology
journals.dept@minervamedica.it

Ensure you include the detail of the Member society requesting access.

EMAIL

3. Payment: The society receives an invoice for Journal Access from International Angiology

PAYMENT

4. Once paid, each individual member receives journal access instructions from *International Angiology*

ACCESS!

* WUIP Tiers are defined by the UIP Constitution (Schedule 4), <https://www.uip-phlebology.org/>



Effectiveness and tolerability of venoactive drugs combined with compression therapy in the treatment of chronic venous disease CEAP class C6: a prospective, observational study

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[10.23736/S0392-9590.25.05353-2](https://doi.org/10.23736/S0392-9590.25.05353-2)

ABSTRACT

BACKGROUND: Leg ulcers associated with chronic venous disease (CVD) are characterized by prolonged healing and high recurrence. This study describes the effectiveness and tolerability of venoactive drugs (VAD) combined with compression as part of conservative therapy for active venous leg ulcers among patients treated in routine clinical practice.

METHODS: This prospective, multicenter, observational, 6-month study recruited patients diagnosed with Clinical, Etiology, Anatomy, and Pathophysiology (CEAP) clinical class C6 and active venous ulcer area, 5-30 cm². VAD pharmacotherapy was at the discretion of the treating physician and consistent with national guidelines at the time of the study. Primary outcome was the proportion of patients with a healed venous ulcer at 6 months. Change from baseline in the mean Venous Clinical Severity Score (VCSS), the proportion of patients with a reduction in CEAP clinical class, and Quality of life (QoL - Chronic Venous Insufficiency Questionnaire [CIVIQ-14]) were also assessed.

RESULTS: The study enrolled 349 patients: 66.8% were women; mean age was 61.0±12.7 years; and mean Body Mass Index (BMI) was 27.9±4.1 kg/m². Mean duration of the reference venous ulcer was 18.3±23.0 weeks and mean ulcer area was 9.2±6.9 cm². All patients were prescribed VAD at baseline, most commonly micronized purified flavonoid fraction (MPFF) (98.3% patients). Compression therapy was prescribed to 91.1% of patients. After 6 months, venous ulcers had completely healed in 69.6% of patients; 13.5% had experienced complete healing at 3 months. Mean physician-assessed VCSS decreased from 15.5±4.1 at baseline to 9.7±4.5 at 6 months (P<0.001). There was a progressive decrease in mean reference ulcer area from 9.2±6.9 cm² at baseline to 1.2±2.8 cm² at 6 months. QoL was significantly improved with a reduction in mean CIVIQ-14 global index score from 53.9±20.5 at baseline to 24.5±16.3 at 6 months (P<0.001). Treatment was well tolerated.

CONCLUSIONS: Combined treatment with VAD and compression therapy was associated with complete venous leg ulcer healing in 70% of patients with a mean time to healing of 7.4 months. A significant improvement in QoL compared with baseline was also observed.

KEY WORDS: Conservative treatment; Leg ulcer; Varicose ulcer; Venous insufficiency

Safety and effectiveness of carotid endarterectomy for symptomatic high-risk mild extracranial carotid stenosis: preliminary results from an Italian multicentric study

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[10.23736/S0392-9590.25.05433-1](https://doi.org/10.23736/S0392-9590.25.05433-1)

ABSTRACT

BACKGROUND: The impact of carotid endarterectomy (CEA) on symptomatic patients with mild high-risk carotid stenosis has not been really investigated and it is not well-defined. This multicenter retrospective study aims to assess the safety and effectiveness of CEA in patients with 50% or less stenosis with symptoms despite best medical therapy.

METHODS: Between January 2018 and December 2024, all consecutive patients presenting with carotid-related neurological symptoms and a $\leq 50\%$ high risk carotid stenosis submitted to CEA in eight high-volume vascular centers were included in the present study. All patients underwent duplex ultrasonography and computed tomography angiography to identify plaque morphological features. All patients were checked for alternative possible source of brain embolism.

RESULTS: Twenty-nine patients with high-risk embolic plaques determining $\leq 50\%$ stenosis and carotid-related neurological symptoms underwent CEA. The majority of plaques were Gray-Weale 1 or 2 (79.3%) and with ulcerated cap (79.3%). Symptoms reported at onset and during hospitalization up to CEA were 8 (27.5%) TIA, 8 (27.5%) crescendo TIA, 10 (34.4%) minor strokes, 3 (34.4%) strokes in evolution. Ischemic brain lesions of less of 25 mm were detected in 12 patients (41.3%). No perioperative stroke, death, myocardial infarction or cerebral hemorrhage occurred in this series. Only one TIA was detected due to a surgical defect that was promptly corrected. No patient experienced recurrent neurologic events related to the revascularized hemisphere during follow-up (mean 35.6 months).

CONCLUSIONS: Despite the limited number of patients included in the study, CEA has been shown to be safe and effective in preventing recurrent neurological ischemic events in highly selected patients with mild carotid high-embolic-risk plaque stenosis treated at high-volume institutions. Further studies are required to identify the most appropriate diagnostic tools and the precise carotid plaque features associated with high-embolic risk.

KEY WORDS: Endarterectomy, carotid; Carotid stenosis; Signs and symptoms

Neovascularization, a cause of truncal varicose vein recurrence after endovenous laser ablation

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[10.23736/S0392-9590.25.05417-3](https://doi.org/10.23736/S0392-9590.25.05417-3)

ABSTRACT

BACKGROUND: Endovenous ablation techniques (EVA) have become increasingly common and have taken the place of surgical treatment for truncal vein incompetence. We set out to investigate and identify outcome, complications, and incidence of recurrence, and possible causes of truncal recurrence in patients treated with Endovenous Laser Ablation (EVLA).

METHODS: A cohort study of 307 consecutive patients (119M/188F) with varicose veins and great saphenous vein incompetence, (C3-C6), were treated with EVLA. Clinical and duplex ultrasound assessment was performed for all patients. Post-procedure patients were placed in compression stockings for 2 weeks, and given enoxaparin for DVT prophylaxis. Patients were also assessed for deep venous thrombosis (DVT), and successful obliteration.

RESULTS: Median initial vein diameter was 6.9 (range 3.7-12.6) mm, and the median ablation energy was 57.8 (range 44.3 to 83.1) J/cm in all 307 patients. Complete truncal occlusion was noted in 301 patients. Truncal occlusion was demonstrated in all patients at initial and 2-week scan, however six patients were noted to have developed truncal recurrence observed at 6-weeks to 3-months. The median energy delivered was 40.9 (range 35.6 to 41.7) J/cm, significantly less compared to non-recurrent GSV ($P=0.02$). We observed multiple tiny arteriovenous fistulae with arterialized signals within the lasered vein that became confluent, resulting in truncal recurrence.

CONCLUSIONS: Venous re-canalization after EVLA occurs as a result of neovascularization. This takes the form of multiple tiny AV fistulae, that eventually join and becomes a confluent reflux. The triggers for this phenomenon are unclear, but probably related to linear endovenous energy density.

KEY WORDS: Varicose veins; Saphenous vein; Laser therapy; Pathologic neovascularization

Effectiveness of micronized purified flavonoid fraction on venous symptoms and signs in patients at all stages of chronic venous disease: A systematic review and meta-analysis. Part I: symptoms

Andrew NICOLAIDES 1, 2, Kirill LOBASTOV 3, Armando MANSILHA 4, Alejandro J. GONZALEZ-OCHOA 5, Vanessa BLANC-GUILLEMAUD 6, Marie-Blanche ONSLAER 7, Soumeiya SERIFOU 8, Hurrem P. YALTIRIK 6, Narayanan SRIRAM 9, Lianrui GUO 10, Stavros KAKKOS 11

1 University of Nicosia Medical School, Nicosia, Cyprus; 2 Imperial College, London, UK; 3 Pirogov Russian National Research Medical University, Moscow, Russia; 4 Faculty of Medicine, University of Porto, Porto, Portugal; 5 Centro Medico del Noroeste, San Luis R.C., Sonora, Mexico; 6 Servier Affaires Médicales, Suresnes, France; 7 Soladis Clinical Studies, Roubaix, France; 8 Soladis, Lyon, France; 9 The Harley Street Heart and Vascular Center, Singapore, Singapore; 10 Department of Vascular Surgery, Xuanwu Hospital, Capital Medical University, Beijing, China; 11 Department of Vascular Surgery, University of Patras Medical School, Patras, Greece

[10.23736/S0392-9590.25.05462-8](https://doi.org/10.23736/S0392-9590.25.05462-8)

ABSTRACT

INTRODUCTION: Chronic venous disease (CVD) significantly impacts patients' quality of life through leg symptoms and signs. This systematic literature review and meta-analysis, published in two separate articles, evaluated the effects of micronized purified flavonoid fraction (MPFF), a venoactive drug, on CVD symptoms and signs by analyzing data from a wide spectrum of clinical studies in patients with CVD at all stages of the disease. Part I presented herein, focused on symptoms, and Part II on signs.

EVIDENCE ACQUISITION: A systematic review was conducted in November 2023 using PRISMA guidelines. Medline, Embase, and Cochrane databases were searched. Eligible studies included prospective randomized controlled trials (RCTs) and non-RCTs investigating the effects of oral MPFF treatment (1000 mg, daily for at least 1 month) on venous leg symptoms and signs in patients with CVD at all stages (C0s-C6). In the present analysis, primary outcomes were the main venous symptoms including pain, heaviness, discomfort, cramps, feeling of swelling, and burning sensation. Secondary outcomes were pruritus, paresthesia, fatigue, and global symptoms. Patient level of satisfaction with treatment was also assessed. A single-group random-effects meta-analysis was used to estimate the mean change in symptom intensity and the proportion of complete symptom resolution from baseline to the last post-baseline value.

EVIDENCE SYNTHESIS: Out of 387 articles, 56 studies were included in the analysis, among which 51 studies involving 39,878 MPFF-treated patients, reported CVD symptoms. Significant reductions in symptom intensity scores were observed for all outcomes ($P < 0.001$), except for fatigue. Improvement of symptoms was further supported by the resolution of pain, heaviness, cramps, discomfort, and burning sensation observed in pooled estimated proportion of patients (76.2%, 61.5%, 80.5%, 69.8%, and 67.2%, respectively; all $P < 0.001$). The overall level of patient satisfaction was estimated to be more than 90%. Twenty studies had high risk of bias, while sensitivity analyses did not change the study results. Heterogeneity level was frequently high among studies.

CONCLUSIONS: This systematic review and meta-analysis provide strong evidence of consistent and clinically significant improvements in venous leg symptoms associated with the use of the venoactive drug MPFF, across all stages of CVD.

KEY WORDS: Venous insufficiency; Quality of life; Meta-analysis; Micronized purified flavonoid fraction

Effectiveness of micronized purified flavonoid fraction on venous symptoms and signs in patients at all stages of chronic venous disease: A systematic review and meta-analysis. Part II: signs

Andrew NICOLAIDES 1, 2, Kirill LOBASTOV 3, Armando MANSILHA 4, Alejandro J. GONZALEZ-OCHOA 5, Vanessa BLANC-GUILLEMAUD 6, Marie-Blanche ONSLAER 7, Soumeiya SERIFOU 8, Hurrem P. YALTIRIK 6, Narayanan SRI-RAM 9, Lianrui GUO 10, Stavros KAKKOS 11

1 University of Nicosia Medical School, Nicosia, Cyprus; 2 Imperial College, London, UK; 3 Pirogov Russian National Research Medical University, Moscow, Russia; 4 Faculty of Medicine, University of Porto, Porto, Portugal; 5 Centro Medico del Noroeste, San Luis R.C., Sonora, Mexico; 6 Servier Affaires Médicales, Suresnes, France; 7 Soladis Clinical Studies, Roubaix, France; 8 Soladis, Lyon, France; 9 The Harley Street Heart and Vascular Center, Singapore, Singapore; 10 Department of Vascular Surgery, Xuanwu Hospital, Capital Medical University, Beijing, China; 11 Department of Vascular Surgery, University of Patras Medical School, Patras, Greece

[10.23736/S0392-9590.25.05463-X](https://doi.org/10.23736/S0392-9590.25.05463-X)

ABSTRACT

INTRODUCTION: Chronic venous disease (CVD) is a widespread disease characterized by various clinical manifestations. This manuscript is Part II of a systematic literature review and meta-analysis assessing the effects of micronized purified flavonoid fraction (MPFF) on lower limb symptoms and signs in patients with CVD at all stages of the disease. Part I examined symptoms and Part II presented herein focused on signs.

EVIDENCE ACQUISITION: A systematic literature review was conducted in November 2023 to identify studies investigating the efficacy of MPFF oral treatment (1000 mg daily for at least 1 month) on venous symptoms and signs in patients with CVD at all stages (C0s-C6). Databases searched included Medline, Embase, and Cochrane. Eligible studies included randomized controlled trials (RCTs) and non-RCTs (non-randomized comparative, single-arm, and observational studies) evaluating venous signs: edema, redness, ulcer healing and disease severity assessed by venous clinical severity score (VCSS). A single-group random-effects meta-analysis was used to estimate the mean change in sign intensity and the proportion of sign improvement or complete resolution from baseline to the final assessment.

EVIDENCE SYNTHESIS: Out of 387 identified articles, 56 studies were included in the analysis, among which 33 reported CVD signs in 24,617 MPFF-treated patients. Included participants were mainly females (84.1%) with a mean age (\pm SD) of 48.6 (\pm 8.8) years, and overweight with a mean BMI of 26.3 (\pm 4.5) kg/m². Significant reductions were observed in mean [95% confidence interval] ankle and calf circumferences (-7.6 mm [-9.1 to -6.2] and -8.0 mm [-11.2 to -4.8], respectively, $P < 0.001$). Venous ulcers were healed in 48.9% [30.3% to 67.8%] or regressed in 73.4% [63.3% to 82.3%] of the patients ($P < 0.001$). Significant improvements were also shown in redness and VCSS score ($P < 0.001$). Twelve studies had a high risk of bias, while sensitivity analyses did not change the study results. Heterogeneity level was frequently high among studies.

CONCLUSIONS: This comprehensive meta-analysis provides additional evidence supporting the effectiveness of MPFF in improving clinical signs of CVD across all stages of the disease.

KEY WORDS: Venous insufficiency; Meta-analysis; Edema; Leg ulcer; Micronized purified flavonoid fraction

Efficacy of dual therapy with Aspirin and rivaroxaban in symptomatic peripheral artery disease: the DOLOMITI experience

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ABSTRACT

BACKGROUND: Peripheral artery disease (PAD) increases cardiovascular (CV) mortality risk. Dual therapy (DT) with aspirin and rivaroxaban reduces major CV adverse events and limb ischemia. An analysis of patients at high CV risk undergoing DT was conducted in a real-world setting. Major adverse events and bleedings were collected, comparing results with COMPASS and XATOA trials.

METHODS: A retrospective, observational, monocentric analysis was performed. Major-adverse-cardiovascular-events (MACE) and major-adverse-limb-events (MALE) defined the effectiveness of DT, whereas safety was assessed recording major and minor bleedings, according to the ISTH criteria. Blood pressure (BP), low-density-lipoprotein (LDL) levels, Rutherford's classes, Ankle-Brachial-Index (ABI) and Toe-Brachial-Index (TBI) were also evaluated.

RESULTS: Fifty-seven patients were considered from 2021 to 2024. The average follow-up was 24.5 ± 10.1 months. The cumulative risk at 32 months of MACE, MALE and major or minor bleedings were 4.3%, 11% and 17.7% respectively. Comparing results with COMPASS and XATOA studies, there were more MALE, more minor bleedings and less MACE in DOLOMITI. There were more smokers, diabetics, hypertensives, patients with hypercholesterolemia, and patients with a history of limb revascularization in DOLOMITI. No differences in BP values were noticed at baseline and final valuations in DOLOMITI, whereas a reduction in LDL levels, an improvement in Rutherford's class, ABI and TBI resulted significant.

CONCLUSIONS: Low-dose rivaroxaban and acetylsalicylic acid have shown efficacy in reducing MACE in real-world contexts, with acceptable MALE events and bleeding risk. DT maximizes benefits by optimizing CV risk factors and improving PAD symptoms, but targeted studies are needed.

KEY WORDS: Dual anti-platelet therapy; Aspirin; Rivaroxaban; Peripheral arterial disease; Cardiovascular diseases

WUIPROJECT - MONTH 24

in honor of March
every



1959
of the month

an **OPEN TO EVERYONE** zoom @
10 am NYC time - **4 pm** Rome time – **10 pm** Bangkok time
to hear **YOUR vision, YOUR ideas, YOUR needs**
and to remember that

WUIP starts with double «U»



for YOUR topic reservation please write to president@uipmail.org

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>
Meeting ID: 889 1360 5824

Passcode: 916415

YOU



YOU

On behalf of all the World Union of International Phlebology (WUIP) 'd like to bring to all the healthcare professionals and the public attention the UIP March 24 initiative.

WUIP was founded on March 24, 1959 and in the following 64 years it has been surely succeeding in bringing the vein & lymphatic world together, counting now on 81 Scientific Societies from all continents.

In order to honor WUIP March 24, 1959 birthday, every 24 of the month at 4 pm Rome time, myself and eventually available Executive Committee members will have an open to everyone zoom call where all the vein-lymphatic world and the public are invited to join to present their vision, ideas and eventual needs.

This glimpse of the current Phlebo-Lymphology around the world will provide the opportunity to analyze how the UIP can serve at best its member societies, while advocating for both colleagues and patients independently by their belonging or not to the WUIP.

It's the WUIP hope that you will like to take part in this initiative, so to develop together "present actions" while looking together at the brightest future.

Pre-submitted topics for discussion will have precedence in the hour dedicated to this initiative: in case, feel free to send yours at president@uipmail.org.



WUIPROJECT - MONTH 24

The zoom call will be recorded so to allow everyone to enjoy the content on demand in case.

WUIP looks forward to listening to you at this zoom link:

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>

Meeting ID: 889 1360 5824 Passcode: 916415

Whatever need, do not hesitate to reach out to me (gnssrg@unife.it ; t. +393498012304)

Sergio Giancesini, MD PhD FACS
WUIP 2023-2027 President



W...U...I...Play Music Holiday Wishes

Teambuilding can happen in several different ways. A very pleasant and productive and meaningful one can be through music, as per the W..U..I..Play Music Band.

Colleagues from all around the world, separated by geography and holiday season, but still together promoting synergy. No great music skills, just a great desire of promoting teamwork and a message of social sharing that has been already transformed also in scientific collaborations born by the meeting of new colleagues thanks to the initiative.

Whoever wants to join the group is more than welcomed (president@uipmail.org): no need of music skills, only of moral ones.

Happy 2025 Holidays video available by a [CLICK HERE](#):



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sion Forums



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2. Access the Discussion Forum through the member portal.

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INVITATION FOR NEWSLETTER CONTENT

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The WUIP is delighted to offer all its members to report a comment in future editions of the WUIP newsletter. Topics can be related to evidence based science, phlebology advancement, problem solving in clinical practice. If you are interested in submitting a comment, send a 300 word summary to:

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