THE VEIN GLOSSARY

With index in:
- French
- German
- Italian
- Portuguese
- Russian
- Spanish
<table>
<thead>
<tr>
<th>CONTENTS</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRIBUTORS</td>
<td>1</td>
</tr>
<tr>
<td>ENDORSEMENTS</td>
<td>2</td>
</tr>
<tr>
<td>FOREWORD</td>
<td>3</td>
</tr>
<tr>
<td>PREFACE</td>
<td>5</td>
</tr>
<tr>
<td>INDEX</td>
<td>7</td>
</tr>
<tr>
<td>DEFINITIONS</td>
<td>17</td>
</tr>
<tr>
<td>TERMS IN OTHER LANGUAGES</td>
<td></td>
</tr>
<tr>
<td>- French</td>
<td>125</td>
</tr>
<tr>
<td>- German</td>
<td>145</td>
</tr>
<tr>
<td>- Italian</td>
<td>165</td>
</tr>
<tr>
<td>- Portuguese</td>
<td>185</td>
</tr>
<tr>
<td>- Russian</td>
<td>205</td>
</tr>
<tr>
<td>- Spanish</td>
<td>226</td>
</tr>
<tr>
<td>FIGURES <em>(Figures 1-21)</em></td>
<td>247</td>
</tr>
<tr>
<td>REFERENCES</td>
<td>255</td>
</tr>
</tbody>
</table>
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- Australia and New Zealand College of Phlebology
- European Venous Forum
- Indian Association of Phlebology
- International Union of Phlebology
- Latin American Venous Forum
Basic to the growth of knowledge about a given subject is the common understanding of the meaning of those words that express fundamentals and new developments in its sphere. In medicine, where the working field of knowledge involves the whole world, the need for accuracy and precision in its terminology is further compounded. The qualities needed to produce an authoritative compilation of this nature include the input of specialists from all aspects of the subject into a central site where this information is critically organized and vetted in one common language, and subsequently translated into other languages to assure an accurate understanding in disparate tongues.

This glossary is ideally organized to fulfill these requirements by its authors and editors who prove the expertise necessary for authoritative accuracy and the energy to influence contributors from around the world. The editors are world-traveling educators whose mission has been to understand venous practice in its many applications in foreign lands and to spread the rapid development of new “facts” from one source to another, always seeking the truly true “truth.” The task is huge and the details enormous, with the reward for this effort mainly in the satisfaction of having provided a service for a basic need for those who wish to understand the subject itself. This publication is an example of the support from industry to enable leading professionals to produce another valuable contribution to the practitioners who are treating patients.

A glossary provides the meaning of terms at a specific point in time. It can be expected that the understanding of disease and the effects of treatment will progress over time. There will be changes, even in the meaning of the terms, and so the glossary is the beginning of a dynamic process that will invite future reanalysis. Without the statement of the present day status, it is difficult to chronicle changes or to recognize the need to reexamine previously announced principles.

Over time, the understanding of venous physiology gains depth from explorations of cellular and molecular reactions. This understanding establishes the position and integrity (or lack thereof) of the venous valves, the subtle changes that activate the inflammatory cascade with and without the addition of events, such as local trauma or infection, the deleterious effect of venous reflux when combined with edema, the probable basic hereditary factors that render some individuals more susceptible to the development of venous dysfunction, and to name some of the complexities that need ongoing clarification. As the list of improvements becomes longer, the need to codify the terminology becomes greater, as this will be useful for achieving an understanding between authorities in different institutions and countries around the world.

This work provides a needed resource to improve the communication in phlebology and venous vascular surgery for physicians and researchers around the world. It is destined to become an important part of the library for all who are interested in understanding the emerging field of venous physiology and its multiple associations with basic science and clinical developments. We can thank Professors Perrin, Eklöf, and Maleti for donating their time, talent, and expertise to undertake the task of realizing this glossary.

Robert L. Kistner, MD
Why a glossary for phlebologists?

The short answer is that we lacked a glossary, which is something the phlebology community needs. In reality, the idea started in 2008 when, with the fruitful and essential collaboration of my great friend Bo Eklöf (Sweden), we created a transatlantic consensus document on chronic venous disorders named VEIN-TERM. This consensus document included thirty-three broadly used venous terms that are related to the management of chronic venous disorders of the lower extremities. In the literature on venous disease, there were discrepancies in the applicability and interpretation of these terms. The terms selected for inclusion in the VEIN-TERM consensus document were stratified into three different groups—clinical, physiological, and descriptive. To our knowledge, thirteen of the terms had never been defined previously in the venous literature.

My disciple in deep venous reconstructive surgery, Oscar Maleti (Italy), was enthusiastic about this very important project and was happy to join us in producing a glossary for phlebologists covering both acute and chronic venous disease. He agreed to revise the list of terms and their definitions with Bo and to be in charge of the illustrations and figures.

One of the difficulties of this project was deciding how to build the glossary. I first selected about 1000 terms to be defined, limiting the topic to anatomy, pathology, physiology, and pathophysiology affecting the upper and lower limbs, including the pelvis, in acute and chronic venous disease. The letters were divided into six groups, which each contained around 130 to 170 terms. For each group of terms, a team of four specialists was appointed to work on the definitions, and a leader was selected to head the group and to distribute the terms among the team members. Each group also contained at least one native English speaker.

Servier supported the entire project without intervening in the definitions provided by the teams of specialists. In addition, Servier also agreed to translate the English terms into six other languages—French, German, Italian, Portuguese, Russian, and Spanish. An electronic version will also be made available, and the glossary will be updated regularly.

I must also thank the Servier team for its help, particularly Françoise Pitsch, who, from the beginning, heartily supported the project, and Marie Claire Rettori, who organized the planning of the glossary with her usual efficiency and who facilitated my task. Furthermore, I am particularly happy and proud that Robert Kistner (Hawaii, USA) wrote the foreword for this glossary. I sincerely believe that the glossary will be very useful for all scientists involved in phlebology.

It has been a tremendous adventure and I would like to thank all the participants for their constant support and help.

Michel Perrin
INDEX

A:
A component of the CEAP classification
Aberdeen Varicose Vein Questionnaire
Aberdeen Varicose Vein Severity Score
Accessory basilic vein
Accessory cephalic vein
Aconitum
ACHENBACH’s syndrome
Aching
Active venous ulcer. See venous leg ulcer
Acute deep vein thrombosis. See deep vein thrombosis
ADAMS-Deweese clip or filter
Adhesive bandage
Adhesive embolization. See glue embolization or glue/adhesive ablation
Advanced clinical, etiological, anatomical, and pathophysiological (CEAP) classification
Aescin. See horse chestnut seed or root extract
Air-block technique
Air plethysmography
Air travel–related venous thromboembolism
AKönya Eliminator™ thrombectomy catheter
ALBANESE venous system
Alexandrite long-pulse laser
Alignment sign
Allograft valve
Alpha benzopyrone
Ambulatory phlebectomy. See ambulatory stab avulsion
Ambulatory stab avulsion
Ambulatory venous hypertension
Ambulatory venous pressure
American Venous Forum (AVF)
American Venous Forum / Society for Vascular Surgery guidelines
AMPLATZ inferior vena cava filter
Anatomic score. See venous segmental disease score
Anesthesia for interventional treatment of varicose veins
Aneurysm. See venous aneurysm
AngioJet™
Angioma
Ankle brachial index or ankle-brachial pressure index
Ankle flare. See corona phlebectatica paraplantaris
Ankle stiffness
Anterior accessory of the great saphenous vein. See anterior accessory saphenous vein
Anterior accessory saphenous vein
Anterior interosseous veins
Anterior labial veins
Anterior leg perforator veins
Anterior scrotal veins
Anterior thigh circumflex vein
Anterior thigh perforator veins
Anterior tibial veins
Anthocyanins. See also bioflavonoids
Antiphospholipid syndrome
Antithrombin (antithrombin III)
Antithrombotic agents

B:
Balloon-expanding stent
Bandage. See also compression bandages
Basic CEAP classification
Basilic vein
BEHÇET’s disease
Bioflavonoids
Biomatrix sclerofoam
Bird’s nest filter
Bivalirudin
Body mass index
Brachial veins
Brachiocephalic vein
BUDD-CHIARI syndrome
BUERGER’s disease

C:
C component of the CEAP classification
Coven patient
Calf muscle pump or calf pump
Calf pump output
Calf vein thrombosis, deep vein thrombosis isolated in the calf
Capillary malformation
CAPRINI score
Catheter-directed thrombolysis
Caval filters
Caval vein. See vena cava
Cavernous angioma
CEAP clinical classes. See clinical classes of the CEAP
Cephalic vein
Charing Cross Venous Ulcer Questionnaire
Chemical ablation
Chemical irritant (sclerosing agent) in sclerotherapy
Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire (CHIVA)
Chromated glycerin
Chronic cerebrospinal venous insufficiency
Chronic venous disease
Chronic venous disorders
Chronic venous insufficiency
ClariVein®
Cleaner rotational thrombectomy systems
Clinical classes of the CEAP
Clinical, Etiological, Anatomical, Physiopathological (CEAP) classification
Clinical scoring system, clinical severity score
ClosureFAST™ catheter
COCKETT syndrome. See also MAY-THURNER syndrome
COCKETT’s perforator vein ligation
Coiling for deep venous reflux
Coiling of ovarian or pelvic veins. See also pelvic vein embolization
Collateral vein
Common femoral vein
Common iliac vein
Communicating veins
Compartment syndrome in venous disease
Compression adherence
Compression bandages
Compression compliance
Compression device
Compression hosiery
Compression pressure
Compression stockings. See compression hosiery
Compression therapy
Compression therapy for venous ulcers
Computed tomography in venous disease
Computed tomography venography or spiral computed tomography venography
Concomitant superficial and deep venous thrombosis
Congenital vascular malformation
Congestion in the pelvic veins. See pelvic congestion syndrome
Conservative treatment in venous disease
Continuous-wave Doppler
Contrast-enhanced magnetic resonance venography
Corona phlebectatica. See corona phlebectatica paraplantaris
Corona phlebectatica paraplantaris
Coumarin
Cramp
Cranial extension of the small saphenous vein
Cross-pubic collateral veins
Cross-pubic prosthetic bypass
Crossectomy
Crossover bypass
Cryopreserved venous valves
Cryostripping
Cutaneous necrosis after sclerotherapy
Cyanoacrylate embolization. See glue embolization

D:
D-dimer
Dabigatran (dabigatran etexilate)
Dalteparin (dalteparin sodium)
Danaparoid (danaparoid sodium)
Deep circumflex iliac vein
Deep digital veins (plantar and dorsal)
Deep dorsal vein of the clitoris (female)
Deep dorsal vein of the penis (male)
Deep femoral vein
Deep metatarsal veins (plantar and dorsal)
Deep palmar venous arch
Deep vein
Deep vein reconstructive surgery
Deep vein thrombosis
Deep vein thrombosis prevention/prophylaxis
Deep veins of the clitoris or deep dorsal veins of the clitoris (female)
Deep veins of the penis (male)
Deep venous incompetence
Deep venous obstruction
Deep venous reflux
Deep venous surgery
Deep venous thrombosis. See deep vein thrombosis
Dermatitis (venous dermatitis, venous eczema)
Descending phlebography/venography
Descending theory in the pathogenesis of varicose veins
Detergent sclerosing agent for sclerotherapy
Digital subtraction phlebography
Diode laser
Diosmin
Direct perforating veins
Donning and doffing devices (for stockings)
Doppler ultrasound. See Duplex ultrasonography
Dorsal digital vein of the hand
Dorsal foot perforator (perforating) vein
Dorsal metacarpal veins
Dorsal venous arch of the foot
Dorsal venous network of the foot
Double ring radial fiber
Double syringe system
Duplex sonography. See Duplex ultrasonography
Duplex ultrasonography
Dynamic stiffness index
Dynamic venous pressure

E:
E component of the CEAP classification
Eccentric compression
Echosclerotherapy. See ultrasound-guided sclerotherapy
Economy class syndrome. See air travel–related venous thromboembolism
Eczema
Edema See venous edema
Edinburgh vein study
Edoxaban
Effort thrombosis. See PAGET-von SCHRÖTTER syndrome

Egyptian eye

EISEMANN and MALETTE valve-like structures. See autologous vein valve

Ejection fraction. See also ejection volume

Ejection volume

EKOS™ ultrasound-assisted thrombolysis system

Elastic compression bandages

Elastic compression stockings

Electrical calf muscle stimulation device

Embolectomy

Emboli

Embolism

Embolization

Endophlebectomy or endovenectomy

Endoscopic perforator surgery. See subfascial endoscopic perforator surgery

Endothermal treatment

Endovenous

Endovenous heat-induced thrombus. See KABNICK classification

Endovenous laser ablation of saphenous veins

Endovenous laser treatment. See endovenous laser ablation of saphenous veins

Endovenous procedure. See endovenous technique

Endovenous radiofrequency ablation

Endovenous steam ablation

Endovenous technique

Endovenous thermal ablation

Endovenous treatment

Enoxaparin

Escape point

Ethanolamine oleate

European Society for Vascular Surgery

European Society for Vascular Surgery guidelines for chronic venous disease

European Venous Forum

External iliac vein

External pudendal vein

External / extraluminal valvuloplasty

External venous banding / cuff

Extratruncular venous malformation

G:

G2 filter. See also GREENFIELD™ filter and GUNTHER™ tulip filter

Gadolinium-based venography

Gaiter zone

Gamma benzopyrone. See flavonoids

Gastrocnemius veins

GIACOMINI vein

GIANTURCO stent

GINSBERG scale

Glue embolization or glue/adhesive ablation

Glycerin

Gonadal vein embolization

Gonadal veins

Graduated elastic compression

Grape seed extract

Great saphenous vein

GREENFIELD™ filter. See also G2 filter and GUNTHER™ tulip filter

Groin varicose network. See also neovascularization

GULLMO’s syndrome. See strain obstruction syndrome

GUNTHER™ tulip filter. See also GREENFIELD™ filter and G2 filter

H:

HACH classification

Hamburg classification

Hand-held Doppler. See also continuous-wave Doppler

Heat or burning sensation

Heat-induced thrombosis. See endovenous heat-induced thrombus

Heaviness

Heavy leg. See heaviness

Hemangiectomy

Hemangioma

Hemoglobin-specific laser wavelengths

Heparin

Heparin-induced thrombocytopenia

HERMAN’s classification. See KISTNER’s classification.

High ligation

High ligation and division

High ligation and stripping

Hirudin

HOMANS sign

Homburg varicose vein severity score
Hook phlebectomy
Horse chestnut seed or root extract
Hybrid operative thrombectomy
Hydrostatic pressure
Hyperbaric oxygen treatment (or therapy) of venous ulcers

I:
Iliac vein compression
Iliac vein obstruction
Iliac vein occlusion
Iliac vein stenting
Iliocaval vein obstruction
Iliocaval vein occlusion
Iliofemoral deep venous thrombosis
Ilolumbar vein
Impedance plethysmography
Impression of swelling. See feeling of swelling
Incompetent calf perforator
Incompetent vein
Increased outflow resistance
Indirect perforating vein
Inelastic bandage
Inferior epigastric vein
Inferior gluteal veins
Inferior mesenteric vein
Inferior rectal veins
Inferior vena cava
Inferior vena cava filter
Inferior vena cava thrombosis
Infrapatellar perforator vein
Intense pulsed light
Interface pressure
Intergemellar vein or intergastrocnemial vein
Intermitent pneumatic compression
Internal iliac vein (hypogastric)
Internal jugular vein
Internal pudendal vein
Internal valvuloplasty
International Society for the Study of Vascular Anomalies (classification of vascular anomalies). See also Hamburg classification
International Union of Phlebology
Intersaphenous vein(s)
Interventional radiology (in phlebology)
Intra-arterial injection of sclerosant
Intramuscular pressure
Intraosseous hemangioma
Intraosseous venous malformation
Intravascular ultrasound in phlebology
Investigating venous disease evaluation and standardization of testing
Itching

J:
Jugular axillary vein bypass

K:
KABNICK classification. See also endovenous heat-induced thrombosis
KASABACH-MERRIT syndrome
KISTNER’s classification
KISTNER’s valvuloplasty
KISTNER’s vein transposition
KLIPPEL-TRENAUNAY syndrome
KTP laser

L:
Laser ablation. See endovenous laser ablation of saphenous veins
Laser Doppler flowmetry
Laser fibers
Laser generator
Lateral ankle perforator veins
Lateral brachial vein
Lateral circumflex femoral vein
Lateral foot perforator veins
Lateral gastrocnemius perforator vein
Lateral gastrocnemius veins
Lateral knee perforator vein
Lateral leg perforator vein
Lateral marginal vein of the foot (commonly replaced by a plexus)
Lateral sacral veins
Lateral thigh perforator vein
Lateral venous system. See ALBANESE venous system
Left renal vein compression. See nutcracker syndrome
Leg symptoms. See venous symptoms
Leg ulcer. See venous leg ulcer
Leiomyosarcoma
LEJARS’ sole
Lepirudin
Leukocyte activation
Lifestyle advice for chronic venous disorders
LINTON’s operation. See also subfascial endoscopic perforator surgery
Lipedema
Lipodermatosclerosis
Liquid sclerotherapy
Long-haul flight. See air travel–related venous thromboembolism
Long-pulse Alexandrite laser. See Alexandrite long-pulse laser
Low-molecular-weight heparin
Lower gluteal vein
Lumbar veins
Lymphatic malformation
Lysus infusion catheter system (EKOS®)

M:
MAFFucci syndrome
Maggot treatment (maggot debridement therapy)
Magnetic resonance venography
MALETI neovalve construction
Malleolar flare. See corona phlebectatica paraplantaris
MARJolin’s ulcer
MARTORELL’s ulcer
Mast cells in chronic venous disease
Matrix metalloproteinases
Matting
MAY-HUSNI bypass. See saphenopopliteal bypass
MAY-THURNER syndrome
Mechanical thrombectomy
Mechanochemical ablation
Medial ankle perforator vein. See posterior tibial perforator veins
Medial basilic vein
Medial cephalic vein
Medial circumflex femoral vein
Medial foot perforator veins
Medial gastrocnemius perforator veins
Medial gastrocnemius veins
Medial leg perforator veins
Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)
Medial marginal vein of the foot
Medial planter veins
Medial thigh inguinal perforator vein
Medial thigh perforator vein of the femoral canal
Median antebrachial vein
Median cephalic vein
Median cubital vein
Median sacral vein
Median vein of the elbow
Median vein of the forearm
Medical compression stockings
Mesenteric vein thrombosis
Metatarsal dorsal vein
Metatarsal plantar vein
Mickey Mouse sign
Microfoam sclerotherapy. See foam sclerotherapy
Micronized purified flavonoid fraction (MPFF)
Microphlebectomy. See ambulatory stab avulsion or MULLER’s ambulatory phlebectomy
Middle rectal veins
Midgluteal perforator vein
Milking test
Mixed arterial and venous ulcer
MOBIN-UDDIN umbrella
MONDOR’s disease
MULLER’s ambulatory phlebectomy
Multilayered compression bandages
Muscle cramp. See cramp
Muscular veins
Nonsaphenous vein
Nonthermal vein ablation
Nonthrombotic iliac vein lesion
Nonthrombotic vein primary obstruction. See nonthrombotic iliac vein lesion
North American subfascial endoscopic perforator surgery (SEPS) study
Nutcracker syndrome
O:
Oasis® catheter
Obturator veins
Oclusion plethysmography
Occupational leg swelling
OESCH stripper. See PIN stripper.
Open surgical reconstructions for nonmalignant occlusion of the vena cava
OptEase® filter
Oral anticoagulant therapy
Oral contraceptive-related thrombosis
Oral vitamin K antagonists
Osmotic sclerosing agent in sclerotherapy
Outflow fraction
Outflow obstruction
Ovarian vein
Ovarian vein embolization
Ovarian vein reflux or ovarian vein incompetence
Oxygen, hyperbaric treatment of venous ulcers
P:
P component of the CEAP classification
PAGET-von SCHRÖTTER syndrome
Pain. See aching
Pain score
PALMA operation. See femorofemoral saphenous vein transposition
Pampiniform plexus
Paraná maneuver
Parietal theory of varicose vein pathogenesis
PARKES WEBER syndrome
PAVCNIK valve
Peak reflux velocity
Pedal vein
Pelvic congestion syndrome
Pelvic varices
Pelvic varicosity. See pelvic varices
Pelvic vein embolization
Pelvic vein reflux
Pentoxifylline
Percutaneous ablation of perforating veins
Percutaneous balloon angioplasty or percutaneous venoplasty
Percutaneous laser therapy for telangiectasia and varicose veins
Percutaneous mechanical thrombectomy
Perforate INvaginate (PIN) stripper. See PIN stripper
Perforate INvaginate (PIN) stripping. See PIN stripping
Perforator vein
Perforator vein ablation or perforator ablation
N:
National Institute for health and Care Excellence (NICE).
See NICE guidelines for varicose vein treatment
ND-YAG laser (neodymium-doped yttrium aluminum garnet)
Neosaphenofemoral junction
Neovalve (autogenous)
Neovascularization
Nerve damage after stripping
Neuromuscular electric stimulator in chronic venous insufficiency
NICE guidelines for varicose vein treatment
Night cramp. See cramp
Nitinol stent

11
Perforator vein incompetence
Perforator vein ligation or perforator ligation
Perforator vein open surgery or perforator open surgery
Perfusion scintigraphy
Perineal varicosities
PERTHES test
Pharmacomechanical thrombolysis
Phenindione
Phlebectasia. See also venectasia and varice, varicose vein, and varicosity
Phlebectomy
Phlebectomy hook
Phlebectomy power device. See powered phlebectomy
Phlebitis
Phlebography. See venography
Phlebology
Phlebotomy (venesection, venotomy)
Phlebotonic drug. See venotonic drugs or venoactive drugs
Phlegmasia alba dolens or white leg
Phlegmasia cerulea dolens or painful blue leg
Photoplethysmography
Photothermolysis
Pigmentation or hyperpigmentation
PIN stripper
PIN stripping
Plantar venous subcutaneous network
Plethysmography. See also air plethysmography, photoplethysmography, and occlusion plethysmography
Polidocanol
Polytetrafluoroethylene patch for containing neovascularization
Popliteal fossa perforating vein or popliteal fossa perforator
Popliteal vein
Popliteal vein aneurysm
Popliteal vein entrapment
Popliteal vein external banding
Portland valve or PAVCNIK valve
Port-wine stain
Posterior accessory saphenous vein
Posterior labial veins (female)
Posterior leg lateral gastrocnemius perforator vein
Posterior leg medial gastrocnemius perforator vein
Posterior scrotal veins (male)
Posterior thigh circumflex vein
Posterior thigh perforator vein posterolateral
Posterior thigh perforator vein posteromedial
Posterior tibial perforator veins
Posterior tibial veins
Postthrombotic syndrome or postthrombotic disease
Postthrombotic varicose vein
Postural diameter change
Postural vasoconstriction reflex. See venaarterial reflex
Power pulse AngioJet™. See also AngioJet™
Powered phlebectomy
PREPIC study
PREPIC 2 study. See PREPIC study
Preesence of Varices After Interventional Treatment (PREVAIT)
Primary venous incompetence
Private venous circulation in the lower limb
Profunda femoral vein
Prophylactic caval filter
Prostacyclin
Prostatic venous plexus (male)
Prosthetic sleeve valvuloplasty
Prosthetic venous valve
Protein C deficiency
Protein S deficiency
Proximal thrombosis
Pruritis. See itching
PSATAKIS silastic sling procedure
Pubic vein
Pudendal perforator veins
Pudendal varicose veins
Pudendal (vesicoprostatic) plexus (male)
Pulmonary embolism or pulmonary thromboembolism
Pulse repetition frequency
Pulse-spray technique in thrombolysis. See also AngioJet™
Q:
Quality of life in venous disease
R:
Radial vein
Radiofrequency ablation
Radiofrequency generator
Radiofrequency-induced thermotherapy
RAJU’s valvuloplasty
Recirculation index
Recombinant tissue plasminogen activator
Recovery nitinol filter
Recurrent deep venous thrombosis
Recurrent varice or recurrent varicose vein
Recurrent varices after surgery (REVAS)
Refilling time
Reflux quantification
Refluxive valve. See valvular incompetence
Renal vein
Residual reflux
Residual venous circulation or residual varice
Residual volume fraction
Restless legs
Reticular vein
Retrievable cava filter
Reviparin (clivarine)
Risk factors for chronic venous disease. See risk factors for varicose veins and risk factors for chronic venous insufficiency (C3-C6)
Risk factors for chronic venous insufficiency (C3-C6)
Risk factors for deep venous thrombosis
Risk factors for deep venous thrombosis recurrence
Risk factors for postthrombotic syndrome
Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)
Risk factors for varicose veins
Rivaroxaban
ROKITANSKY stenosis
Round ligament varices
Sacral venous external rectal plexus
Sacral venous internal rectal plexus
Saphenofemoral junction
Saphenofemoral junction preterminal valve
Saphenofemoral junction terminal valve
Saphenopopliteal bypass
Saphenopopliteal junction
Saphenopopliteal junction preterminal valve
Saphenopopliteal junction terminal valve
Saphenous compartment See also Egyptian eye
Saphenous eye See Egyptian eye
Saphenous insufficiency
Saphenous recirculation
Saphenous reflux
Saphenous stripping
Saphenous veins
Sciatic vein
Sclerosant agent
Sclerosing foam
Sclerotherapy
Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)
Secondary patency
Secondary venous incompetence
Segmental reflux
Selective ablation of varices under local anesthesia
Self-expanding stent
SEPS. See subfascial endoscopic perforator surgery
Sequential pneumatic compression
SERVELLE-MARTORELL syndrome
Short-stretch bandage. See inelastic bandage
Skin hyperpigmentation
Small saphenous vein. See also cranial extension of the small saphenous vein
Sodium morrhuate
Sodium tetradeyl sulfate
SOTTIURAI’S valvuloplasty
Specific quality of life outcome response-venous
Spider vein. See telangiectasia
Spiral computed tomography angiography for pulmonary embolism
Stab avulsion or stab phlebectomy
Stasis dermatitis
Static stiffness index
Steam ablation
Strain-gauge plethysmography
Strain obstruction syndrome
Streptokinase
Strip test for valve competence. See milking test
STURGE-WEBER syndrome
Subclavian vein
Subdermal varices. See telangiectasia
Subfascial endoscopic perforator surgery
Superficial accessory of the great saphenous vein
Superficial accessory of the small saphenous vein
Superficial circumflex iliac vein
Superficial digital veins (dorsal and plantar) of the lower limb
Superficial digital veins (dorsal and plantar) of the upper limb
Superficial dorsal vein of the clitoris or penis
Superficial epigastric vein
Superficial external pudendal vein
Superficial metatarsal veins (dorsal and plantar)
Superficial palmar venous arch
Superficial perineal veins
Superficial thrombophlebitis. See superficial venous thrombophlebitis
Superficial vein
Superficial vein thrombosis
Superficial venous insufficiency
Superficial venous reflux or incompetence
Superficial venous thrombophlebitis. See superficial vein thrombosis
Superimposed leggings
Superior gluteal perforator vein
Superior gluteal veins
Superior mesenteric vein
Superior rectal vein
Superior vena cava
Superior vena cava syndrome
Suprapatellar perforator vein
Suprarectal veins
Suprarenal cava filter
Suprarenal inferior vena cava reconstruction
Suprarenal or adrenal veins
Surgical repair of deep venous valve incompetence
Surgical venous thrombectomy
Symptomatic varicose veins
Telangiectasia
Telangiectatic matting
Temporary arteriovenous fistula
Terminal valve. See saphenofemoral junction terminal valve and saphenopopliteal junction terminal valve
TESSARI technique
Testicular veins
Thigh compression
Thigh extension of the small saphenous vein
Thoracic outlet syndrome
Thread vein. See telangiectasia
Throbbing
Thrombolysis. See venous thrombolytic treatment
Thrombophilia
Thrombophlebitis
Tightness
Tilt table
Tilted inferior vena cava filter
 Tingling
Tinzaparin
Triptoe maneuver
Tissue inhibitors of metalloproteinases (TIMPs)
Tissue plasminogen activator
Titanium GREENFIELD™ filter
Tourniquet effect
Trabeculated vein
Transcommisural valvuloplasty
Transilluminated powered phlebectomy
Transmural valvuloplasty
TrapEase® vena cava filter
Trelis thrombectomy catheter
TRENDELENBURG position
TRENDELENBURG tests
TRIPATHI trap door valve repair
Trivex. See transilluminated powered phlebectomy
Trophic changes. See venous skin changes
Trophic disorders. See venous skin changes
Truncal venous ablation
Truncular malformation
Tumescent anesthesia
Tumescent solution

U:
Ulnar veins
Ultrasoundonography
Ultrasound
Ultrasound mapping
Ultrasound monitoring
Ultrasound-guided foam sclerotherapy
Ultrasound-guided puncture, cannulation
Ultrasound-guided sclerotherapy
Unfractionated heparin
UNNA boot
Upper extremity deep vein thrombosis
Ureteric vein reflux
Urethral bulb veins (male)
Urokinase
Uterine veins (female)
Uterine venous plexus (female)

V:
Vaginal veins (female)
Vaginal venous plexus (female)
VALSALVA maneuver
Valve. See venous valve
Valve agger. See valvular agger
Valve closure
Valve closure time
Valve comissure
Valve cornua
Valve cuspid or cusp
Valve leaflet. See valve cuspid or cusp
Valve opening
Valve reconstruction
Valve repair. See valve reconstruction
Valve sinus
Valve surgery
Valve transplantation
Valvular agger
Valvular function
Valvular incompetence
Valvular reflux
Valvuloplasty
Varice or varicose vein ablation. See vein ablation
Varice pathogenesis
Varice, varicose vein, varicosity
Varicocoele
Varicography
Varicosity. See varice, varicose vein, varicosity
Vein
Vein ablation
Vein atresia
Vein compression. See venous compression
Vein obstruction. See venous obstruction
Vein occlusion. See venous occlusion
Vein of the bulb of the penis (male)
Vein of the bulb of the vestibule (female)
Vein segment transplantation or vein segment transfer. See valve transplantation
Vein transposition. See KISTNER’s vein transposition
Vein wall remodeling
Vena cava
Venectasia. See also phlebectasia or varice, varicose vein, varicosity
Venepuncture or venipuncture
Venesuture
Venoactive drugs
Venoarterial flow index
Venoarterial reflex (Postural vasoconstriction reflex)
Venoarteriolar response
Venoconstriction
Venography. See also ascending phlebography/venography and descending phlebography/venography
Venoplasty
Venotomy (phlebotomy, venesection)
Venotonic drugs. See venoactive drugs
Venous ablation
Venous aneurysm
Venous back flow. See venous reflux
Venous balloon angioplasty
Venous bicuspid valve
Venous bioprosthetic valve
Venous blow down. See venous reflux
Venous blow out
Venous bypass
Venous calf pump function
Venous capacitance
Venous claudication
Venous clinical severity score (VCSS)
Venous compliance
Venous compressibility
Venous compression
Venous disability score
Venous disease
Venous disorders
Venous drainage index
Venous drugs
Venous echogenicity
Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)
Venous edema (phlebedema)
Venous embryology
Venous filling index (VFI)
Venous filling time (VFT)
Venous flow
Venous function
Venous gangrene
Venous hemodynamic changes in venous disease
Venous hemodynamic measurement
Venous hemodynamics
Venous hypertension. See also ambulatory venous hypertension
Venous hypoplasia
Venous incompetence
Venous insufficiency epidemiological and economic studies (VEINES)
Venous leg ulcer
Venous leg ulcer quality of life questionnaire
Venous ligament
Venous lumen
Venous malformation
Venous obliteration
Venous obstruction
Venous occlusion
Venous open surgery
Venous outflow resistance
Venous pharmacotherapy
Venous physiology
Venous plethysmography
Venous pressure
Venous pump function
Venous reconstructive surgery
Venous refill time. See refilling time
Venous reflux
Venous segment transfer. See valve transplantation
Venous segmental disease score
Venous severity scoring
Venous skin changes
Venous stenosis
Venous stent implantation
Venous stripping
Venous surgery
Venous symptoms
Venous system
Venous thermal ablation
Venous thoracic outlet syndrome. See also PAGET-von SCHÖTTER syndrome
Venous thrombectomy
Venous thromboembolism
Venous thrombolytic treatment
Venous thromboprophylaxis
Venous thrombosis
Venous thrombosis risk factors. See risk factors for deep venous thrombosis
Venous thrombus. See also venous thrombosis
Venous thrombus formation
Venous thrombus resolution
Venous valve
Ventilation–perfusion scintigraphy
VENTURI effect
VILLALTA score
VIRCHOW's triad

Vitamin K antagonist

W:
Wallstent™
Warfarin
WARREN operation. See femoropopliteal and femorocrural saphenous vein bypass
Waterfall drainage
Water-specific laser wavelengths
Weight transfer maneuvers
WELLS score
White atrophy. See atrophie blanche
WIDMER's classification
Working compression pressure
Working venous volume

X:
Xenograft valve
Ximelagatran
X-sizer™ helical thrombectomy catheter
X-vein

Y:
YAG laser. See ND-YAG laser

Z:
Z-stent™
Zinc paste impregnated stockinette
A component of the CEAP classification
Anatomy component of the CEAP (clinical, etiological, anatomical, and pathophysiological) classification of venous disorders. It defines which vein systems are involved: superficial, perforator, and/or deep veins. The denominator code is the first letter of each word in lower case (s, superficial veins; p, perforator veins; d, deep veins; and n, no anatomical disorder identified). Adapted from the CEAP classification.

Aberdeen Varicose Vein Questionnaire
A 13-question survey addressing all elements of varicose vein disease. Signs, symptoms, and social issues, including pain, ankle edema, ulcers, compression therapy use, and the effect of varicose veins on daily activities, are examined, in addition to the effect of varicose veins from a cosmetic standpoint. The questionnaire is scored from 0 (indicating no effect from the varicose veins on the patient) to 100 (indicating a severe effect).

Aberdeen Varicose Vein Severity Score
A tool frequently used at the clinic and in clinical trials to measure outcomes on clinical recurrence, postoperative complications, postoperative pain as measured using a visual analog scale, time to return to normal activities or work, and quality of life.

Accessory basilic vein
An infrequent anatomical variation located medial to the main basilic vein, which begins in the ulnar part of the dorsal venous network, ascending on the medial side of the brachial artery to the lower border of the teres major muscle, and continues onward to the axillary vein. The accessory basilic vein drains its blood content into the basilic vein.

Accessory cephalic vein
Arises either from a small tributary plexus on the back of the forearm or from the ulnar side of the dorsal venous network; it joins the cephalic vein below the elbow. In some cases, the accessory cephalic vein emerges from the cephalic vein above the wrist and joins it again higher up. A large oblique branch frequently connects the basilic and cephalic veins on the back of the forearm.

Acenocoumarol
A coumarin derivative that is used as an anticoagulant. Coumarin derivatives inhibit the reduction of vitamin K by the enzyme vitamin K reductase, which prevents carboxylation of the vitamin K–dependent clotting factors II, VII, X, and XI and interferes with coagulation. Hematocrit, hemoglobin, international normalized ratio, and liver function test results should be monitored. Patients on acenocoumarol are prohibited from giving blood.

ACHENBACH’s syndrome
A disease described by the German physician ACHENBACH in 1958. ACHENBACH’s syndrome is a rare clinical entity consisting of spontaneous paroxysmal bruising on the volar aspects of the fingers or hand, and it is associated with burning pain and swelling of the digits. It can also present as hematomas and purpuras on a finger or the palm, which is accompanied by abnormal sensations, such as pain, numbness, and coldness, without any apparent cause.
Aching
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Venous pain may be located along the course of a varicose vein (phlebalgia), but it is usually diffuse in the lower limb, mainly the calf. However, the pain may be related to other causes, such as the presence of painful lipodermatosclerosis, open ulcer, or venous claudication. Adapted from the SYM Vein consensus statement.

Active venous ulcer
See venous leg ulcer.

Acute deep vein thrombosis
See deep vein thrombosis.

ADAMS-DEWEESE clip or filter
Developed for the partial interruption of the inferior vena cava to prevent a pulmonary embolism. It was a retroperitoneal procedure, which has been replaced by the percutaneous insertion of inferior vena cava filters.

Adhesive bandage
1. Compression bandage with adhesive properties used for long-term compression therapy in venous diseases. 2. Sticking plaster used as a small medical dressing for injuries.

Adhesive embolization
See glue embolization or glue/adhesive ablation.

Advanced clinical, etiological, anatomical, and pathophysiological (CEAP) classification
Classification that groups similar types of patients for the study of both group and subgroup elements of C, E, A, and P. This complete classification, for example, enables any of the 18 named segments to be identified as the location of the venous disease. Consider a patient with pain, varicose veins, and lipodermatosclerosis, where the duplex scan confirms primary reflux of the great saphenous vein and incompetent perforators in the calf; the patient would be classified as: C\textsubscript{2,4b-S}, E\textsubscript{p}, A\textsubscript{s,p}, P\textsubscript{r2,3,18}. Adapted from the CEAP Classification.

Aescin
See horse chestnut seed or root extract.

Air-block technique
Technique where a small amount of air is injected to clear the blood vessel prior to injecting the sclerosing solution, which is used to shrink unwanted or malformed vessels; intended to minimize the risk of inadvertent intradermal injection.

Air plethysmography
A noninvasive diagnostic tool that quantifies globally the pathophysiological components of chronic venous disease, such as chronic obstruction, valvular reflux, calf muscle pump function, and venous hypertension. Air plethysmography variables include venous volume, venous filling index, residual volume fraction, and ejection fraction.
Air travel–related venous thromboembolism
Development of a venous thromboembolism as a direct consequence of air travel. The risk of venous thrombosis is approximately 2- to 4-fold higher after air travel, but the absolute risk is unknown. It is widely accepted that the risk of symptomatic venous thrombosis after air travel is moderately increased, and rises with increasing exposure and in high-risk groups.

AKónya Eliminator™ thrombectomy catheter
Non–motor-driven mechanical thrombectomy device intended for the mechanical declotting of synthetic dialysis grafts. The catheter has directional control for navigation through tortuous vessels. Manual rotation and manipulation in the axial direction are used to remove the thrombus.

ALBANÉSE venous system
While closely related to the saphenous system, the ALBANÉSE venous system is situated in the lateral semicircle of the lower limbs. It is likely to be a remnant of the marginal vein of the embryo. Also known as the lateral venous system or lateral subdermic venous system of the lower limb.

Alexandrite long-pulse laser
Used for treating telangiectasias. Recent studies have shown that it may be effective for treating larger vessels and congenital vascular malformations that are resistant to treatment with the pulsed dye laser.

Alignment sign
A duplex ultrasonography sign characterizing the anterior accessory saphenous vein; it is aligned with the femoral vein, while the great saphenous vein is located more medially.

Allograft valve
A venous valve graft from a donor of the same species as the recipient, but not genetically identical. Allograft venous valves may be used for the extended venous reflux that is responsible for severe chronic venous insufficiency.

Alpha benzopyrone
Oxygen-containing heterocyclic compound used in the preparation of drugs, especially anticoagulants, such as coumarins.

Ambulatory phlebectomy
See ambulatory stab avulsion.

Ambulatory stab avulsion
An outpatient procedure for the removal of varicose veins. Venous extraction is performed through small skin incisions or needle puncture.

Ambulatory venous hypertension
Deep vein obstruction and/or venous valve dysfunction reduces the ability of the muscle pumps to reduce venous pressure, leading to ambulatory venous hypertension in the deep or superficial veins.
Ambulatory venous pressure
A global index of venous function in the lower limb. It is dependent on venous reflux/obstruction, arterial inflow, and the compliance, ejection fraction, and volume of the calf venous pump. Ambulatory venous pressure is conventionally defined by two parameters: pressure drop with exercise and venous recovery time.

American Venous Forum (AVF)
An organization dedicated to improving the care of patients with venous and lymphatic diseases. As a multidisciplinary, international medical society, the American Venous Forum spearheads many innovative initiatives designed to further its goals and advance its mission.

American Venous Forum / Society for Vascular Surgery guidelines
A set of clinical practice guidelines developed by the American Venous Forum and The Society for Vascular Surgery for the care of patients with acute and chronic venous disease.

AMPLATZ inferior vena cava filter
A prophylactic retrievable inferior vena cava filter designed to be used as either a permanent indwelling or a short-term percutaneously removable filter to prevent an embolism.

Anatomic score
See venous segmental disease score.

Anesthesia for interventional treatment of varicose veins
General, local, tumescent, spinal, femoral-block anesthesia may be used when treating varicose veins, but almost all interventions can be performed under local tumescent anesthesia.

Aneurysm
See venous aneurysm.

AngioJet™
A pharmacomechanical, peripheral, thrombectomy device that employs the VENTURI-BERNOULLI effect using multiple high-pressure and high-velocity saline jets to create a localized low-pressure zone that results in a vacuum effect for the removal of a bulky thrombus.

Angioma
An old term for vascular malformation, often confused with hemangioma, which is a vascular tumor and not a vascular malformation. Hemangiomas typically do not require treatment because their growth is self-limited, but corticosteroids and interferon alpha-2a are effective treatments. Lymphangioma is one type of vascular malformation, typically characterized by thin-walled cysts that are usually benign, but which can impinge on critical organs, requiring surgical removal or other treatments.

Ankle brachial index or ankle-brachial pressure index
The ratio of the systolic blood pressure at the ankle to the pressure in the arm. To measure the ankle-brachial pressure index, a sphygmomanometer cuff is inflated around the lower leg above the ankle and the middle of the upper arm, respectively, and a continuous wave Doppler
probe is used to indicate flow reappearance at cuff release. Ankle-brachial pressure index is used as a measure of the adequacy of arterial perfusion at the ankle and the relative safety of applying compression treatment to the leg.

**Ankle flare**
*See* corona phlebectatica paraplantaris.

**Ankle stiffness**
Restricted ankle mobility impairs muscle pump function and venous return. Ankle stiffness, when present, increases the risk of developing chronic venous insufficiency, including venous ulcers in patients presenting with chronic venous disease.

**Anterior accessory of the great saphenous vein**
*See* anterior accessory saphenous vein.

**Anterior accessory saphenous vein**
An accessory vein of the proximal great saphenous vein that joins the great saphenous vein close to the saphenofemoral junction running on the anterior side of the thigh in its own saphenous compartment. Its tributary typically runs from the anterior thigh to the lateral knee. The anterior accessory saphenous vein can only be distinguished from the great saphenous vein by means of duplex ultrasonography (*See* alignment sign). The anterior accessory saphenous vein is a common pathway for recurrent reflux following treatment of the great saphenous vein. *See Figure 1.*

**Anterior interosseous veins**
Veins of the arm formed by the carpal venous network that drain into the ulnar veins.

**Anterior labial veins**
Any of the veins that connect the labia majora to the external pudendal veins draining the lips of the vulva.

**Anterior leg perforator veins**
Perforating veins of the leg that pierce the anterior tibial compartment connecting the anterior tributaries of the great saphenous vein to the anterior tibial veins.

**Anterior scrotal veins**
Tributaries of the femoral or external pudendal veins draining the anterior aspect of the scrotum and the skin and dartos fascia of the shaft and base of the penis.

**Anterior thigh circumflex vein**
Tributary of the great saphenous vein or the anterior accessory great saphenous vein that ascends obliquely in the anterior thigh. It may originate from the lateral venous system.

**Anterior thigh perforator veins**
Perforating veins that pierce the quadriceps femoris muscle and connect the superficial veins of the thigh with the femoral vein.
**Anterior tibial veins**
Deep veins of the leg, usually paired, which run parallel to the anterior tibial artery between the tibia and the fibula. They are formed by the venous network of veins on the dorsum of the foot. They merge with the tibial-peroneal trunk to form the popliteal vein. *See Figure 4.*

**Anthocyanins**
Members of the bioflavonoid phytochemicals, anthocyanins are present in large amounts in diets high in berries and grapes. They are well recognized because of their strong red to blue coloring. Due to their antioxidant properties, they have positive effects on health and are used as ingredients for several vеноactive drugs. *See also* bioflavonoids.

**Antiphospholipid syndrome**
Systemic autoimmune disorder characterized by venous or arterial thrombosis and/or pregnancy morbidity in the presence of persistent laboratory evidence of antiphospholipid antibodies. Antiphospholipid syndrome usually occurs as a primary condition, but it can occur in the presence of systemic lupus erythematosus or another systemic autoimmune disease.

**Antithrombin (antithrombin III)**
A glycoprotein produced by the liver that inactivates several serine proteases of the coagulation cascade, mainly the activated forms of factor X (Xa) and factor II (thrombin; IIa). Antithrombin deficiency, which may be congenital or acquired, results in an increased risk of venous thrombosis and, far less commonly, of arterial thrombosis.

**Antithrombotic agents**
Drugs that reduce the formation of a thrombus. The most important components of a thrombus are fibrin (most important component of clots in veins) and platelets. There are two classes of antithrombotic drugs: (i) anticoagulants, which slow down clotting by reducing fibrin formation and preventing clots from forming and growing; and (ii) antiplatelet agents, which prevent platelets from clumping and clots from forming and growing.

**Antithrombotic stockings**
Compression stockings that reduce the risk of venous thromboembolism by exerting graduated circumferential pressure. They increase blood flow velocity and promote venous return. In preventing venous distension, stockings are thought to reduce subendothelial tears and inhibit the activation of clotting factors. Stockings can be thigh- or knee-high, and they are the most widely used form of mechanical thromboprophylaxis.

**Antwerp clinical score for pulmonary embolism**
Clinical scoring system developed in Antwerp, Belgium, where a patient’s level of risk for a pulmonary embolism is graded. The clinical score is graded from 0.5 to 6 and is comprised of 14 criteria. Total scores <3, 3 to 6, and >6 correspond to low, moderate, and high probabilities, respectively, of a pulmonary embolism. The combination of clinical assessments, a D-dimer assay, and a compression ultrasound reduces the need for helical spiral computed tomography by 40% to 50%.
**Apixaban**
Direct, highly selective, orally active inhibitor of activated factor X (specifically factor Xa). Apixaban is approved by the Food and Drug Administration for the prevention and treatment of deep vein thrombosis and pulmonary embolism and for reducing the risk of stroke and systemic embolism in patients with nonvalvular atrial fibrillation.

**Argatroban**
Synthetic small molecule derived from L-arginine with specific antithrombotic activity. This direct thrombin inhibitor binds avidly and reversibly to the catalytic site of thrombin and does not require other cofactors to exert its antithrombotic action. It blocks both circulating and clot-bound thrombin. Argatroban is approved by the Federal Drug Administration for the prophylaxis or treatment of thrombosis in patients with heparin-induced thrombocytopenia.

**Arm/foot pressure differential**
Measurement that provides hemodynamic information on the severity of a venous obstruction and the adequacy of recanalization or of the collateral circulation. Venous pressures are recorded simultaneously in a vein in the foot and a vein in the hand with the patient at rest and during reactive hyperemia. These measurements are used to grade venous obstruction from 1 to 4 (RAJU’s grading). The grade is higher when the obstruction is more proximal. Not used in routine practice.

**Arrow-TREROTOLA™ percutaneous thrombectomy**
Percutaneous thrombectomy using a device that fragments the thrombus with a self-expanding 9-mm fragmentation cage. The indications approved by the Food and Drug Administration are thrombosed arteriovenous fistulae and dialysis grafts. Studies are ongoing to evaluate the Arrow-TREROTOLA™ percutaneous thrombectomy device in deep vein thrombosis.

**Arterial injection during sclerotherapy**
Accidental injection of a sclerosing drug into an artery. This complication is one of the most dreaded complications of sclerotherapy. Depending on the injected artery, damage ranges from mild skin necrosis to limb amputation. The development of ultrasound-guided sclerotherapy has made this complication exceptional.

**Arteriovenous fistula**
Generally represents one form of arteriovenous malformation with a direct connection between an artery and a vein with no nidus in between, such as a congenital vascular malformation. However, an acquired form of arteriovenous fistula can also develop, mostly following an injury. Large arteriovenous fistulae can cause complications, such as heart failure, thrombosis, or bleeding. An arteriovenous fistula can be surgically created for use in dialysis or as an adjunct to avoid thrombosis after thrombectomy or deep venous reconstruction.

**Arteriovenous malformation**
Congenital anomaly of the vascular system in which an anatomic defect results in shunting of arterial blood to the venous system. Embryological classification distinguishes extratruncular and truncular forms. The complexity of some arteriovenous malformations makes treatment challenging.
**Artificial venous valve**
Any venous valve substitute that is not a de novo autologous venous valve. Two general categories are considered: (i) nonautologous (cryopreserved or bioprosthetic valves); and (ii) autologous options. The search continues for an off-the-shelf venous valve that can be inserted percutaneously.

**Ascending phlebography/venography**
Method to assess the deep veins. The examination is performed by injecting contrast medium into a vein on the dorsum of the foot and directing it into the deep veins with an ankle tourniquet. Until recently, ascending phlebography was the method of choice, but the development of duplex ultrasonography makes this method unnecessary in most cases. *See Figures 14 and 15.*

**Ascending theory for varicose veins**
Progression of superficial venous reflux from the extrafascial veins to the saphenous veins. This concept is at variance with the traditional descending theory.

**Associated deep and superficial venous reflux**
This association is often identified in patients with a CEAP classification of C⁴ to C⁶. Correcting the superficial reflux is usually recommended as the first step of the treatment. Patients with proximal or segmental deep venous reflux of lower velocity are more likely to benefit from superficial ablative interventions than are patients with axial or higher velocity deep venous reflux.

**Atrophie blanche (white atrophy)**
Localized, often circular whitish and atrophic skin areas surrounded by dilated capillaries and sometimes hyperpigmentation. Atrophie blanche is not to be confused with healed ulcer scars, which may also exhibit atrophic skin with pigment changes, but are distinguishable from atrophie blanche by appearance and by a history of ulceration, and are excluded from this definition. Adapted from the CEAP classification.

**Autologous vein valve**
A venous valve that can be made from a length of vein using the EISEMAN and MALETTE technique. The basic technique involves an intussusception of the vein into itself with an appropriately constructed bicuspid valve.

**Autotransplantation of a competent valve into the popliteal vein**
*See* valve transplantation.

**Axial reflux**
Uninterrupted retrograde venous flow from the groin to the calf. Superficial reflux is confined to the superficial venous system, deep reflux is confined to the deep venous system, and combined reflux involves any combination of the three venous systems (superficial, deep, perforating). *See Figures 13 and 14.*
**Axial vein**
Primitive vein of the thigh present in the embryo between 7 and 13 postovulatory weeks. It is located along the sciatic nerve and may persist in adults in 12% of cases, producing an axiofemoral trunk, which may be the only axis of the thigh (single-vessel configuration) or may produce a duplicated femoral vein (two-vessel configuration).

**Axillary vein**
Deep vein of the upper limbs. It begins at the lower border of the teres major muscle where the paired brachial veins join the basilic vein, and it ends at the outer border of the first rib, becoming the subclavian vein after receiving the cephalic vein. It is a valved vein with the valves usually located proximal to the junction with the brachial and cephalic veins. See Figure 6.

**Axillary vein transfer or transplantation**
Insertion of a segment of a competent valved vein in the incompetent deep venous network to address deep venous reflux in patients with severe postthrombotic syndrome. The size of the axillary vein is best suited for transfer to the femoral vein, while the brachial vein can be used in a small-caliber popliteal vein. TAHERI and RAJU described the first axillary vein transplant.

**Axillo-subclavian vein thrombosis**
A deep vein thrombosis of the upper arm that involves both the subclavian and axillary veins. It can occur in people who repeatedly use their arm in a raised position, especially young athletes, and people whose work involves repetitive use of the upper arm, but also in people with a central venous catheter in the subclavian vein, pacemaker, defibrillator, or a thoracic outlet syndrome. Also called PAGET-von SCHRÖTTER syndrome.

**Azygos continuation of the inferior vena cava**
An uncommon vascular anomaly that leads to a dilated azygos vein. The hepatic segment of the inferior vena cava is absent and the hepatic veins join and drain directly into the right atrium. Its prevalence is estimated to be 1.5%. In most cases, it is found incidentally in asymptomatic patients. Also known as the absence of the hepatic segment of the inferior vena cava with azygos continuation.

**Azygos system**
Located in the mediastinum and comprised of two veins each coming from two abdominal roots along the vertebral column—the great azygos vein and the small azygos vein. The azygos system mainly drains the posterior wall of the thorax. It constitutes an anastomosis between the lower and upper caval systems.

**Azygos veins**
The great azygos vein on the right drains through an arch into the superior vena cava at the fourth thoracic vertebra. The small azygos vein, composed of two hemi-azygos veins, joins the great azygos at the sixth cervical vertebra. Both azygos veins are fed by the intercostal veins and are connected to the vertebral venous plexuses.
Balloon-expanding stent
Endovenous recanalization procedure for iliocaval venous occlusion. Balloon-expanding stents are mounted on a balloon and brought to the site through an introducer sheath. The balloon is inflated with the stent on it, then deflated and the stent stays in place at the diameter of the expanded balloon. A typical example of this device is the PALMAZ stent.

Bandage
Application of material wrapped around a limb. See also compression bandages.

Basic CEAP classification
Simplification of the advanced CEAP classification. The basic CEAP classification applies two simplifications: (i) the single highest descriptor can be used for the clinical classification, eg, a patient with varicose veins, swelling, and lipodermatosclerosis would be C\textsuperscript{4b} (as opposed to the advanced CEAP format of C\textsuperscript{2,3,4b,1}) and (ii) the anatomic segments are deleted, eg, if the advanced CEAP format is C\textsuperscript{2,4b-S, E, A, P\textsubscript{r2,3,18}}, this would then be simplified to C\textsuperscript{4b-S, E, A, P\textsubscript{r}}.

Basilic vein
Main superficial vein of the upper limb running along the medial aspect of the arm and perforating the fascia at the lower third to become a deep vein. See Figure 6.

BEHÇET’s disease
A rare, chronic, autoimmune, autoinflammatory disorder of unknown origin, named for the Turkish dermatologist Hulusi BEHÇET (1937). Its manifestations are thought to be caused by vasculitis resulting in damage to blood vessels throughout the body. Vascular manifestations include venous lesions (thrombosis), arterial lesions (pseudoaneurysms, occlusions/stenosis), or both venous thrombosis and arterial lesions. Also known as BEHÇET’s syndrome.

Bioflavonoids
Antioxidants found in many natural foods, especially fruits and vegetables, such as citrus fruits, strawberries, red bell peppers or sweet peppers, broccoli, Brussels sprouts, tropical fruits, etc. They have a positive effect on health and are used in venoactive drugs, such as diosmin and micronized purified flavonoid fraction. Also known as flavonoids or gamma-benzopyrones.

Biomatrix sclerofoam
Novel viscous microfoam that uses a biomatrix based on denatured autologous blood proteins. It is characterized by an in vitro half-life longer than 60 minutes and fast disintegration within flowing blood.

Bird’s nest filter
Permanent vena cava filter that was introduced in 1982 and revised in 1986. It consists of four long, stainless-steel wires that are preshaped with many nonmatching, short-radius bends. The wires are attached to two v-shaped struts that anchor the filter to the vena cava wall. It can be placed using the femoral or jugular routes. Advantages include lower rates of access site and inferior vena cava thrombosis. Disadvantages include difficult placement and incompatibility with magnetic resonance imaging.
**Bivalirudin**
Direct thrombin inhibitor frequently used for anticoagulation in invasive cardiology interventions, particularly percutaneous coronary interventions. It is characterized by a short half-life with low dependence on renal or liver function for removal. Direct thrombin inhibitors are the recommended alternative anticoagulant in patients with heparin-induced thrombocytopenia. Bivalirudin is approved for patients with heparin-induced thrombocytopenia who require coronary angioplasty.

**Body mass index**
Measurement of the body based on height and weight that applies to adult men and women: body mass divided by the square of the body height, expressed in units of kg/m². It categorizes a person as underweight (<18.5 kg/m²), normal weight (18.5 to 25 kg/m²), overweight (25 to 30 kg/m²), or obese (>30 kg/m²). It is postulated that obesity induces a physiologic obstruction to venous return and consequently increases venous hypertension in the lower limbs.

**Brachial veins**
Deep veins located in the area between the shoulder and the elbow that run alongside the brachial artery. *See Figures 6 and 7.*

**Brachiocephalic vein**
Formed by the union of the subclavian and internal jugular veins in the root of the neck. The left brachiocephalic vein is longer than the right (6 cm vs 2.5 cm). The two veins drain blood from the head, neck, and upper extremities and join behind the junction of the right border of the sternum and the right first costal cartilage to form the superior vena cava. *See Figure 7.*

**BUDD-CHIARI syndrome**
Liver disease caused by an obstruction of hepatic venous outflow (hepatic veins or terminal segment of the inferior vena cava). The main cause of the obstruction is a thrombosis (primary syndrome), but, although rare, it can also be caused by a tumor or another lesion or disease (secondary syndrome).

**BUERGER’s disease**
Inflammatory vasculopathy that is characterized by inflammatory endarteritis, which causes a prothrombotic state and subsequent thrombosis of small- and medium-sized arteries as well as veins of the upper and lower extremities (usually superficial vein thrombosis). It is strongly associated with heavy smoking. First reported by BUERGER in 1908. Also called thromboangiitis obliterans.

**C component of the CEAP classification**
Clinical component of the CEAP classification. It corresponds to seven clinical classes based upon objective signs of venous disorders: C₀ – no visible or palpable signs of venous disease; C₁ – telangiectasia or reticular veins; C₂ – varicose veins; C₃ – edema; C₄₀ – pigmentation or eczema; C₄₁ – lipodermatosclerosis or atrophic blanche; C₅ – healed venous ulcer; and C₆ – active venous ulcer. Each clinical class is further characterized by a subscript for the presence of symptoms (S, symptomatic) or absence of symptoms (A, asymptomatic). Adapted from the CEAP classification.
DEFINITIONS

**C₀₅ patient**
In the Vein Consult Program, C₀₅ patients represented 20% of the cohort. C₀₅ patients complain about venous symptoms, but do not have visible signs of venous disease. In this clinical class, two subgroups of patients can be identified: (i) those with a pathophysiological abnormality in an anatomical territory are classified as C₀₅, Eₚ or Eₛ, Aₛ and/or d and/or pₚ, Pₚ or Oₕ, and (ii) those with no abnormality on routine instrumental investigation are classified as C₀₅, Eₚ, Aₚ, Pₚ.

**Calf muscle pump or calf pump**
Action of the calf muscles (soleus and gastrocnemius, but mainly related to the medial gastrocnemius). When contracting, they compress the intramuscular vein and increase kinetic energy in the femoropopliteal segment, which is the motive force enhancing venous blood return from the lower extremities to the heart.

**Calf pump output**
Blood volume ejected from the calf veins per minute following calf pump contraction. Measured by air plethysmography.

**Calf vein thrombosis, deep vein thrombosis isolated in the calf**
Calf thrombosis, also called isolated distal deep venous thrombosis, is a deep venous thrombosis with no proximal component, located only below the knee and confined to the calf veins peroneal, posterior tibial, anterior tibial, and muscular veins, such as the gastrocnemius or soleal veins.

**Capillary malformation**
Usually referred to as port-wine stains or nevus flammeus. They are congenital malformations of the dermal capillary vessels, usually present at birth, whose size grows commensurate to the child. They are present for life, have no tendency to involution, and usually involve the head and the neck, but may occur anywhere on the body surface.

**CAPRINI score**
Risk assessment tool for the occurrence of venous thromboembolism among surgical patients. The CAPRINI score ranges from 0 to 5, with the following distribution: (i) 0 to 1 – low risk of venous thromboembolism; (ii) 2 – moderate risk of venous thromboembolism; (iii) 3 to 4 – high risk of venous thromboembolism; and (iv) ≥5 – highest risk of venous thromboembolism.

**Catheter-directed thrombolysis**
Fluoroscopically guided invasive procedure used in acute iliofemoral deep venous thrombosis, in which an infusion catheter is inserted directly into the venous thrombus, to deliver thrombolytic agents in situ. This technique has several advantages since it provides high intrathrombus concentrations of thrombolytic agent, which is therefore not lost via collaterals around the thrombosed vein.

**Caval filters**
Devices implanted in the inferior vena cava. They can be permanent or temporary and are designed to capture venous emboli, blocking their proximal progression into the heart or pulmonary circulation.
**Caval vein**
See vena cava.

**Cavernous angioma**
An incorrect term for a venous malformation that should not be used.

**CEAP classification**
See Clinical, Etiological, Anatomical, Pathophysiological (CEAP) classification.

**CEAP clinical classes**
See clinical classes of the CEAP.

**Cephalic vein**
Main superficial vein of the upper limb first running along the lateral aspect of the arm, then in the deltopectoral groove to join the subclavian vein. See Figure 6.

**Charing Cross Venous Ulcer Questionnaire**
A standardized questionnaire designed to assess quality of life, specifically in patients with venous leg ulceration. It comprises questions related to physical discomfort, effects on daily and social activities, emotional consequences, and perspectives regarding dressings and mobility. It provides a consistent measure of patient-reported quality of life in cases of venous ulcers, regardless of the treatment selected.

**Chemical ablation**
Endovenous injection of a chemical drug or solution to achieve endoluminal fibrosis and subsequent vein occlusion.

**Chemical irritant (sclerosing agent) in sclerotherapy**
Solution or drug used for sclerotherapy that is directly injected into the target vein, causing cell wall damage by caustic destruction of the endothelium, which leads to its occlusion and subsequent fibrosis.

**Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire (CHIVA). In English: ambulatory conservative hemodynamic management of varicose veins**
Surgical technique based on the principles of preserving the saphenous vein and venous drainage into the deep system. The goals of CHIVA are to decrease hydrostatic pressure in the saphenous veins and tributaries by ligations placed in specific areas of the superficial venous system and to maintain drainage of the superficial veins, usually via a reversed flow.

**Chromated glycerin**
Sclerosing agent that causes irreversible endothelial damage by contact. The principal component, glycerin, acts as a corrosive agent and destroys cell surface proteins by affecting chemical bonds.
**Chronic cerebrospinal venous insufficiency**
Hemodynamic condition in which cerebrospinal venous drainage is altered and inhibited. Outflow obstructions of the internal jugular veins, vertebral veins, and/or azygos vein and their tributaries result in stasis or reflux in these outflow veins and redirection of flow through vicarious circuits. Cerebral blood flow and brain perfusion are retarded and may result in cerebral atrophy, venous microhemorrhage, and cerebral hypertension. Its association with multiple sclerosis is controversial.

**Chronic venous disease**
Morphological and functional abnormalities of the venous system of long duration manifested by symptoms or signs or both indicating the need for investigation and/or care. Adapted from VEIN-TERM.

**Chronic venous disorders**
This term includes the full spectrum of morphological and functional abnormalities of the venous system. Adapted from VEIN-TERM.

**Chronic venous insufficiency**
A term reserved for advanced chronic venous disease (C\textsubscript{3}–C\textsubscript{6} classes of the CEAP classification) that is applied to functional abnormalities of the venous system producing edema, skin changes, or venous ulcers. Adapted from VEIN-TERM.

**ClariVein®**
Nonthermal, nontumescent, mechanochemical ablation device used for endovascular ablation of varicose veins. This occlusion catheter system combines mechanical damage to the endothelial cells of the vein wall and chemical injury with a liquid sclerosant that causes apoptosis and vein fibrosis. The combined effect results in endovenous occlusion of the target vessel and subsequent treatment of the venous superficial reflux.

**Cleaner rotational thrombectomy systems**
Percutaneous mechanical thrombectomy devices used in acute and subacute deep venous thrombosis. These devices operate by spinning a flexible S-shaped guide wire within the vessel to be treated, allowing the thrombus to be macerated, after which it is aspirated through an introducer sheath.

**Clinical classes of the CEAP**
There are 7 CEAP clinical classes (C\textsubscript{0}–C\textsubscript{6}) depending on the patient’s objective signs in the physical examination (see CEAP classification). Each clinical class is characterized by a subscript for the presence of symptoms (S, symptomatic) or absence of symptoms (A, asymptomatic). Adapted from the CEAP classification.

**Clinical, Etiological, Anatomical, Pathophysiological (CEAP) classification**
Classification is a comprehensive system for standardizing the reporting and treatment of the diverse manifestations of chronic venous disorders.
The fundamentals of the CEAP classification include:

**Clinical classification (C)**
- $C_0$: no visible or palpable signs of venous disease
- $C_1$: telangiectasias or reticular veins
- $C_2$: varicose veins
- $C_3$: edema
- $C_{4a}$: pigmentation and/or eczema
- $C_{4b}$: lipodermatosclerosis and/or atrophie blanche
- $C_5$: healed venous ulcer
- $C_6$: active venous ulcer
- $S$: symptomatic
- $A$: asymptomatic

**Etiological classification (E)**
- $E_c$: congenital
- $E_p$: primary
- $E_s$: secondary (postthrombotic)
- $E_n$: no venous etiology identified

**Anatomical classification (A)**
- $A_s$: superficial veins
- $A_p$: perforating veins
- $A_d$: deep veins
- $A_n$: no venous location identified

**Pathophysiological classification (P)**
- $P_r$: reflux
- $P_o$: obstruction
- $P_{r,o}$: reflux and obstruction
- $P_n$: no identifiable venous pathophysiology

Adapted from the CEAP classification

**Clinical scoring system, clinical severity score**
Standardized validated score used by the physician and based upon the presence or absence of specific clinical features, and whose result allows for risk assessment and classification of the patients in a study. The most frequently used clinical scoring system is the Venous Clinical Severity Score, revised in 2010 by VASQUEZ, which includes symptoms, signs, and compression therapy and uses a scale ranging from 0 to 30.

**ClosureFAST™ catheter**
Minimally invasive, endovenous, radiofrequency ablation device used for the treatment of venous incompetence. This device heats the vein wall to 120°C, causing denaturation of the collagen and subsequent contraction of the vessel, such that no blood can flow through it.
**COCKETT syndrome**
Results from chronic compression of the left common iliac vein by the right iliac artery. The syndrome most commonly presents as an acute deep venous thrombosis, although patients can also present with left lower extremity pain and swelling, or with chronic venous disease without thrombosis. Also known as iliac vein compression syndrome or a nonocclusive iliac vein lesion. *See also* MAY-THURNER syndrome.

**COCKETT's perforator vein ligation**
Surgical procedure consisting of extrafascial ligation of COCKETT's perforating veins, with concomitant excision of venous ulcers, if present.

**Coiling for deep venous reflux**
Selective coil embolization of refluxing deep veins (eg, ovarian or internal iliac tributaries) used to reroute the blood through competent venous trunks; it is usually used in pelvic congestion syndrome or for varices arising from a pelvic source.

**Coiling of ovarian or pelvic veins**
Occlusion of incompetent pelvic or ovarian veins by means of selective coil deployment in the target vessels, usually performed in pelvic congestion syndrome. *See also* pelvic vein embolization.

**Collateral vein**
Branch of a vein running near the main trunk that is an alternative vessel through which the blood flows in the case of main vessel occlusion.

**Common femoral vein**
Formed by the femoral and profund femoral veins, it accompanies the femoral artery in the femoral sheath, eventually ending at the inferior margin of the inguinal ligament, where it becomes the external iliac vein. The great saphenous vein ends in the common femoral vein. Adapted from the Nomenclature of the veins of the lower limbs. *See Figures 1, 4 and 5.*

**Common iliac vein**
Deep pelvic vein, formed by the internal and external iliac veins, that continues into the caval vein together with the contralateral common iliac vein. *See Figure 5.*

**Communicating veins**
Veins connecting two superficial or two deep veins without perforating the muscle fascia. *See Figure 3.*

**Compartment syndrome in venous disease**
Acute obstruction of the venous outflow from the leg in iliofemoral deep venous thrombosis, eg, in phlegmasia cerulea dolens, which leads to rapid elevation of compartment pressures in the calf and impaired arterial inflow. Chronic obstruction, eg, in popliteal entrapment syndrome, can result in intermittent pain and swelling.

**Compression adherence**
The extent to which a patient continues to use compression treatment in the way agreed with the physician. Using sensors for pressure or temperature in compression devices, the
patient’s wearing of compression hosiery can be monitored objectively and independently of the information given by the patient.

**Compression bandages**
Materials used to provide sustained compression, usually of the lower limbs, to reduce venous reflux and therefore to control and reduce edema.

**Compression compliance**
Consistency and accuracy with which a patient follows the regimen of compression treatment prescribed by a physician.

**Compression device**
Devices that exert external venous compression, either continuous or intermittent, to enhance venous return and therefore prevent venous thrombosis or improve symptoms related to venous reflux or obstruction.

**Compression hosiery**
Compression stockings, usually used in conditions involving lower limb veins or lymphatic insufficiency, such as varicose veins, lymphedema, and venous trophic changes, including ulcerations related to superficial and/or deep vein pathophysiological anomalies of primary or secondary etiology.

**Compression pressure**
Pressure exerted by compression devices during compression therapy.

**Compression stockings**
*See* compression hosiery.

**Compression therapy**
Treatment of venous or lymphatic disorders by means of continuous external compression exerted by bandages, stockings, or intermittent pneumatic compression.

**Compression therapy for venous ulcers**
Treatment of venous ulcers by means of continuous external compression exerted by bandages or stockings. Compression therapy is the mainstay of venous ulcer healing.

**Computed tomography in venous disease**
Computer-processed combinations of many x-ray images to produce cross-sectional (tomographic) images, which are used to identify venous obstruction or stenosis. It also enables optimal visualization of venous patency, obstructed segments, intraluminal thrombus, collateral venous pathways, and venous malformations.

**Computed tomography venography or spiral computed tomography venography**
Computed tomography venography imaging using spiral computed tomography to evaluate blood flow in peripheral veins and diagnose deep venous thrombosis. This technique provides volume data on the limbs, making a 3D reconstruction of the whole limb possible. Commonly, it uses a contrast agent and provides submillimeter venous resolution.
Concomitant superficial and deep venous thrombosis
Concomitant presence of deep venous thrombosis in a patient with acute superficial venous thrombosis. In most cases, deep venous thrombosis appears in the same limb, but, in 2% of cases, it develops in the contralateral limb. The association between these two phenomena may be explained by the presence of a state of hypercoagulability or by a proximal progression of the thrombus toward the deep venous system via the saphenofemoral, saphenopopliteal, or perforating veins.

Congenital vascular malformation
Malformed vessel that results from developmental arrest during embryogenesis and presents at birth as an inborn vascular defect, which continues to grow at a rate that is proportional to the growth rate of the body, regardless of its type.

Congestion in the pelvic veins
See pelvic congestion syndrome.

Conservative treatment in venous disease
Noninterventional treatment including physical measures, such as leg elevation or walking, compression therapy with bandages, hosiery, or pneumatic devices, and the use of venoactive drugs. Medical treatment may also include anticoagulants in thromboembolic venous diseases.

Continuous-wave Doppler
Technique for screening for venous flow abnormalities (reflux, continuous flow) in the superficial and deep venous system in which the transducer emits and receives the ultrasound beam continuously. Continuous-wave Doppler does not identify which vessel is assessed.

Contrast-enhanced magnetic resonance venography
Magnetic resonance imaging of the veins using magnetic resonance contrast media.

Corona phlebectatica
See corona phlebectatica paraplantaris.

Corona phlebectatica paraplantaris
Fan-shaped pattern of numerous small intradermal veins on the medial or lateral aspects of the ankle and foot. Adapted from the CEAP classification.

Coumarin
Organic compound (benzopyrone class) found in many plants with antiedematous properties. Used in some venoactive drugs. Not to be confused with Coumadin® (warfarin) or dicoumarol.

Cramp
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. A cramp is an involuntary painful contraction of the muscles. Venous cramps are usually located in the calf (gastrocnemius and soleus muscles) and occur mainly at night. Adapted from SYM Vein.
Cranial extension of the small saphenous vein
Runs in the groove between the biceps femoris and the semimembranosus muscles; it has been called the femoropopliteal vein. A cranial extension of the small saphenous vein that communicates with the great saphenous vein via the posterior thigh circumflex vein is often termed the GIACOMINI vein. Adapted from the Nomenclature of the veins of the lower limb. Synonyms are dorsal extension, thigh extension, or postaxial extension of the small saphenous vein.

Cross-pubic collateral veins
Collateral veins between the femoral veins, indicating an iliac vein obstruction on one side.

Cross-pubic prosthetic bypass
Prosthetic bypass between the left and right femoral veins or vice versa in patients with an iliac vein occlusion on one side.

Crossectomy
Ligation and resection of the termination of the great saphenous vein at its confluence with the common femoral vein, including ligation and division of all upper great saphenous vein tributaries. Adapted from VEIN-TERM.

Crossover bypass
Bypass between the femoral veins in patients with an iliac vein obstruction on one side, using prosthetic or venous material.

Cryopreserved venous valves
Cryopreserved allograft used to correct deep venous valve reflux.

Cryostripping
Stripping of the great saphenous vein using a cryocatheter, freezing the saphenous vein to the catheter and extracting it proximally.

Cutaneous necrosis after sclerotherapy
Skin necrosis is an adverse event after sclerotherapy caused by an intra-arterial injection, a paravenous injection of high-concentration sclerosant, or a high-volume injection in the veins.

Cyanoacrylate embolization
See glue embolization or glue/adhesive ablation.

D-dimer
A product of fibrin degradation that represents two cross-linked D fragments of the fibrin protein. It is released from fibrin by the action of plasmin. D-dimer is used as a highly sensitive biomarker for venous thromboembolism in outpatients with a low clinical probability of the disease. Increased D-dimer during anticoagulation treatment might be associated with deep venous thrombosis recurrence.
Dabigatran (dabigatran etexilate)
An oral anticoagulant that affects coagulation by direct, competitive, and reversible inhibition of the active site of thrombin. The drug is of proven efficacy in treating acute deep venous thrombosis and pulmonary embolism, in reducing the risk of venous thromboembolism recurrence, and in preventing venous thromboembolism following hip and knee replacement surgery. Dabigatran appears to be as effective as warfarin, but may be associated with a lower risk of life-threatening bleeding. No monitoring is necessary during treatment.

Dalteparin (dalteparin sodium)
A low-molecular-weight heparin that enhances the inhibitory effect of antithrombin on factor Xa and thrombin. The current indications are treatment of acute venous thromboembolism, prophylaxis of deep vein thrombosis in abdominal and orthopedic surgery, prophylaxis of deep vein thrombosis in immobilized or acutely ill patients, and extended treatment of venous thromboembolism in cancer.

Danaparoid (danaparoid sodium)
A mixture of glycosaminoglycans derived from porcine gut mucosa that has an antithrombotic effect through antithrombin-mediated inhibition of factor Xa and thrombin. The current indications include treatment of patients with heparin-induced thrombocytopenia and prevention of deep vein thrombosis in patients undergoing general or orthopedic surgery.

Deep circumflex iliac vein
Formed by the junction of the veins accompanying the deep iliac circumflex artery, this vein runs along the crest of the ilium on its medial aspect toward the anterior superior iliac spine, passes above and parallel to the inguinal ligament, and joins the external iliac vein about 2 cm above the inguinal ligament.

Deep digital veins (plantar and dorsal)
Starting from the venous plexus of the toes, the deep dorsal digital veins pass on the top of the foot, abundantly communicate with the plantar digital veins in the clefts between the toes, and unite to form the deep dorsal metatarsal veins. Deep plantar digital veins go along the sole of the foot and link to form the deep plantar metatarsal veins.

Deep dorsal vein of the clitoris (female)
Begins in the prepuce of the clitoris and approaches the root of the clitoris within its fibrous sheath, draining the corpora cavernosa and clitoral gland, and then exits between the arcuate pubic ligament and the inferior fascia of the urogenital diaphragm entering the vaginal plexus.

Deep dorsal vein of the penis (male)
Begins with 5 to 8 veins emerging from the glans penis to form a retrocoronal plexus. Then, it lies in the midline groove between two cavernous bodies under the deep fascia and superficial to the tunica albuginea where it receives blood from the emissary and circumflex veins. Passing underneath, the pubic symphysis drains into the prostatic plexus at the suspensory ligament vein.

Deep femoral vein
Vein that originates from the veins draining the muscles of the posterior and lateral thigh, ie, the deep femoral communicating veins; it is frequently formed by two or more branches. The vein above the confluence of the deep femoral vein and the femoral vein is named the common femoral vein. See also profunda femoral vein. See Figure 4.
Deep metatarsal veins (plantar and dorsal)
Deep dorsal metatarsal veins originate from the confluence of the deep dorsal digital veins, run backward in the metatarsal spaces under the deep fascia and unite to form the pedal vein, which continues to the anterior tibial veins. Deep plantar metatarsal veins lying under the deep fascia originate from the confluence of the deep plantar digital veins and unite to form the deep plantar venous arch, which drains into the posterior tibial veins.

Deep palmar venous arch
Formed by the interconnection of the deep palmar metacarpal veins, the deep palmar venous arch lies under the flexor tendons, which are parallel to the corresponding arteries. It gives rise to the ulnar and radial veins. See Figure 7.

Deep vein
Vein located deep in the upper and lower limbs beneath the muscle fascia along the arteries. See Figures 16-18.

Deep vein reconstructive surgery
Surgery to correct deep vein obstruction or reflux. Operative treatment of deep venous obstructions includes stenting, venous bypass, and prosthetic bypass. To correct the reflux, the most used operative procedures include valvuloplasty, vein transposition, venous valve transplantation, and neovalve construction.

Deep vein thrombosis
Characterized by the formation of thrombi, predominantly in the lower extremities. Based on the anatomical distribution, they may be classified as calf, femoropopliteal, or iliofemoral deep vein thrombi. Many risk factors have been identified. They may be inherited, transient and reversible, or acquired and nonreversible. Pulmonary embolism and postthrombotic syndrome are common complications.

Deep vein thrombosis prevention/prophylaxis
A set of measures to reduce the incidence of deep vein thrombosis. Primary prevention relates to first-time thrombosis; secondary prevention aims to prevent recurrence. Pharmacological prophylaxis (anticoagulation), mechanical prophylaxis (elastic compression, intermittent pneumatic compression), and early ambulation are of proven efficacy in selected individuals. Prevention may also include awareness-raising, education, and assessment of the individual risk of deep vein thrombosis.

Deep veins of the clitoris or deep dorsal veins of the clitoris (female)
An unpaired vein that drains blood from small, unnamed veins of the erectile tissue of the clitoris into the vesicle venous plexus. It passes anterior and superior to the urogenital diaphragm between the arcuate pubic ligament and the transverse ligament of the perineum to enter the pelvic cavity.

Deep veins of the penis (male)
All veins lying within and under the deep penile fascia (BUCK’s fascia). Venous drainage from the cavernous bodies of the penis is performed by small, unnamed venules that coalesce into the subtunical venous plexus and then drain dorsally through the emissary veins into the single, deep dorsal vein, ventrally into the paired bulbourethral vein, and laterally into the circumflex veins. The deep dorsal veins of the penis drain the blood into the prostatic plexus.
Deep venous incompetence
A condition in which the normal drainage function of the deep veins of the lower extremities is impaired, which causes deep vein reflux. Primary deep venous incompetence is caused by primary valve incompetence. Secondary deep venous incompetence is commonly caused by deep venous thrombosis, which impairs the valves. Congenital valve incompetence is related to valve agenesis or dysplasia.

Deep venous obstruction
A reduction in lumen patency that can be occlusive or nonocclusive and acute or chronic. When hemodynamically efficient, occlusion can usually provoke an increase in venous resistance for the outflow of the upper or lower extremities. Deep venous obstruction can be primary and secondary. The latter is related to poor recanalization after deep venous thrombosis in postthrombotic syndrome. Acute venous obstruction, usually occlusive, is commonly caused by acute deep vein thrombosis.

Deep venous reflux
A prolonged retrograde flow in any segment of the deep venous system of the lower extremities that is frequently detected by duplex ultrasonography after a provocative maneuver. Manual or automatic calf compression and the VALSALVA maneuver can be used to evaluate reflux. Currently, and until new data emerge, a retrograde flow >1000 ms may be used to define deep venous reflux. Extension of reflux is detailed in KISTNER’s classification.

Deep venous surgery
Technique designed to improve venous outflow obstruction and/or restore deep valvular competence to suppress reflux.

Deep venous thrombosis
See deep vein thrombosis.

Dermatitis (venous dermatitis, venous eczema)
A noninfectious inflammatory skin disease that is caused by impaired venous drainage. Venous dermatitis together with hyperpigmentation is classified as C4a according to the CEAP classification. The skin on the lower third of the legs is most commonly affected. Pruritus, pain, red skin discoloration, oozing, scaling, and crusting are common clinical signs and symptoms.

Descending phlebography/venography
A method for detecting reversed blood flow. This investigation is usually performed with the patient in a semi-erect position or in a supine position with an associated VALSALVA maneuver. Valvular incompetence is diagnosed by the downward movement of the contrast medium and the severity of reflux is classified according to KISTNER’s classification. See Figures 12 and 13.

Descending theory in the pathogenesis of varicose veins
A hypothesis to suggest the sequence of events leading to varicose veins. According to this hypothesis, the disease begins from the incompetence of the most proximal valve of the great or small saphenous vein. Emerging reflux leads to progressive dilatation and valvular incompetence of the saphenous vein in a distal direction. Varicose veins are epifascial venous tributaries that dilate due to impaired blood drainage into the refluxing saphenous vein.
**DEFINITIONS**

**Detergent sclerosing agent for sclerotherapy**
A substance that induces sclerosis of the vein wall by damaging the endothelium via an interaction with the lipid molecules in the cell membrane. The two most commonly used detergents are polidocanol and sodium tetradecyl sulfate; sodium morrhuate and ethanolamine oleate have also been used.

**Digital subtraction phlebography**
A type of phlebography where the final phlebogram is produced by subtracting a precontrast image or mask from the later images obtained with contrast medium injected into a vein. This technique may be used to improve the visualization of veins in a dense, soft-tissue environment.

**Diode laser**
Electrically pumped semiconductor laser in which the active laser medium is formed by a p-n junction of a semiconductor diode similar to that found in a light-emitting diode.

**Diosmin**
A naturally occurring flavonoid glycoside, which can be isolated from various plants or derived from the flavonoid hesperidin. Diosmin was first isolated in 1925 from common figwort (*Scrophularia nodosa*), and introduced as a therapeutic agent in 1969. As a flavonoid, diosmin also has anti-inflammatory, free radical–scavenging, and antimutagenic properties. Diosmin is a vascular-protecting agent used to treat chronic venous disease, hemorrhoids, and lymphedema.

**Direct perforating veins**
Veins that connect the main saphenous trunks (great saphenous vein and small saphenous vein) directly with the deep veins, ie, not through the tributaries (eg, DODD perforating vein).

**Donning and doffing devices (for stockings)**
Devices that can help the patient apply and remove compression stockings. If these devices make it easier to put on compression stockings, patient adherence to treatment may improve.

**Doppler ultrasound**
*See* Duplex ultrasonography.

**Dorsal digital vein of the hand**
Veins that run along the sides of the fingers and connect with each other through diagonal branches. The dorsal digital veins from the adjacent sides of the fingers form three dorsal metacarpal veins. The dorsal digital vein from the index finger’s radial side and the thumb’s dorsal digital veins join the radial venous network. The dorsal digital vein of the little finger’s ulnar side drains into the ulnar part of the network.

**Dorsal foot perforator (perforating) vein**
Perforating veins of the foot. Although the dorsal foot perforating veins belong to the great saphenous vein territory, the most important reentry perforators are located more proximally. The foot perforating veins are unique in that they direct flow toward the superficial veins, while all others direct flow to the deep system.
**Dorsal metacarpal veins**
Three dorsal digital veins that drain the dorsal digital veins servicing the fingers. These veins stop in a dorsal venous network across from the center of the metacarpus. Around the center of the forearm, the dorsal venous network often connects with the cephalic vein by way of a communicating branch. The dorsal metacarpal veins of the hand are a popular site for peripheral venous cannulation.

**Dorsal venous arch of the foot**
A superficial vein that receives blood from the dorsal metatarsal veins and connects the great and small saphenous vein. It is located at the point where the first and fifth digital dorsal veins run into the small and great saphenous veins. It is very superficial (limited to the fat layer), easily visible (esthetically demanding), and contiguous with the cutaneous nerves (easily encountered during foot phlebectomies).

**Dorsal venous network of the foot**
A superficial network of fine veins on the dorsum of the foot. For each toe, there are two dorsal and two ventral veins, which drain into the metatarsal veins, which drain into the dorsal vein loop. The medial extension of this dorsal vein loop forms the origin of the great saphenous vein, while the lateral extension forms the small saphenous vein.

**Double ring radial fiber**
Employs two concentric rings of laser energy emission at the tip of the laser fiber. Endovenous thermal ablation is expected to be more accurate because of better delivery of thermal energy.

**Double syringe system**
Two 2- to 10-mL syringes connected with a three-way stopcock. Air and liquid sclerosant are then mixed to form foam in approximately 20 passages between the syringes. The ratio of air and liquid can vary.

**Duplex sonography**
*See* Duplex ultrasonography.

**Duplex ultrasonography**
Incorporates gray-scale ultrasound (B-mode) to visualize the vessel and the surrounding structure combined with color Doppler or spectral Doppler to visualize the flow in veins or arteries. Both displays are present on the same screen (duplex) as overlapping images to facilitate interpretation. Duplex ultrasonography is commonly used to evaluate venous morphology and blood direction and velocity. Also known more commonly, but less correctly, as duplex ultrasound.

**Dynamic stiffness index**
Based on the dynamic pressure profile and defined as the increase in pressure when the variation in circumference equals 1 cm at a frequency of 1 Hz (mm Hg/cm measured at 1 Hz). The variation in the dynamic stiffness indices between medical elastic compression stockings of the same compression class suggests that a different therapeutic effectiveness may be expected.
DEFINITIONS

Dynamic venous pressure
Caused by propagation of the arterial pulsation from the pumping heart. Through precapillary arterial vasoconstriction, among other factors, most of the dynamic pressure is decreased to 12 to 18 mm Hg in the venous side of the capillary. The atrial pressure of 4 to 7 mm Hg causes the resulting dynamic gradient to facilitate return of blood in the supine position.

E component of the CEAP classification
Etiological component of the clinical etiological, anatomical and pathophysiological classification that provides a description of the etiology or cause of chronic venous disorders. It can be subdivided into congenital (E_c), primary (E_p), secondary (E_s), and no etiology identified (E_n). Adapted from the CEAP classification.

Eccentric compression
Application of different kinds of material, such as silicone gels, foam pads, and other materials on the skin, under bandages, elastic stockings, and tapes, which increase the local force of compression considerably by reducing the curve ray, according to LAPLACE’s Law. Eccentric compression can reduce postoperative inflammation and pain when used after stripping, phlebectomy, thermal ablation, and sclerotherapy.

Echosclerotherapy
See ultrasound-guided sclerotherapy.

Economy class syndrome
See air travel–related venous thromboembolism.

Eczema
Eczema or erythematous dermatitis that may progress to blistering, weeping, or scaling eruption of the skin of the leg. Most often near varicose veins, but may be located anywhere in the leg. Usually seen in uncontrolled chronic venous disease, but may reflect sensitization to local therapy. See also venous eczema. Adapted from the CEAP classification.

Edema
See venous edema.

Edinburgh vein study
A cross-sectional population study of a geographically and socioeconomically distributed random sample of >1500 people aged 18 to 64 years in Edinburgh, UK. It assessed self-reported lower limb symptoms, clinical examinations for signs of venous disease, and lower limb venous duplex ultrasonography. The cohort was then followed up after 13 years.

Edoxaban
An oral anticoagulant, which directly inhibits factor Xa. It is approved in the USA and the European Union for the prevention of stroke and systemic embolism in nonvalvular atrial fibrillation, and for treating deep venous thrombosis and pulmonary embolism.

Effort thrombosis
See PAGET-von SCHROTTER syndrome.
**Egyptian eye**
The appearance of the great saphenous vein in the saphenous compartment above the knee. The upper eyelid is the hyperechoic linear saphenous fascia, the hyperechoic lower eyelid arises from the muscle fascia in the groin, but not in the thigh, and the iris represents the great saphenous vein. Adapted from the Duplex Ultrasound Investigation of the Veins. See Figures 9 and 9 bis.

**EISEMANN and MALETTE valve-like structures**
*See* autologous vein valve.

**Ejection fraction**
The volume of blood ejected with one tiptoe maneuver divided by the venous volume. It quantifies venous calf pump function and is measured by air plethysmography. See also ejection volume.

**Ejection volume**
Measured by air plethysmography and known as expelled volume. It is the volume of blood ejected from the leg with one tiptoe maneuver. It quantifies venous calf pump function.

**EKOS™ ultrasound-assisted thrombolysis system**
A type of thrombolysis enhanced with ultrasound. The catheter is a multi-sidehole drug infusion catheter with a microsonic core wire containing ultrasound elements. The wire is placed inside the infusion catheter during ultrasound-assisted thrombolysis. The principle is that the ultrasound pulses improve penetrance of the thrombolytic agent into the thrombus.

**Elastic compression bandages**
Bandages used in association with short-stretch compression in multilayer bandages.

**Elastic compression stockings**
Knitted or woven garments applied like an item of clothing to provide compression to the limb in patients with chronic venous disorders.

**Electrical calf muscle stimulation device**
Application of current pulses using skin surface electrodes to produce an artificial muscle contraction in the associated muscle. This calf muscle activation produces venous flow similar to that of a voluntary muscle contraction. It has applications in preventing postoperative deep venous thrombosis and aiding ulcer healing.

**Embolectomy**
Emergency surgical removal of emboli that are blocking the blood circulation. It can be performed with a Fogarty balloon catheter (or an aspiration catheter). Surgical embolectomy of a massive pulmonary embolism has become a rare procedure, and thrombolytic therapy is the treatment of choice.

**Emboli**
Abnormal masses of material (solid, liquid, or gas) that are carried in the blood stream from one part of the circulation to another and cause an occlusion of a blood vessel resulting in ischemia.
**Embolism**
Occlusion of a blood vessel by an embolus that becomes stuck while traveling through the blood stream. For example, a pulmonary embolism occurs when a thrombus that forms in a deep vein travels to the pulmonary circulation.

**Embolization**
A minimally invasive surgical technique designed to prevent blood flow to an area of the body. It involves introducing a substance (eg, gelatin sponge, particulate agents, metal coils, liquid sclerosing agent, or glue) into a vessel in order to occlude it. Examples include ovarian vein embolization to treat pelvic congestion syndrome and testicular vein embolization to treat varicocele.

**Endophlebectomy or endovenectomy**
Surgical disobliteration of the endovenous scar tissue causing partial obstruction of postthrombotic veins. The dense fibrinous tissue and web-like synechiae are removed with a combination of blunt and sharp dissection and the venotomy is usually closed with a patch. Frequently performed in the common femoral vein in combination with iliac vein stenting in postthrombotic obstruction.

**Endoscopic perforator surgery**
See subfascial endoscopic perforator surgery.

**Endothermal treatment**
A specialized form of endovenous treatment that ablates via thermal damage to the vein wall.

**Endovenous**
Means within the vein; usually applied as a prefix to treatments, such as sclerotherapy, laser ablation, or radiofrequency ablation, which work by ablating and/or sclerosing.

**Endovenous heat-induced thrombus**
Formation of a thrombus in a deep vein after superficial venous thermal ablation, most commonly extending from the great saphenous vein into the common femoral vein. See KABNICK classification.

**Endovenous laser ablation of saphenous veins**
A minimally invasive ultrasound-guided technique where laser energy is used to close the vein. Different wavelengths from a laser fiber are used to target hemoglobin (lower) or water (higher) with little evidence that any wavelength is better than another. There are many different fiber designs with the majority being forward firing. A newer design is the radial fiber where the energy is directed outward from the tip directly around the vein wall.

**Endovenous laser treatment**
See endovenous laser ablation of saphenous veins.

**Endovenous procedure**
See endovenous technique.
**Endovenous radiofrequency ablation**
Ultrasound-guided, minimally invasive, vein treatment that applies radiofrequency energy to heat the vein, causing it to collapse and seal shut. The newest system delivers infrared energy to vein walls by directly heating a catheter tip with radiofrequency energy; the catheter and the vein wall need to be in direct contact. As the vein is denatured by heat, it contracts around the catheter.

**Endovenous steam ablation**
A thermal ablation technique that works by heating the vein with high-pressure steam pulses at 120°C. It utilizes around 2 mL of sterile water to treat one saphenous vein and is performed in a similar fashion to endovenous laser ablation.

**Endovenous technique**
A technique performed from within the vein.

**Endovenous thermal ablation**
Any endovenous technique employing heat to destroy the vein, including laser, radiofrequency, or steam. The goal is to deliver sufficient thermal energy to the wall of an incompetent vein segment to produce irreversible occlusion and fibrosis.

**Endovenous treatment**
A treatment performed within the vein.

**Enoxaparin**
A low-molecular-weight heparin anticoagulant used to treat and prevent deep venous thrombosis and pulmonary embolism. It is usually administered by subcutaneous injection. It has predictable pharmacokinetics and does not require monitoring.

**Escape point**
Feeding points of venous hypertension and junctions between the superficial and deep venous systems where abnormal reverse flow occurs. Identifying and treating these escape points and correcting the venous hemodynamics is the principle behind the CHIVA strategy.

**Ethanolamine oleate**
A sclerosing agent more commonly used to treat esophageal varices and hemorrhoids.

**European Society for Vascular Surgery**
A society that commissions and publishes guidelines, supports research, provides educational opportunities, organizes meetings and conferences, and sponsors the *European Journal of Vascular and Endovascular Surgery*. Membership is open to medical specialists involved in the care and treatment of patients suffering from vascular disease.

**European Society for Vascular Surgery guidelines for chronic venous disease**
DEFINITIONS

European Venous Forum
Society that was founded in Lyon, France in 2000 with the objective to develop education, scientific knowledge, research, and clinical expertise of the highest quality and establish standards in the field of venous disease. Membership is open to anyone who has an interest in the field.

External iliac vein
A continuation of the common femoral vein that is proximal to the inguinal ligament. It unites with the internal iliac vein to form the common iliac vein. Its tributaries include the deep circumflex iliac, inferior epigastric, and pubic veins. See Figure 5.

External pudendal vein
Deep and superficial veins of the pelvis that drain into the great saphenous vein. They receive the superficial dorsal veins of the penis or clitoris and the anterior scrotal or labial veins. See Figure 1.

External / extraluminal valvuloplasty
Interrupted or continuous nonabsorbable sutures that are placed to reduce the intercommissural angle; it can be either transmural or transcommissural. First described by Robert KISTNER.

External venous banding / cuff
Placing a synthetic or biologic sleeve or cuff around a vein to correct venous reflux. The purpose is to correct valvular incompetence by narrowing the valvular ring. This method is also used in addition to valve reconstruction procedures to prevent postoperative dilatation.

Extratruncular venous malformation
A venous malformation that originates early in embryonic life. It usually has less severe hemodynamic consequences than do truncular lesions. They retain the potential of angioblasts to grow and proliferate when stimulated and therefore may continue to grow and recur after therapeutic intervention.

Factor V Leiden mutation (heterozygous, homozygous)
A mutation in the gene for factor V, which increases the tendency to coagulate. This is called activated protein C resistance because the factor V Leiden mutation is more resistant to inactivation by protein C. Patients heterozygous for the factor V Leiden mutation have a moderately increased risk (x15 compared with no mutation) for thrombosis, and a homozygous mutation leads to a severely increased risk (x50) of thrombosis.

Factor VIII
When a blood vessel is damaged, factor VIII adheres to the collagen in the vessel wall and blood coagulation is activated. Activated factor VIII ensures adhesion of platelets and thus promotes clot formation. A shortage of factor VIII can lead to bleeding. An increased factor VIII concentration in the blood can be found in acute stress situations, such as infections and inflammation. Also known as von WILLEBRAND factor.

Fasciectomy in venous disease
Partial surgical removal of the muscular fascia of the lower leg on occasion; it may be used in association with debridement and excision of venous ulcers.
**Fasciotomy in venous disease**
An incision in the fascia surrounding the muscle compartment in the leg. The purpose is to decrease the intracompartmental pressure, which may be elevated due to trauma, surgery, ischemia, reperfusion, hematoma, or other causes (it is also called compartment syndrome). Fasciotomy can also be carried out as a treatment for chronic compartment syndrome, which is caused by venous hypertension.

**Fatigue**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Fatigue is slightly different from heaviness, and it is described by patients as a feeling of tiredness occurring after any kind of physical activity. It may also occur after standing still for a long time. Adapted from SYM Vein.

**Feeling of swelling**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. The feeling of swelling is different from the sign of edema, which can be measured. Even though patients feel that their legs are swollen, edema is not always present at clinical examination. Adapted from SYM Vein.

**Femoral vein**
Deep vein in the thigh that connects the popliteal vein with the common femoral vein. This vein may be duplicated and is anatomically situated next to the superficial femoral artery. The term superficial femoral vein is no longer used. See Figures 4 and 11.

**Femorofemoral saphenous vein transposition**
In the treatment of a postthrombotic obstruction of the iliac vein, the contralateral great saphenous vein is divided distally and transposed subcutaneously to the affected side (called the PALMA procedure). The operation can also be performed with a prosthetic bypass.

**Femoroiliacal bypass**
A surgical treatment for occlusive disease of the iliac vein, most commonly in postthrombotic syndrome. A bypass procedure can be performed using prosthetic or autologous material to connect the common femoral vein to the iliac or caval vein.

**Femoropopliteal and femorocrural saphenous vein bypass**
A surgical technique in which the great saphenous vein in situ is used as a conduit to bypass a postthrombotic occluded femoral vein (frequently named the MAY−HUSNI procedure, but WARREN was the first to perform this technique). The distal anastomosis is associated with the popliteal vein or, more seldomly, a tibial vein.

**Femoropopliteal deep vein thrombosis**
A deep vein thrombosis affecting the popliteal vein and extending into the femoral vein. The saphenofemoral junction, the common femoral vein, and iliac veins are free of thrombus. Veins in the calf may be involved. See also deep vein thrombosis.

**Fenprocoumon**
Marketed under the brand names Marcoumar, Marcumar, and Falithrom, this vitamin K antagonist, a derivative of coumarin, is a long-acting oral anticoagulant. It inhibits coagulation
by blocking synthesis of the coagulation factors II, VII, IX, and X. It is used in the prophylaxis and treatment of thromboembolic disorders.

**Fiber**

*See* laser fibers.

**Fibrin**

Called Factor I, fibrin is a protein involved in blood clotting that is formed by the action of the protease thrombin on fibrinogen, which causes fibrin to polymerize. Polymerized fibrin together with platelets forms a hemostatic plug or clot over a wound site. Excessive generation of fibrin due to activation of the coagulation cascade leads to thrombosis. Ineffective generation or premature lysis of fibrin increases the likelihood of hemorrhage.

**Fibrinolysis**

There are two types of fibrinolysis. Primary fibrinolysis is a normal clot-dissolving process that occurs in the body. Secondary fibrinolysis means clot dissolution carried out as a medical treatment or resulting from a disorder or other causes. In fibrinolysis, a fibrin clot is dissolved by the active enzyme, plasmin, which cuts the fibrin mesh at various places.

**Fibrinolytic therapy**

An example of secondary fibrinolysis. Specific therapeutic drugs, such as tissue plasminogen activator (t-PA), recombinant tissue plasminogen activator (rt-PA), urokinase, and streptokinase, are used. These drugs convert plasminogen to plasmin, the active enzyme, allowing fibrinolysis to occur. They can be administered parenterally (systemic fibrinolysis) or injected into a thrombus (catheter-directed thrombolysis). Systemic t-PA is still used for pulmonary embolism and stroke due to embolization or thrombosis.

**Fibular or peroneal veins**

Veins forming part of the deep venous system in the leg. They are duplicated and accompanied by the fibular artery and nerve. Anatomically, the fibular or peroneal veins are situated in the lateral part of the calf behind the fibula and are surrounded by the peroneus brevis and the flexor hallucis longus muscles. They receive the huge lateral veins of the soleus muscle. *See Figure 4.*

**Filter retrieval**

Removal of a cava filter, once the risk of a clot traveling to the lung has passed. Filter removal eliminates any long-term risks from having the filter in place, such as vein perforation, migration, fracture, and filter thrombosis. Filter retrieval is mostly done via jugular access, depending on the filter type.

**First rib resection**

A surgical intervention used in the treatment of the thoracic outlet syndrome. The subclavian vein or artery can become compressed between the scalene muscles, the first rib, and the clavicle. An aberrant cervical rib may also be the cause of compression. One of the possible surgical release options is the removal of the first rib, which can be performed using a supraclavicular approach or transaxillary access.
**Flavonoids**

Flavonoids (from the Latin word flavus meaning yellow, one of their colors in nature) are a class of secondary metabolites. They are found in almost all fruits and vegetables. Flavonoids are the largest group of phytonutrients, with more than 6000 types. They are powerful antioxidants with anti-inflammatory and immune system benefits. Flavonoids are used in the treatment of chronic venous disorders, including venous ulcers.

**Flush ligation**

Flush ligation means tying up the great saphenous vein flush to its junction with the common femoral vein; this may be part of a surgical treatment for varicose disease. The aim is to avoid having a saphenous stump on the femoral vein, which can be a potential site for thrombus formation. Leaving a stump after ligation of the saphenous vein may also promote subsequent recurrence of varicose veins.

**Foam sclerotherapy**

Sclerotherapy is a treatment for varicose veins or spider veins that involves injecting a solution called a sclerosant. This product chemically destroys the endothelial layer of the vein and induces occlusion of the treated vein. When this sclerosant is injected as a foam suspension, it is called foam sclerotherapy. This increases the viscosity of the injected product so it remains in contact with the inner vein wall for longer. *See also* sclerotherapy.

**Fondaparinux**

An anticoagulant that is related to low-molecular-weight heparins. It is administered by subcutaneous injection. Fondaparinux binds to antithrombin III and therefore neutralizes factor Xa, which prevents thrombus formation. Coagulation tests are not influenced by the use of fondaparinux. The drug is used in the treatment and prevention of thromboembolic diseases, such as deep venous thrombosis, pulmonary embolism, unstable angina pectoris, and myocardial infarction.

**Foot muscle pump**

Also known as the venous foot pump, the foot muscle pump is located in the medial, but mostly, lateral plantar veins, and is often plexus shaped. The plantar veins are emptied on weight bearing and compressed by the plantar aponeurosis during step impulsion. This pump, together with the calf muscle pump, is very important in lower limb venous hemodynamics.

**Foot volumetry**

First described by Olav THULESIUS (Sweden). Foot volumetry provides a simple method of assessing venous function in both the thigh and the calf. An open, water-filled plethysmograph is used to measure changes in foot volume due to translocation of blood from the periphery during exercise or elevation. Volume reduction during exercise and refilling rate are important parameters for the evaluation of venous valve function and therefore venous insufficiency.

**Free-floating thrombus**

In patients with deep venous thrombosis, the presence of an unattached or free-floating thrombus at the proximal edge of the thrombus may be noted, which is an indication for immediate anticoagulation. If the top of the thrombus involves the iliac vein or inferior vena cava, early thrombus removal should be considered. A free-floating thrombus can also be an indication for the placement of an inferior vena cava filter.
French maritime pine bark
The bark of the French maritime pine (*Pinus pinaster*) yields a standardized extract composed of a mixture of flavonoids, proanthocyanins, and phenolic acids. Marketed as Pycnogenol®, this extract has been reported to have cardiovascular benefits, such as a vasorelaxant activity, angiotensin-converting enzyme inhibition, and an ability to enhance the microcirculation by increasing capillary permeability. Pycnogenol® can also improve venous symptoms and edema.

G2 filter
Retrievable inferior vena cava filter. This small, metal device is designed to stop a blood clot from traveling to the lungs, which is known as a pulmonary embolism. This filter is intended to be used in an inferior vena cava with a diameter ≤28 mm. It is designed as a permanent filter, but can be removed after implantation. See also GREENFIELD™ filter and GUNTER™ tulip filter.

Gadolinium-based venography
Gadolinium is a rare earth element that is very useful in magnetic resonance imaging of blood vessels. In magnetic resonance venography (MRV), a bolus of gadolinium-based contrast agent is injected directly into a vein while continuously scanning the area of interest. This procedure provides 3D, contrast-enhanced MRV reconstructions of the venous system.

Gaiter zone
The skin just proximal to the medial malleolus, known as the “gaiter zone”, is the usual site for venous ulceration, whereas the skin and dorsum of the foot are generally unaffected. Ulcers often found at these sites are so-called venous stasis ulcers and are caused by venous hypertension.

Gamma benzopyrone
See flavonoids.

Gastrocnemius veins
Muscular sural veins classified as gastrocnemius veins that include the medial gastrocnemius vein and lateral gastrocnemius vein. Gastrocnemius veins draining the two heads of the gastrocnemius muscle usually end in the popliteal vein, distal to the confluence of the small saphenous vein with the popliteal trunk. They may join the popliteal vein directly or merge with the small saphenous to form a common trunk that ends in the popliteal vein.

GIACOMINI vein
The GIACOMINI vein, also called the intersaphenous vein, is a communicating vein between the great saphenous vein and the small saphenous vein. It is named after the Italian anatomist Carlo GIACOMINI (1840-1898). It is located underneath the superficial fascia and is found in over two-thirds of the examined limbs.

GIANTURCO stent
A self-expandable Z-stent that can be used to treat venous obstruction. It is the most commonly used stent in the treatment of superior or inferior vena cava syndrome. The Z-stent has a high radial force, making it particularly well suited for caval strictures. The GIANTURCO stent also has anchoring hooks to prevent migration.
**GINSBERG scale**
Clinical scale to classify patients after a deep venous thrombosis as having or not having a postthrombotic syndrome. Postthrombotic syndrome is defined by the presence of daily leg pain and swelling, occurring 6 months or more after deep venous thrombosis, and it is made worse by standing/walking and relieved by rest/leg elevation. In contrast to the VILLALTA scale, the Ginsberg scale seems to identify patients with more severe disease.

**Glue embolization or glue/adhesive ablation**
By injecting an embolic agent into a vein or artery, the vessel can be occluded. One of the most common liquid embolic agents is butyl cyanoacrylate, which polymerizes immediately upon contact with ions and undergoes an exothermic reaction, which destroys the vessel wall. Recently, glues have been used for ablation of incompetent saphenous veins. The advantage of glue embolization is that tumescent local anesthesia and postoperative compression can be avoided.

**Glycerin**
Glycerin or glycerol is a simple polyol compound. It is a colorless, odorless, viscous liquid that is sweet tasting and nontoxic. It is widely used in the food industry as a sweetener and humectant and in pharmaceutical formulations. Glycerin can also be used as a sclerosant. It is classified as an irritant/corrosive agent and acts by a variety of mechanisms to destroy cell membranes.

**Gonadal vein embolization**
This is embolization of the ovarian vein in female patients and the spermatic vein in male patients. Embolization involves the selective occlusion of blood vessels. The target vein is selectively catheterized and the embolization agent, usually stainless steel or platinum coils (solid embolic agent) and sclerosant, is introduced through the vascular catheter into the distal vein, resulting in its occlusion.

**Gonadal veins**
The gonadal veins are paired structures that drain the gonads. In males the vein is called the testicular vein or spermatic vein and in females it is called the ovarian vein. The gonadal veins ascend with the gonadal arteries in the abdomen along the psoas muscle anterior to the ureters. In female patients, incompetent ovarian veins may cause pelvic congestion syndrome. In male patients, they may cause a varicocele.

**Graduated elastic compression**
Graduated compression stockings are used in the treatment of venous disorders. They exert the greatest degree of compression at the ankle, with a level of compression that decreases gradually up the garment. The lowest pressure is therefore exerted proximally and stockings are classified according to the pressure at the ankle.

**Grape seed extract**
Grapes (*Vitis vinifera*) have been lauded for their medicinal and nutritional value for thousands of years. Grape leaves were used to stop bleeding, inflammation, and pain, due, for example, to hemorrhoids. Vitamin E, flavonoids, linoleic acid, and oligomeric proanthocyanidin complexes are highly concentrated in grape seeds. They have antioxidant effects. Grape seed extract, especially oligomeric proanthocyanidin complexes, can reduce symptoms of chronic venous disorders. They also seem to reduce edema.
DEFINITIONS

Great saphenous vein
A superficial venous trunk originating from the medial marginal vein of the foot. Running vertically along the medial aspect of the leg, knee, and thigh and terminating in the femoral vein at the groin level with the saphenofemoral junction. By means of duplex ultrasonography, the great saphenous vein can be distinguished from the anterior accessory saphenous vein by alignment sign and from other tributaries located just below the skin, as the great saphenous vein is located in between two fascia layers. See Figures 1, 2, 9, and 9b.

GREENFIELD™ filter
An inferior vena cava filter. This medical device can be implanted percutaneously into the inferior vena cava to prevent life-threatening pulmonary emboli. The device resembles a metal cage. The filters are used in patients at high risk of developing clinically significant pulmonary emboli, which cannot be adequately anticoagulated. See also G2 filter and GUNTER™ tulip filter.

Groin varicose network
The presence of multiple, new, small veins in anatomical proximity to a previous venous intervention, and it is often found at the saphenofemoral and saphenopopliteal junction after previous high ligation. It is a complex network of tortuous vessels reconnecting the cut ends of the saphenous vein and the tributaries. Another theory argues that these networks cross the lymph nodes and rather than being new vessels are likely the result of remodeling of preexisting veins. This neovascularization is a major cause of recurrence. See also neovascularization.

GULLMO’s syndrome
See strain obstruction syndrome.

GUNTER™ tulip filter
A retrievable inferior vena cava filter. See also GREENFIELD™ filter and G2 filter.

HACH classification
A classification according to the extension of great saphenous vein reflux from the junction and distally in four stages: refluxing only at the junction region, in the thigh, further below the knee, and reflux to the ankle. The classification is not useful in daily practice.

Hamburg classification
A classification of congenital vascular malformations in six predominant types based on anatomical, morphological, pathological, and embryological criteria. The classes include: (i) arterial defects; (ii) venous defects; (iii) arteriovenous shunting defects; (iv) lymphatic defects; (v) capillary defects; and (vi) combined vascular defects. The defects are subclassified in a truncal form with aplasia/hypoplasia/hyperplasia, which causes obstruction or dilatation, and an extratruncal form in diffuse or localized infiltration.

Hand-held Doppler
A device utilizing Doppler ultrasound that permits insonation of the blood to determine flow velocity in the veins. The method has been mainly used for superficial veins. However, the method does not identify the specific vein where the flow is measured. See also continuous-wave Doppler.
**Heat or burning sensation**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. A burning sensation is usually described as diffuse heat in the legs, but sometimes as a burning comparable to the feeling perceived when in contact with a hot object. Adapted from SYM Vein.

**Heat-induced thrombosis**
See endovenous heat-induced thrombosis.

**Heaviness**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Patients describe this symptom as heavy legs occurring after a prolonged time in a standing or seated position or when changing from lying to standing. Adapted from the SYM Vein.

**Heavy leg**
See heaviness.

**Hemangioendothelioma**
Describes a group of rare vascular neoplasms that may be considered benign as well as malignant. The tumors can appear in infancy and adulthood. Treatment is dependent on tumor involvement and metastases. Treatment options are surgical resection, radiotherapy, and chemotherapy.

**Hemangioma**
A vascular tumor originating from endothelial cells. The infantile type is the most common vascular tumor of infancy. Visible just after birth, it grows rapidly thereafter for 3 to 6 months. Hemangioma is diagnosed in 2% to 3% of newborns and in 10% of 1-year-old children. It occurs more frequently in females (two-thirds of cases). The involution phase is characteristic and total disappearance is seen by school age or near puberty in the vast majority of patients. Half of the lesions are present on the head and neck.

**Hemoglobin-specific laser wavelengths**
Wavelengths of less than 1000 nm that are absorbed predominantly by hemoglobin (target chromophore) and water, resulting in thermal damage and the release of steam bubbles, which cause denaturation with fibrotic occlusion of the vein, ie, vein ablation.

**Heparin**
Discovered 100 years ago, heparin is a glycosaminoglycan derived from porcine intestines that is used as an anticoagulant to prevent and treat deep venous thrombosis and pulmonary embolism. Unfractionated heparin is given intravenously (preferably) and subcutaneously and binds to and increases antithrombin. Heparin has a short half-life (30 to 150 minutes) and is monitored using activated partial thromboplastin time. Protamine sulfate functions as an antidote. The fractionated form is known as low-molecular-weight heparin.

**Heparin-induced thrombocytopenia**
Occurs in 0.5% to 3% of patients receiving heparin, usually beginning 5 to 10 days after administration; it is caused by a heparin-dependent immunoglobulin G antibody. The antibody...
induces platelets to aggregate. The diagnosis is suspected when the platelet count drops by ≥50% or is <100 000/μL during therapy. Heparin-induced thrombocytopenia is highly suspected when a patient develops thrombosis. Heparin-induced thrombocytopenia is less common in the patients receiving low-molecular-weight heparin.

**HERMAN's classification**  
See KISTNER's classification.

**High ligation**  
Refers to ligation of the great saphenous vein at the saphenofemoral junction. Originally, high ligation was not combined with division of the tributaries. This method is obsolete as a stand-alone procedure.

**High ligation and division**  
Division of the great saphenous vein with ligation or transfixation with absorbable or nonabsorbable sutures or closing with a running nonabsorbable suture; a clip can be used. Ligation is flush with the common femoral vein. The distal part of the saphenofemoral junction is ligated or clipped and the vein is divided between the two ligations, after ligation of the tributaries. The method is not recommended without stripping.

**High ligation and stripping**  
The above procedure combined with removing the great saphenous vein, usually to just below the knee with a PIN (Perforation-INvagination) stripper or a similar Babcock device, pulling the great saphenous vein out either from the groin or from a distal point.

**Hirudin**  
A polypeptide isolated from leeches that has a direct antithrombin effect. Its half-life is 1 to 2 hours. Lepirudin and desirudin are modified, recombinant forms of hirudin. There is no available antidote. Use is limited.

**HOMANS sign**  
Pain in the calf with the knee in a semi-flexed position with a forcibly dorsiflexed ankle. The sign was originally considered to be suggestive of deep venous thrombosis; however, it is highly nonspecific.

**Homburg varicose vein severity score**  
One of many scoring systems for varicose veins. It is based on 3 categories, including 5 symptoms and signs correlating to C in the CEAP classification, and a hemodynamic refilling time with 4 grades. A value is given between 0 and 33, with 33 being the worst.

**Hook phlebectomy**  
A surgical technique to remove superficial varicosities, usually involving a special hook for the local resection of a varicose vein using a mini-incision or a stab avulsion of 1 to 3 mm. Also known as hook avulsion, ambulatory stab avulsion, or ambulatory phlebectomy.
**Horse chestnut seed or root extract**
A plant derivative that belongs to the group of venoactive drugs. It seems to reduce pain and leg edema in patients with chronic venous disorders. Its clinical use has, however, remained limited.

**Hybrid operative thrombectomy**
A thrombectomy through the common femoral vein or the popliteal vein in patients with deep vein thrombosis. It is combined with stenting of any residual obstructive lesion. An arteriovenous fistula can be added in the groin.

**Hydrostatic pressure**
Caused by gravity and exerts pressure on the venous system. The pressure is determined by measuring the vertical distance between the heart and the point of interest. Gravity represents the major component of the venous pressure in an immobile and upright position.

**Hyperbaric oxygen treatment (or therapy) of venous ulcers**
Treatment with inhaled oxygen (up to 100%) at 2 to 3 times the atmospheric pressure; it is used for many medical conditions. The treatment can produce an arterial oxygen tension >2000 mm Hg and 400 mm Hg in tissues to promote a healing process. The treatment is mostly used for carbon monoxide poisoning, arterial gas embolism, decompression sickness, necrotizing fascitis, and problem wounds (mainly of ischemic origin).

**Iliac vein compression**
Compression causing partial or complete obstruction of iliac vein outflow, such as MAY-THURNER syndrome, where the left common iliac vein is compressed by the overlying common iliac artery. Other variations, such as different arterial compression, may be present. Additionally, compression may be caused by a neoplastic process or postradiation retroperitoneal fibrosis. Adapted from VEIN-TERM.

**Iliac vein obstruction**
Any degree of stenosis of the iliac vein that has external or internal causes. Adapted from VEIN-TERM. See Figures 14 and 15.

**Iliac vein occlusion**
Acute or chronic complete occlusion of an iliac vein (common, internal, external), most commonly as a result of thrombosis, but external compression, as in MAY-THURNER syndrome, or from a neoplastic process, may occasionally be the cause. Retroperitoneal fibrosis secondary to radiation therapy is a less common cause of occlusion. In the case of deep venous thrombosis, postthrombotic syndrome may occur in up to 40% or more of patients.

**Iliac vein stenting**
Placement of a stent to improve or reestablish venous outflow following angioplasty of deep venous obstruction in the external and common iliac veins.

**Iliocaval vein obstruction**
Obstruction of the iliac vein and inferior vena cava that is produced most often by deep venous thrombosis and rarely by a neoplasm.
DEFINITIONS

Iliocaval vein occlusion
Occlusion of the iliac vein and the inferior vena cava.

Iliofemoral deep venous thrombosis
Thrombotic process involving the femoral vein extending into the iliac vein. May be acute or chronic, and determination of the age of the thrombus is important for the treatment decision.

Iliolumbar vein
Accompanies the iliolumbar artery and drains the iliac fossa, and the psoas and iliacus muscles, and usually empties into the common iliac vein, commonly continuing with the ascending lumbar vein in a common trunk. It could be considered as the fifth lumbar vein. See Figure 5.

Impedance plethysmography
Allows venous flow to be assessed, with a proven sensitivity for deep venous obstruction (in deep venous thrombosis mainly). The technique was developed in Grenoble, France by A. FRANCO and colleagues in the 1970s and served as a diagnostic tool for deep venous thrombosis in association with continuous-wave Doppler until the mid–1980s when duplex ultrasonography became the best choice.

Impression of swelling
A symptom that cannot always be evidenced, whereas the clinical sign edema can be measured. Frequently called swelling. See feeling of swelling.

Incompetent calf perforator
The flow in the perforator veins in the calf is usually bidirectional, outward during muscular contraction and inward during relaxation. In normal legs and in the majority of patients with primary uncomplicated varicose veins, the net flow is inward from superficial to deep and inward even in patients with femoral vein reflux, provided that the popliteal valves are competent. Conversely, flow is predominantly outward in the presence of popliteal valve incompetence (axial reflux), especially when there is associated deep venous obstruction.

Incompetent vein
A vein where the blood flow could move both along its usual antegrade path and backward in the opposite direction due to malfunctioning (incompetent) venous valves.

Increased outflow resistance
Increased resistance to the venous drainage that is most often caused by deep venous thrombosis, sometimes by external compression of the vein or by other modifications of venous compliance.

Indirect perforating vein
Veins that connect with the deep veins through tributaries and not directly with the main saphenous trunks (ie, the great saphenous vein and small saphenous vein). Most of the medial leg perforating veins are indirect.
Inelastic bandage
Nonstretchable bandage containing no or few elastic fibers, with little or no increase in length when stretched. Inelastic bandages, such as the Unna boot, are used to apply high working pressure and low resting pressure on a limb.

Inferior epigastric vein
Opens in the external iliac vein just below the inguinal ligament and anastomoses with the superior epigastric vein. Along its course, it is followed by the inferior epigastric artery.

Inferior gluteal veins
Follow the inferior gluteal artery and can be traced on the back of the upper thigh where they anastomose with the medial femoral circumflex veins. They enter the pelvis through the greater sciatic foramen below the piriformis muscle and join to form a single trunk that empties into the internal iliac vein.

Inferior mesenteric vein
Drains the blood of the hindgut (rectum, sigmoid, and descending colon). At the pelvic brim, the superior rectal vein, which is named the inferior mesenteric vein, runs vertically upward on the left of the inferior mesenteric artery beneath the peritoneal floor of the left infracolic compartment. It passes behind the pancreas in front of the renal vein and joins the splenic vein in a common trunk (spleno-mesenteric trunk) and joins the superior mesenteric vein to form the portal vein.

Inferior rectal veins
Drain the inferior lower third of the hemorrhoidal plexus to the pudendal vein. These veins may become varicose, resulting in external hemorrhoids or piles.

Inferior vena cava
Formed by the confluence of the right and left common iliac veins at a slightly lower level than the bifurcation of the abdominal aorta. It runs on the right side of the aorta and lies on the bodies of the lumbar vertebrae, crosses the right renal artery, pierces the diaphragm at the eighth thoracic vertebra, and empties into the right atrium. It carries deoxygenated blood from the lower half of the body to the heart. See Figure 5.

Inferior vena cava filter
A shaped medical device that is implanted in the inferior vena cava to trap blood clots and prevent the development of a pulmonary embolism. Inferior vena cava filters used to be implanted under x-ray guidance, but their placement is now controlled using ultrasound investigation.

Inferior vena cava thrombosis
A deep vein thrombosis that is caused by the development of a thrombus in the inferior vena cava.

Infrapatellar perforator vein
Belongs to the group of perforator veins of the knee that are classified according to their location as follows: medial knee perforators, suprapatellar perforators, lateral knee perforators, infrapatellar perforators, popliteal fossa perforators. Adapted from the Nomenclature of the veins.
**Intense pulsed light**  
Differentiated from a laser because it produces a wide range of high-energy wavelength light. It has been proposed for laser treatment of telangiectasia.

**Interface pressure**  
The pressure measured between a compression system that is applied to the extremity and the skin. The pressure is measured in mm Hg using pressure sensors at standardized points using a Kikuhime device and PICO process (P – patient, problem, or population; I – intervention; C – comparison, control, or comparator). Compression systems submitted to such measurements include bandages, stockings, and nonelastic leggings.

**Intergemellar vein or intergastrocnemial vein**  
Located between the two gastrocnemii muscles, just below the small saphenous vein compartment. Also called the “vein of the sural nerve” because it is the companion vein of this nerve together with the small saphenous artery.

**Intermittent pneumatic compression**  
A noninvasive technique that uses an air pump, connecting tubes, and inflatable sleeves, which are applied on the upper or lower extremities to increase blood flow. It is designed to improve venous circulation and subsequently decrease the risk of deep venous thrombosis and pulmonary embolism. It is also used in patients with critical limb ischemia because there is evidence that it improves symptoms by augmenting the collateral circulation. It also reduces edema.

**Internal iliac vein (hypogastric)**  
Begins at the great sciatic foramen, goes upward behind the internal iliac artery, and, at the brim of the pelvis, it opens in the external iliac vein to form the common iliac vein. It is responsible for most pelvic venous drainage, and it specifically drains blood from the reproductive system, the urinary system, and the lower part of the rectum. In most cases, the internal iliac vein is valveless. See Figure 5.

**Internal jugular vein**  
Emerges from the jugular foramen at the base of the skull, it passes down on the lateral aspect of the internal carotid and common carotid artery. On the lowest part of its course in the neck, it is covered by the sternoclidomastoid muscle. At the sternal and clavicular head of the sternoclidomastoid, it joins the subclavian vein to form the brachiocephalic vein. It drains blood from the brain, face, and neck. See Figure 7.

**Internal pudendal vein**  
Accompanies the internal pudendal artery in the ALCOCK or pudendal canal and opens in the internal iliac artery. It drains blood from the perineum, the bulb of the penis or the clitoris, the lower anal canal, and the urogenital triangle.

**Internal valvuloplasty**  
A procedure that aims to reestablish valvular competence in a leaky/floppy deep venous valve by tightening the leaflets of the valve under direct vision after venotomy through an open surgical procedure. First described by R.L KISTNER, USA.
**International Society for the Study of Vascular Anomalies (classification of vascular anomalies)**

A comprehensive classification of vascular malformations and vascular tumors, considered collectively as vascular anomalies. It has the special merit of identifying various vascular tumors in addition to the flow-based classification of congenital vascular malformations. Despite the complexity of the classification, due to the accommodation of numerous preexisting name-based syndromes as a part of new congenital vascular malformation classification, its major value is that it differentiates vascular tumors/hemangiomas from congenital vascular malformations. *See also* Hamburg classification.

**International Union of Phlebology**

An organization that includes most national phlebological societies worldwide.

**Intersaphenous vein(s)**

Run on the posterior aspect of the thigh as a continuity of the small saphenous vein with a vein called the dorsal or cranial extension of the small saphenous vein. It connects in the upper part of the thigh with the great saphenous vein. This vein is found in approximately two-thirds of the population. Formerly known as the GIACOMINI vein.

**Interventional radiology (in phlebology)**

Adds therapeutic procedures to venous imaging: venogram, computed tomography scan, magnetic resonance imaging. Most commonly used during angioplasty, stenting, and endovenous thermal ablation.

**Intra-arterial injection of sclerosant**

Accidental injection of sclerosant into the arteries during sclerotherapy. Intra-arterial injections have been responsible for severe accidents and subsequent sequelae (skin and/or muscle necrosis, palsies, amputations). The frequency of this has been reduced due to advancements in ultrasound-guided foam sclerotherapy. Although dramatically reduced, the risk remains, meaning that the implementation of the technique needs continued improvement.

**Intramuscular pressure**

Measured with the Striker® device or the wick catheter technique, mainly in the muscle compartments of the calf. A compartment syndrome, either acute or chronic, is a condition in which increased pressure within the compartment compromises the circulation to the tissues within the space.

**Intraosseous hemangioma**

A nongenuine hemangioma that belongs to the vascular tumor group. It is the same as an intraosseous venous malformation, but has been misnamed a venous malformation based on an old concept. However, these venous malformations can be found in any bone, most frequently the vertebra and skull. They are generally asymptomatic, but may cause symptoms through compression of adjacent structures as a mass effect. Treatment options include surgical resection and sclerotherapy.

**Intraosseous venous malformation**

One form of venous malformation that affects the bony tissue; it is rarer than is soft tissue involvement. It accounts for <1% of all intraosseous neoplasms and frequently involves the
vertebral column and calvaria. Among the facial bones, the mandible, maxilla, and nasal bones are commonly affected. It grows slowly and becomes visible between the second and fifth decade of life. Early diagnosis warrants prevention of uncontrollable hemorrhage.

**Intravascular ultrasound in phlebology**
Procedure that uses a catheter-bound rotating ultrasound probe and gives an image centered on the lumen of the vessel. It provides a very precise analysis of vessel structure, diameter, wall thickness, external compression, etc. Since the probe is disposable, the cost remains an obstacle to the generalization of the method. *See Figures 19 and 20.*

**Investigating venous disease evaluation and standardization of testing**
Standardizing the duplex ultrasound for venous investigations can improve reliability. Reports should include the time of the test, the position of the patient, and the provocative maneuver that produced the reflux.

**Itching**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Itching can be present in association with skin changes, including eczema, lipodermatosclerosis, and uncomplicated varicose veins. Adapted from SYM Vein.

**Jugular axillary vein bypass**
In patients with subclavian occlusion and ipsilateral venous hypertension in the arm, this technique may prove useful in cases when percutaneous angioplasty is technically not feasible or long-term patency is not expected (malignancies).

**KABNICK classification**
Classification of the heat-induced thrombosis following endovenous thermal ablation of saphenous trunks. In class 1, the thrombus extends to the junction and does not project into the deep vein. In class 2, the thrombus extends into the deep vein (less than 50% stenosis of the deep vein). In class 3, the thrombus extends into the deep veins causing more than 50% stenosis. In class 4, the extension of the thrombus causes complete obliteration of the deep vein. *See also* endovenous heat-induced thrombosis.

**KASABACH-MERRIT syndrome**
A vascular tumor that causes consumptive coagulopathy and, as a result, the platelet count and clotting factors, such as fibrinogen, decrease. These patients develop petechia, persistent bleeding, or a tense, rapidly enlarging hemangioma because of intrallesion bleeding. These tumors are rare; they can be found in the extremities, the trunk, the retroperitoneum, and the face.

**KISTNER’s classification**
A classification of deep venous reflux that grades deep venous reflux of the leg by using descending venography performed with the patient in a semi-erect position at 60 degrees while performing a VALSALVA maneuver. There are 4 grades of reflux: (i) no reflux; (ii) reflux down to the upper thigh; (iii) reflux in the lower thigh down to the popliteal level; and (iv) axial reflux through the popliteal vein and down to the calf.
KISTNER’s valvuloplasty
The first valve repair technique described by Robert KISTNER in 1968. It is a direct valve repair technique by means of a longitudinal incision through the anterior commissure of the valve. The free borders of the cusps are shortened by applying stitches at the posterior and anterior commissure.

KISTNER’s vein transposition
Surgical repair technique of deep venous valve incompetence. The incompetent femoral vein is cut at its termination, more frequently to the profunda femoral vein and less frequently to the great saphenous vein. The receiving veins should have competent valves above the anastomosis. This technique was first described by Robert KISTNER in 1979.

KLIPPEL-TRENAUNAY syndrome
A name-based eponym for congenital vascular malformations, originally described as the “triad”: unilateral, atypical varicose veins, port-wine staining of the skin, and limb overgrowth by bony and soft tissue hypertrophy. Typical is the presence of large lateral veins. This unique condition represents a clinical manifestation of a complex form of congenital vascular malformations as the outcome of defective development that occurred during various stages of embryogenesis. It consists of venous, lymphatic, and capillary malformations.

KTP laser
A laser beam in the green visible spectrum and a wavelength of 532 nm that is absorbed particularly by skin chromophores, such as melanin. It is especially suitable for the management of fascial telangiectasia. As melanin is affected by the 532 nm wavelength, the KTP laser is seldom used for individuals with dark skin.

Laser ablation
See endovenous laser ablation of saphenous veins.

Laser Doppler flowmetry
Noninvasive test using a narrow monochromatic incident light source (laser) to assess the speed of blood particles, mainly red blood cells moving in the dermal microcirculation. The term red blood cell flux has been used to describe the measurement. This signal is a product of the number of moving red blood cells in the sample volume and their mean velocity (flux = mean velocity x red blood cell volume fraction). Laser Doppler flowmetry has been used to detect microangiopathy and to predict certain clinical outcomes.

Laser fibers
Optical fibers, generally with a diameter of 200 to 600 μm, that are used to conduct light energy produced by a laser generator to the point of delivery (ie, venous lumen). A bare-tipped fiber was proposed in earlier models, but manufacturers are now offering radial-emitting fibers, tulip-shaped catheters, and jacketed fibers to avoid direct vein wall contact and promote a uniform delivery of laser energy. It is thought that they reduce the incidence of vein wall perforations during endovenous laser ablation.
Laser generator
Provides the light energy that is applied to the vein through the optic fiber for endovenous laser ablation. The first generators used 810 nm diode lasers. The constant evolution of technology has led to the use of longer wavelengths (up to 1470 nm). Although the latter may cause less bruising, the efficacy of all wavelengths has been evidenced.

Lateral ankle perforator veins
Connect the veins of the lateral venous plexus with the fibular veins; classified as perforator veins. Adapted from the Nomenclature of the veins of the lower limb.

Lateral brachial vein
One of the two deep veins of the arm with the medial brachial vein arising from the junction of the ulnar and radial veins. The brachial veins frequently meet in the middle part of the arm to form a single brachial vein. The brachial veins take the name of axillary vein beneath the lower edge of the pectoralis major muscle.

Lateral circumflex femoral vein
Tributary of the common femoral vein ending in the posterior aspect of the common femoral vein just in front of the saphenofemoral junction. Usually connected with the obturator vein, which provides a derivative route toward the pelvic veins in the case of femoral obstruction.

Lateral foot perforator veins
Foot perforator veins located laterally in the foot: intertendinous perforator veins, infratendinous perforator veins (between the tendons of the peroneus longus and peroneus brevis muscles) that join in a common trunk, which forms the posterior root of the small saphenous vein.

Lateral gastrocnemius perforator vein
Part of the group of posterior calf perforating veins, this vein drains into the lateral gastrocnemius vein. It may not be connected to the small saphenous vein and usually arises halfway down the posterior calf, lateral to the intergemellar perforating veins.

Lateral gastrocnemius veins
Muscular sural vein that drains the lateral head of the gastrocnemius muscle and usually ends in the popliteal vein by a unique collector, distal to the confluence of the small saphenous vein with the popliteal vein. May join the popliteal vein directly or merge with the small saphenous vein to form a common trunk that ends in the popliteal vein.

Lateral knee perforator vein
Knee perforator vein located laterally in the knee.

Lateral leg perforator vein
Leg perforator veins that connect veins of the lateral plexus with the fibular veins.

Lateral marginal vein of the foot (commonly replaced by a plexus)
Superficial veins of the foot that course through the lateral foot and form the anterior root of the small saphenous vein.
Lateral sacral veins
The plexus-shaped lateral sacral veins constitute the posterior parietal branches of the internal iliac vein. They are formed by three horizontal branches—superior, middle, and inferior lateral sacral veins. They are connected by two vertical anastomoses, which join upward on the vertebral venous plexuses in the midline.

Lateral thigh perforator vein
Thigh perforator vein that pierces the lateral muscle of the thigh.

Lateral venous system
See ALBANESE venous system.

Left renal vein compression
Anatomically, the left renal vein can be compressed in the aortomesenteric fork (type A or anterior compression), but also between the lumbar spine and the aorta (type B or retro-aortic compression). This phenomenon may be responsible for the nutcracker syndrome. See nutcracker syndrome.

Leg symptoms
See venous symptoms.

Leg ulcer
See venous leg ulcer.

Leiomyosarcoma
Primary venous leiomyosarcomas are rare, but more common than arterial ones. Sixty percent of primary venous leiomyosarcomas involve the inferior vena cava, frequently the suprarenal segment. They are more prevalent in women and occur over a wide age range. The tumors are firmly attached to the vessel wall and exhibit less intratumoral hemorrhage and necrosis than do other retroperitoneal sarcomas. The most common growth pattern is intraluminal, but primary venous leiomyosarcomas can invade the cava wall and infiltrate adjacent organs or structures.

LEJARS’ sole
Dilatation of the superficial network of the sole obtained by LEJARS as an anatomical preparation. They were misunderstood as foot venous pumps, but they are only an artifact: the true foot pump location is in the plantar veins.

Lepirudin
This recombinant hirudin is a specific and irreversible thrombin inhibitor. Clot-bound thrombin, an important thrombotic risk factor, which is inaccessible to antithrombin III-heparin, is effectively inhibited by hirudin.

Leukocyte activation
The etiology of chronic venous insufficiency and the cause of venous ulceration is primarily a chronic inflammatory process. Numerous investigators have attempted to evaluate the microcirculation of
patients with chronic venous insufficiency. Secondary to venous hypertension, leukocyte activity and interaction with endothelial cells initiate a cascade of inflammatory events that leads to trophic changes, including venous ulcer formation.

**Lifestyle advice for chronic venous disorders**
Patients with chronic venous disorders should be encouraged to engage in regular physical activity, elevate the legs at night, avoid heat, and wear appropriate shoes and stockings.

**LINTON’s operation**
Surgical intervention with ligation of subfascial medial leg perforator veins through a long medial incision to treat or prevent venous ulcers. First suggested by LINTON in 1938, its efficacy was disputed and cutaneous complications were numerous. In the 1990s, it was replaced by subfascial endoscopic perforator surgery. See also subfascial endoscopic perforator surgery.

**Lipedema**
Abnormal, disproportionate depositions of subcutaneous fat in the legs and sometimes the arms. Generally, it affects women and often starts during puberty. The most common complaints include sensations of heaviness and discomfort in the legs, with increased sensitivity to digital pressure; it is frequently accompanied by (mild) edema. A typical sign of lipedema tissue is a sharp separation between normal and abnormal tissues at the ankle.

**Lipodermatosclerosis**
One of the signs associated with chronic venous insufficiency, ie, grade C_{4b} of the CEAP classification. It consists of an inflammatory, edematous, fibrotic plaque of the medial lower third of the lower leg. It can be associated with stasis purpuric dermatitis and atrophie blanche. Often extremely painful, it can be the start of an ulcer.

**Liquid sclerotherapy**
Injection sclerotherapy officially started in 1851 when J-P. PETREQUIN (France), using the recently invented syringe and hallowed trocar, ie, needle by PRAVAZ, injected a liquid sclerosing agent into a varicose vein to destroy it. The mechanisms that occur in vein sclerosis involve endothelial swelling with desquamation, deposition of a mixed thrombus, connective organization, and fibrosis. Sclerotherapy is also presently used in the treatment of venous malformation. Since the 1990s, liquid sclerotherapy has frequently been replaced by foam sclerotherapy in varicose veins >3 mm.

**Long-haul flight**
See air travel–related venous thromboembolism.

**Long-pulse Alexandrite laser**
See Alexandrite long-pulse laser.

**Low-molecular-weight heparin**
The various low-molecular-weight heparins are not interchangeable. They have pharmacokinetic advantages over heparin because the bioavailability of low-molecular-weight heparin after a subcutaneous injection is about 90% and low-molecular-weight heparin produce a more
predictable anticoagulant response than heparin. Since they are predominately cleared by the kidneys, their biologic half-life may be prolonged in patients with renal failure. Low-molecular-weight heparin is typically administered in fixed or weight-adjusted doses for thromboprophylaxis and in weight-adjusted doses for therapeutic purposes. Coagulation monitoring is not generally necessary, but is advisable in obese patients with renal insufficiency. Platelet count monitoring remains necessary.

**Lower gluteal vein**
Tributary of the internal iliac vein; it leaves the pelvic area below the belly of the piriform muscle, while the superior gluteal vein leaves above the same muscle.

**Lumbar veins**
Metameric venous system at each vertebra. The main function of the lumbar veins (5 veins for each side) is to drain the internal vertebral venous plexuses. For each side, the lumbar veins are connected vertically by the ascending lumbar vein located inside the psoas muscle.

**Lymphatic malformation**
One of the congenital vascular malformations. They are the outcome of defective development that only affects the lymphatic system during two different stages of embryogenesis: primary lymphedema from the truncular/late stage of lymphangiogenesis and lymphangioma from the extratruncular/early stage. Together with venous malformations, lymphatic malformations are the most common birth defect of the circulation system, often existing together (eg, Klippel-Trenaunay syndrome).

**Lysus infusion catheter system (EKOS®)**
A system that uses a high-frequency catheter and low-powered ultrasound to lyse a thrombus.

**MAFFUCCI syndrome**
A combination of multiple asymmetric enchondromas of the extremities (most commonly the hands, less commonly the feet) and multiple vascular malformations (venous or lymphatic). Although congenital, most cases become apparent by puberty. It is commonly associated with deformities to the extremities and pathologic fractures. Sarcomatous degeneration may occur in up to 30% of patients. MAFFUCCI syndrome should be differentiated from OLLIER disease, a more common disease without the associated vascular malformations.

**Maggot treatment (maggot debridement therapy)**
Debridement most commonly using disinfected *Phaenicia sericata* fly larvae; a very effective treatment for wounds with necrotic and even infected tissue that leaves the viable tissue intact.

**Magnetic resonance venography**
Diagnostic imaging that combines magnetic resonance using an intravenous contrast dye and pulsed sequencing timed to ensure adequate visualization of target veins. This imaging technique is especially useful for suspected abdominal and pelvic venous disorders, and it allows for 3D reconstruction imaging.
MALETI neovalve construction
A reconstructive surgery technique for the lower limbs, deep vein reflux correction in secondary valve incompetence, and valve agenesis or aplasia. The principle is to perform an autologous valve by dissecting the venous wall to obtain one or two flap(s). In postthrombotic syndrome, endophlebectomy is frequently combined. The choice between monocuspid and bicuspid depends on the postthrombotic wall features. This procedure should be performed by skilled operators.

Malleolar flare
See corona phlebectatica paraplantaris.

MARJOLIN’s ulcer
Malignant degeneration to well-differentiated squamous cell carcinoma in a chronic wound, such as a burn site or venous ulcer. The lesion is locally aggressive, painless, and diagnosed by wedge biopsy of any nonhealing wound. Treatment is a wide excision and/or radiation therapy.

MARTORELL’s ulcer
Leg ulcer frequently associated with malignant blood pressure elevation. It is usually very painful, but, after excision, skin grafts may be beneficial. Sometimes referred to as necrotic angiodermatitis.

Mast cells in chronic venous disease
Produce the enzyme chymase, which is a potent activator of matrix metalloproteinase (MMP)-1 and -3, and release transforming growth factor β-1 (TGF-β1), which is secreted by activated endothelial cells, fibroblasts, and platelets from extracellular matrices. The release and activation of TGF-β1 initiates a cascade of events in which macrophages and fibroblasts are recruited and stimulated during the chronic inflammation that is secondary to venous hypertension associated with chronic venous disease.

Matrix metalloproteinases
Wound healing is an orderly process that involves inflammation, reepithelialization, matrix deposition, and tissue remodeling. Tissue remodeling and matrix deposition are processes controlled by matrix metalloproteinases (MMPs) and tissue inhibitors of matrix metalloproteinases (TIMPs). Several studies have demonstrated that prolonged and continuous transforming growth factor-1 production causes tissue fibrosis by stimulating extracellular matrix production and inhibiting degradation by affecting MMP and TIMP production. Alterations in MMP and TIMP production may similarly modulate the fibrosis of the lower extremities in patients with chronic venous insufficiency.

Matting
Multifactorial response, usually following sclerotherapy or tissue manipulation, resulting in exuberant angiogenesis in the treated area and a red, blotchy appearance.

MAY-HUSNI bypass
See saphenopopliteal bypass.
**MAY-THURNER syndrome**
Venous symptoms and signs caused by the narrowing or occlusion of the left common iliac vein due to external compression between the right common artery and the aorta. Diagnostic investigations include duplex ultrasonography, venography, magnetic resonance imaging, and a more precise intravenous ultrasound. Adapted from VEIN-TERM.

**Mechanical thrombectomy**
A technique for the percutaneous removal of a deep venous thrombus using a powered system combining thrombus disruption through mechanical means followed by aspiration. This technique is often preceded by catheter-directed thrombolysis to decrease the thrombus load as completely as possible. A variety of mechanical means have been developed, including the use of rheolytic, rotational, and ultrasonic instruments.

**Mechanochemical ablation**
Technique used to ablate superficial veins. An oscillating rotating wire disrupts the endothelial lining of target veins allowing the simultaneously injected sclerosant to penetrate the deeper layers of the vein wall, ultimately resulting in vein sclerosis. The advantages of this technique include percutaneous access, endovenous treatment, no need for tumescent anesthesia, and a short procedure time. Since the system does not use thermal energy, the potential for nerve damage is minimized. The results from venous occlusion are similar to those from other endothermal methods.

**Medial ankle perforator vein**
*See* posterior tibial perforator veins.

**Medial basilic vein**
Medial branch of the middle antebrachial vein that joins the basilic vein near the elbow.

**Medial cephalic vein**
Lateral branch of the middle antebrachial vein that joins the cephalic vein near the elbow.

**Medial circumflex femoral vein**
A deep vein tributary of the common femoral vein that can end in the internal iliac vein.

**Medial foot perforator veins**
Perforators located in the medial aspect of the foot, which include, from bottom to top: perforator vein of the first metatarsal interspace, cuneal perforator vein, scaphoid or navicular perforator vein, and inframalleolar perforator vein. Together with the medial plantar veins (deep), they should be considered as a medial functional unit of the foot veins.

**Medial gastrocnemius perforator veins**
Part of the group of posterior calf perforating veins, this vein drains into the medial gastrocnemius vein. It may not be connected to the small saphenous vein and usually arises halfway down the posterior calf, medial to the intergemellar perforating veins. It is usually a large-caliber vein and can work as a re-entry point for great saphenous vein reflux via an oblique communicating vein of the calf, which is explained by the power of the medial gastrocnemius pump.
**Medial gastrocnemius veins**
Muscular sural vein that drains the medial head of the gastrocnemius muscle and usually ends in the popliteal vein by a unique collector, distal to the confluence of the small saphenous vein with the popliteal trunk. May join the popliteal vein directly or merge with the small saphenous vein to form a common trunk that ends in the popliteal vein.

**Medial leg perforator veins**
The medial leg perforators belong to two groups: the posterior tibial perforator veins and the paratibial perforator veins, including the lower and upper paratibial perforator veins. The paratibial perforators drain the tributaries of the great saphenous vein into the posterior tibial veins.

**Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)**
The medial calf perforators are classified into two groups: posterior tibial and paratibial perforator veins. Three groups (lower, middle, upper) posterior tibial perforator veins (COCKETT I–III perforator veins) connect the posterior accessory great saphenous vein to the posterior tibial veins.

**Medial marginal vein of the foot**
The superficial venous system of the foot is divided into the dorsal and plantar subcutaneous venous network. Superficial vein tributaries drain blood into the dorsal venous arch on the dorsum of the foot at the level of the proximal head of the metatarsal bones. The medial and lateral end of this arch continues through the medial and lateral marginal veins into the great saphenous vein and the small saphenous vein, respectively.

**Medial plantar veins**
On the sole, the richly anastomosing deep plantar venous arch collects blood from the toes and the metatarsals. The deep plantar venous arch continues into the medial and lateral plantar veins, which become the posterior tibial veins behind the medial ankle.

**Medial thigh inguinal perforator vein**
Perforator veins that connect tributaries of the great saphenous vein to the femoral vein in the proximal thigh.

**Medial thigh perforator vein of the femoral canal**
Perforator vein of the femoral canal that connects tributaries of the great saphenous vein to the femoral vein.

**Median antebrachial vein**
Accessory of antebrachial veins, originates from the superficial palmar venous plexus and runs on the ventral side of the forearm. It joins the basilica or the cephalic vein or both in the proximal forearm. *See Figure 6.*

**Median cephalic vein**
Lateral branch of the middle antebrachial vein that joins the cephalic vein near the elbow.
**Median cubital vein**
Connects the basilic and cephalic veins in the antecubital fossa. *See Figure 6.*

**Median sacral vein**
The only tributary of the right common iliac vein is the right ascending lumbar vein, whereas the left common iliac vein drains the left ascending lumbar and median sacral vein.

**Median vein of the elbow**
The median cubital vein connects the cephalic and basilica veins in the antecubital fossa.

**Median vein of the forearm**
Originates from the superficial palmar venous plexus and runs on the ventral side of the forearm. It joins the cephalic or basilica or both in the proximal forearm.

**Medical compression stockings**
Knitted or woven elastic stockings used in the control and treatment of lower extremity edema due to venous or lymphatic disease and ulcerations. The interface pressure measured at the ankle ranges from 8 mm Hg to 60 mm Hg, usually graduated with higher pressure distally or lower pressure proximally. Different countries have different classification systems, leading to confusion if only the class of compression is used in scientific reporting.

**Mesenteric vein thrombosis**
Usually involves the superior mesenteric vein before the confluence of the splenic vein to form the portal vein. It can present acutely with severe abdominal pain and bloody diarrhea, and it represents a true emergency with frequent fatal outcomes. It may also present subacutely with cramping abdominal pain, especially after eating. Diagnosis can be established using a computed tomography angiogram or magnetic resonance angiogram. Treatment in the acute phase ranges from anticoagulation to thrombolysis and even emergent bowel resection for ischemia.

**Metatarsal dorsal vein**
On the dorsum of the foot, the pedal vein drains the deep dorsal digital veins through the dorsal metatarsal veins. The pedal vein continues in the anterior tibial veins.

**Metatarsal plantar vein**
On the sole, the richly anastomosing deep plantar venous arch collects blood from the toes and the metatarsal plantar veins. The deep plantar venous arch continues into the medial and lateral plantar veins.

**Mickey Mouse sign**
Transverse ultrasound image near the saphenofemoral junction in which the femoral vein, anterior accessory vein, and great saphenous vein form an image characteristic of the Walt DISNEY character, Mickey Mouse. The femoral vein is the head, while the anterior accessory and great saphenous veins are the ears. This sign is often used to differentiate the anterior accessory vein correctly from the great saphenous vein.

**Microfoam sclerotherapy**
*See* foam sclerotherapy.
Micronized purified flavonoid fraction (MPFF)
This venoactive drug is a purified micronized mixture of diosmin (90%) and active flavonoids (10%): hesperidin, diosmetin, linarin, and isorhoifolin. MPFF increases venous tone, inhibits the inflammatory processes in venous valves and wall, and improves lymphatic drainage present in chronic venous disorders. Due to its free radical scavenging properties and the reduced expression of adhesion molecules, capillary hyperpermeability, edema, and perivascular infiltration of leukocytes are reduced. MPFF has been proven to decrease symptoms at all stages, including the C0 patients.

Microphlebectomy
See ambulatory stab avulsion or MULLER’s ambulatory phlebectomy.

Middle rectal veins
Intrapelvic tributaries of the internal iliac vein include the lateral sacral and several visceral (middle rectal, vesical, uterine, and vaginal) veins; they drain the presacral venous plexus and the pelvic visceral plexuses. These plexuses and the additional superficial (pudendal) plexus provide free communication for venous flow between the two sides of the pelvis.

Midgluteal perforator vein
The gluteal veins anastomose with the medial circumflex femoral vein and receive numerous perforator veins from the corresponding superficial veins.

Milking test
Test to analyze valve competence. During the perioperative test, the segment containing the repaired valve or the transplanted or grafted competent vein is emptied between two bulldog clamps or fingers, then the upper one is released. If the entire vein bulges immediately, the valvular incompetence has not been corrected, meaning that the repair has failed.

Mixed arterial and venous ulcer
Of all leg ulcers, 15% to 30% have a mixed etiology, including venous hypertension and arterial insufficiency. Historically, the use of compression stockings for leg ulcers was contraindicated in patients with an ankle-brachial index <0.8. However, recent studies have produced evidence that compression alone can be effective for treating these mixed ulcers if the ankle-brachial index is >0.5.

MOBIN-UDDIN umbrella
One of the early inferior vena cava filters that was first reported in 1971 and withdrawn in 1986. It was inserted through an open femoral venotomy; however, filter migration was an important complication.

MONDOR’s disease
Superficial thrombophlebitis in subcutaneous veins on the chest wall, originally described by Henri MONDOR in 1939 and is most common in women with associated breast cancer. Later, it was also described for penile superficial thrombosis presenting as firm painless cords on the dorsal aspect of the penis. Several cases of abdominal superficial venous thrombosis have been reported in BEHÇET’s disease. No specific treatment is indicated because of its benign nature.
**MULLER’s ambulatory phlebectomy**
A technique for the treatment of varicose veins that was first described by Robert MULLER, a Swiss dermatologist, in 1966. Veins are removed in an outpatient setting, under tumescent local anesthesia through mini-incisions (2 to 3 mm) without ligation or a dermal suture, but appropriate bandage compression followed by early ambulation, and a rapid return to normal activities. This technique has largely replaced the more formal varicose vein excision with ligation through larger incisions performed in the operating room.

**Multilayered compression bandages**
Compression therapy for venous ulcers, venous edema, and lymphedema that consists of several components, usually including a padding layer and 2 or 3 bandages of various elastic properties. This results in an inelastic bandage with high stiffness that achieves a high working pressure and low resting pressure. Initially made of 4 layers, the trend is currently to use 2 composite bandages with similar properties (foam, cohesive, etc).

**Muscle cramp**
*See* cramp.

**Muscular veins**
Deep veins located below the muscular aponeurosis. They comprise the axial veins and the muscular veins from the muscles.

**National Institute for health and Care Excellence (NICE)**
*See* NICE guidelines for varicose vein treatment.

**ND-YAG laser (neodymium-doped yttrium aluminum garnet)**
Laser with a long wavelength (1064 nm) used for treating telangiectasia and reticular veins.

**Neosaphenofemoral junction**
Term that is sometimes used after failure of high ligation identified by ultrasound investigation. It is mainly due to new, small veins connecting the common femoral vein and a remaining refluxive superficial vein.

**Neovalve (autogenous)**
Any kind of neovalve constructed with autogenous venous tissue.

**Neovascularization**
Presence of multiple new, small tortuous veins close to the site of a previous intervention, which are venous vessels, developing mainly around the saphenofemoral junction and/or the saphenopopliteal junction, which may enlarge and connect deep to superficial veins, causing clinical recurrence after a few years.

**Nerve damage after stripping**
Early nerve complications of surgical stripping or thermal ablation of the great saphenous vein (saphenous nerve) or small saphenous vein (sural nerve) with numbness and tingling over the inner side of ankle and foot (great saphenous vein) or outer border of the ankle or foot (small
saphenous vein). Occasionally temporary pain is felt in the area. It is rarely observed today with modern techniques.

**Neuromuscular electric stimulator in chronic venous insufficiency**
The use of electrical impulses to elicit muscle contraction in patients with chronic venous insufficiency. Neuromuscular electric stimulator simulates the effect of exercise by activating the calf muscle pump, which can be useful in treating orthostatic limb edema in patients who remain seated for a long time.

**NICE guidelines for varicose vein treatment**
Recommendations about the treatment and care of people with specific diseases and conditions in the National Health Service in England and Wales.

**Night cramp**
See cramp.

**Nitinol stent**
Type of stent that will reexpand if compressed or crushed. Nitinol stents are available in long lengths, which are suited better to curved vessels, are easily deployed, and can be placed accurately as they will not foreshorten significantly upon deployment and dilatation. On the other hand, they can be deformed by external forces, such as the overlying right common iliac artery, taking on a fish mouth appearance, which limits the luminal size and causes hemodynamically significant narrowing.

**Nonsaphenous vein**
Superficial veins that are not the great or small saphenous veins. They are classified as A5 according to the CEAP classification. Adapted from the CEAP classification.

**Nonthermal vein ablation**
Treatment for truncal venous reflux in varicose veins that does not use heat, and, as of today, these treatments include ultrasound-guided foam sclerotherapy, mechanochemical ablation, and cyanoacrylate glue.

**Nonthrombotic iliac vein lesion**
Obstruction of blood flow in the common and/or external iliac vein, of nonthrombotic origin, most frequently on the left side where the artery crosses the vein. It can, by itself, predispose patients to deep vein thrombosis.

**Nonthrombotic vein primary obstruction**
See nonthrombotic iliac vein lesion.

**North American subfascial endoscopic perforator surgery (SEPS) study**
North American register of the mid-term (24 months) results of 148 SEPS performed in 146 patients in 17 US centers between August 1, 1993 and February 15, 1996. The interruption of perforators with ablation of the superficial reflux effectively reduces the symptoms of chronic venous insufficiency and rapidly heals ulcers. Recurrence or new ulcer development, however, is still significant in postthrombotic limbs and particularly in deep vein occlusion.
Nutcracker syndrome
Also known as left renal vein entrapment, this is the clinical equivalent of nutcracker phenomenon and refers to compression of the left renal vein, most commonly between the aorta and the superior mesenteric artery, with impaired blood outflow that is often accompanied by distention of the distal portion of the vein. Symptoms are often aggravated by physical activity and commonly include hematuria, pain or gonadal vein syndrome, varicocele, orthostatic proteinuria, and orthostatic intolerance.

Oasis® catheter
Mechanical thrombectomy hydrodynamic device that uses the VENTURI effect. The 6Fr over-the-wire percutaneous catheter of this device is used to remove a thrombus from native vessels and grafts, and it has three lumens: one for the guidewire, one for saline inflow that allows contrast injection, and one for outflow aspiration of the fragmented thrombi.

Obturator veins
Veins that begin in the upper portion of the adductor region of the thigh. They are formed by tributaries that drain the hip joint and the obturator and adductor muscles, they enter the pelvis through the obturator foramen as accompanying veins of the obturator artery and run on the lateral wall of the pelvis below the obturator artery, passing between the ureter and the internal iliac artery before emptying into the internal iliac vein.

Oclusion plethysmography
Technique that assesses venous function by measuring changes in the size of the extremity in response to exercise, postural change, and the application of a venous tourniquet. The main assumption of these examinations is that the arterial blood supply to the extremity and transcapillary fluid exchange do not change significantly in response to the utilized maneuver. Therefore, changes in the extremity volume are attributed to the filling and emptying of the veins.

Occupational leg swelling
Evening leg edema is a physiologic phenomenon occurring in people with a sitting or standing profession (eg, hairdressers, flight attendants, etc) due to long periods of sitting and/or standing. There is no evidence of venous disease.

OESCH stripper
See PIN stripper.

Open surgical reconstructions for nonmalignant occlusion of the vena cava
A range of surgical reconstructive procedures for occlusion of the inferior or superior vena cava. Autologous spiral saphenous vein grafts, femoral vein grafts, homografts, and externally supported expanded polytetrafluoroethylene grafts have been used mostly for patients with persistent symptoms of caval obstruction.

OptEase® filter
Percutaneously placed and retrievable inferior vena cava device to be used in selected patients with venous thromboembolism to prevent a primary or secondary pulmonary embolism.
Its design features a Nitinol platform, barbs to provide resistance to migration, and a self-centering design to optimize thrombus capture and to avoid filter tilting.

**Oral anticoagulant therapy**
Orally administered medications that inhibit the action or synthesis of one or more factors of the thrombosis cascade to halt the process of thrombus formation. Indications include treatment and secondary prevention of venous thromboembolism and treatment of patients with superficial vein thrombosis in close proximity to the saphenofemoral or saphenopopliteal junctions. These agents include vitamin K antagonists (warfarin, acenocoumarol, etc) and the newer direct oral anticoagulants, which target factors X or II.

**Oral contraceptive-related thrombosis**
Thrombotic events, mostly in the form of venous thromboembolism, but also myocardial infarction and stroke, that are associated with the use of oral contraceptives, which frequently contain estrogen. The risk of thrombotic events is increased 3- to 5-fold and is associated with the dose of estrogen, which increases the plasma concentration of clotting factors. All generations of oral contraceptives carry a risk for thrombosis.

**Oral vitamin K antagonists**
These agents, including warfarin, acenocoumarol, and phenprocoumon, inhibit the enzyme vitamin K epoxide reductase, which recycles oxidized vitamin K\(_1\) to its reduced form, halting the process of carboxylation and the synthesis of blood coagulation proteins, including liver-dependent factors II (prothrombin), VII, IX, and X. They do not antagonize vitamin K, but rather antagonize vitamin K\(_1\) recycling and deplete active vitamin K\(_1\). It normally takes 2 to 3 days for these drugs to be effective.

**Osmotic sclerosing agent in sclerotherapy**
Sclerosing agents that dehydrate through osmosis and destroy the endothelial cells of the vessels in which they are injected. Hypertonic saline (typically 23.4%) is the simplest agent, but a combination of hypertonic saline 10% with dextrose 25% is also used. Hypertonic saline injections are painful, but they lack the potential for allergic reactions.

**Outflow fraction**
An indirect assessment of physiological venous outflow obstruction obtained from air plethysmography venous volume readings after the additional use of an upper thigh tourniquet that is inflated to 80 mm Hg to obtain the venous volume (VV) estimate and then suddenly deflated to obtain the venous volume emptied in one second (V1). The percentage of venous volume emptied in one second in relation to venous volume corresponds to outflow fraction (OF). \(\text{OF} = \left(\frac{V1}{VV}\right) \times 100\).

**Outflow obstruction**
Obstruction or stenosis of the iliac veins and possibly common femoral vein, ie, the anatomical outflow of the leg veins that is commonly due to postthrombotic deep venous scarring, but it may also be caused by nonthrombotic iliac vein lesions (usually due to extrinsic compression). Outflow obstruction is frequently underdiagnosed, in part because of limitations in the imaging methods.
**Ovarian vein**
A paired gonadal vein in females, which drains the ovaries; it corresponds to the testicular vein in males. The right ovarian vein runs through the broad ligament and usually joins the inferior vena cava. However, the left ovarian vein typically drains into the left renal vein instead of the inferior vena cava. Anatomical variations of drainage patterns do exist.

**Ovarian vein embolization**
A percutaneous interventional procedure designed to occlude a symptomatic and incompetent ovarian vein. Its main indications include management of pelvic congestion syndrome, but also the treatment of labial, vulvar, perineal, gluteal, or leg varicosities. It is more commonly necessary for the left ovarian vein. The materials most often used for this procedure include coils, glue, foam, and liquid sclerosing agents.

**Ovarian vein reflux or ovarian vein incompetence**
Incompetence of the valves of the ovarian vein leading to pelvic vein hypertension, resulting in varices and symptoms of pelvic congestion syndrome or labial, vulvar, perineal, gluteal, and lower limb varicosities.

**Oxygen, hyperbaric treatment of venous ulcers**
Use of high pressure oxygen, typically a few times above the ambient pressure, maintained in special chambers where the patient is placed for the duration of the treatment session. Usually used to promote healing of chronic leg ulcers of venous or other origin that have failed to heal. A milder pressure may be applied using personal, portable devices.

**P component of the CEAP classification**
Detailed information on the underlying pathophysiological findings of a patient with a chronic venous disorder, including the presence and location of superficial and/or deep vein obstruction and/or reflux in 18 defined segments of the leg veins. There is a basic CEAP classification where the anomaly location is not noted (P_r: reflux, P_o: obstruction, P_r,o: reflux and obstruction, and P_n: no identifiable venous pathophysiology) and an advanced CEAP classification with additional numerical anatomy descriptors from 1 to 18. Adapted from the CEAP classification.

**PAGET-von SCHRÖTTER syndrome**
This syndrome refers to upper extremity vein thrombosis that affects the axillary and/or subclavian vein; it is often called “effort thrombosis” because it frequently occurs after strenuous arm exercise. It is often the result of thoracic inlet syndrome, which causes an impingement of the vein, where surgical decompression may be required. Named after PAGET and von SCHRÖTTER.

**Pain**
*See* aching.

**Pain score**
The first component of the venous clinical severity score, where pain is graded on a scale from 0 to 3. Alternatively, pain may be graded on a visual analog scale ranging from 0 to 10 as a stand-alone scoring tool, where 0 corresponds to no pain and 10 to the maximum pain a person could experience.
**DEFINITIONS**

**PALMA operation**  
*See* femorofemoral saphenous vein transposition.

**Pampiniform plexus**  
A loose network of small veins that drain each gonad. In females, it forms the ovarian vein, while in males it also drains the epididymis and ascends as part of the spermatic cord. Intra-abdominally, the plexus of veins forms the testicular vein. Abnormal dilatation of the pampiniform plexus, which may cause male infertility, is called a varicocele.

**Paraná maneuver**  
Named after the town of Paraná, Argentina, this maneuver makes use of a proprioceptive reflex to test venous-muscle-pump–induced flow by pushing a standing patient slightly off-balance to cause muscle contraction to maintain posture, followed by muscle relaxation. This maneuver is very useful for detecting valvular incompetence by using duplex ultrasonography, when legs are painful or very edematous and therefore manual or cuff compression may cause discomfort.

**Parietal theory of varicose vein pathogenesis**  
Theory of varicose vein pathogenesis that supports the concept that dilatation of the vein wall is related to a primary weakness of the wall due to a loss of elastic fibers. Due to the vein lumen dilatation, the venous valves progressively become incompetent.

**PARKES WEBER syndrome**  
Another complex form of congenital vascular malformations similar to KLIPPEL-TRENAUNAY syndrome, but it also has an additional vascular malformation, ie, an arteriovenous malformation besides a venous, lymphatic, and capillary malformation. The clinical aspects are similar to those of KLIPPEL-TRENAUNAY syndrome with a port-wine stain, limb overgrowth, and dilated superficial veins, but the existence of one or more arteriovenous malformations remains a main vascular defect of PARKES WEBER syndrome. Most cases are sporadic, although recent studies suggest that it might be caused by mutations in the RASA1 gene.

**PAVCNIK valve**  
A percutaneously placed bioprosthetic venous valve that contains a venous segment attached by fine Prolene® sutures to a metal exoskeleton.

**Peak reflux velocity**  
The maximum velocity of the retrograde flow that occurs inside an incompetent venous segment; it is measured using pulsed-wave or continuous-wave Doppler during a provocation measure (eg, VALSALVA maneuver or sudden release of a distal manual or cuff compression or alternative maneuvers).

**Pedal vein**  
A deep vein located on the dorsum of the foot. It drains the deep dorsal digital and metatarsal veins and continues in the anterior tibial veins.
Pelvic congestion syndrome
Condition characterized by dull, noncyclical, positional (exacerbated by activity or prolonged standing) lower back, pelvic, and upper thigh pain, which worsens throughout the day, dyspareunia, and postcoital discomfort, as a result of ovarian or internal iliac vein tributary reflux that may or may not be accompanied by varicosities of the pelvis, vulvar, perineal, posterior thigh, and gluteal areas. It occurs mostly in multiparous women. Diagnosis is confirmed by transcutaneous ultrasound exploration, transvaginal ultrasound and venography or magnetic resonance venography. Percutaneous embolization may be used to treat this condition.

Pelvic varices
Abnormally dilated veins of the pelvis that are most often the result of ovarian or internal iliac vein tributary reflux.

Pelvic varicosity
See pelvic varices.

Pelvic vein embolization
A percutaneous interventional procedure to treat reflux of the pelvic vein tributaries of the internal iliac veins and ovarian veins. Its main indications include management of pelvic congestion syndrome, but also the treatment of labial, vulvar, perineal, gluteal, or leg varicosities. The most used embolic material includes coils, glue, foam, and liquid sclerosants.

Pelvic vein reflux
Incompetence of the pelvic venous valves, mainly the internal iliac vein tributaries and the ovarian veins, that leads to pelvic vein hypertension, resulting in varices and symptoms of pelvic congestion syndrome or labial, vulvar, perineal, gluteal, and leg varicosities that frequently present with an atypical pattern.

Pentoxifylline
A xanthine derivative originally used to treat intermittent claudication and shown to be relatively effective in treating venous leg ulcers with or without concomitant compression. Pentoxifylline acts primarily by increasing red blood cell deformability, reducing blood viscosity, and decreasing the potential for platelet aggregation and thrombus formation.

Percutaneous ablation of perforating veins
Minimally invasive interventional technique that involves directly puncturing the incompetent perforating vein and delivering energy by means of radiofrequency or laser, leading to the denudation of the endothelium, coagulation of the blood, and shrinkage of the vessel wall, effectively ablating the perforating vein.

Percutaneous balloon angioplasty or percutaneous venoplasty
Minimally invasive interventional technique used to dilate obstructed or occluded deep vein segments in patients with signs, such as edema or other clinical signs and symptoms of chronic venous insufficiency. It involves accessing the vein by puncture, guidewire, and sheath introduction, crossing the lesion with a guidewire, and placing a balloon across the lesion; the balloon is then inflated, which reestablishes the vein lumen. In most cases of iliac or iliocaval angioplasty, additional stenting is required.
Percutaneous laser therapy for telangiectasia and varicose veins
Laser light is emitted from a laser device and transmitted through the skin to the targeted vessel, which leads to heating, coagulation, and destruction of the telangiectasia or varicose vein. Laser light is selectively absorbed by oxyhemoglobin and converted to thermal energy, minimizing damage to the surrounding tissues.

Percutaneous mechanical thrombectomy
Minimally invasive interventional technique that removes a thrombus from native vessels, including veins, and bypass grafts. Used mainly for deep vein thrombosis and pulmonary embolism, it has a lower risk of hemorrhagic complications compared with thrombolysis. Most devices use the hydrodynamic or the mechanical fragmentation principle.

Perforate INvaginate (PIN) stripper
See PIN stripper.

Perforate INvaginate (PIN) stripping
See PIN stripping.

Perforator vein
A vein that perforates the muscular fascia to connect superficial veins with deep veins. In the lower limbs, it usually presents with inward flow, from the superficial to the deep veins, except in the foot. Perforator veins may or may not contain valves.

Perforator vein ablation or perforator ablation
Surgical removal or percutaneous closure of a perforator vein by means of thermal, nonthermal, or chemical ablation.

Perforator vein incompetence
Reverse (outward) flow in a perforating vein of the lower extremity for >0.5 seconds: a pathologic perforator vein has a diameter ≥3.5 mm and may be located beneath a healed or open venous ulcer (C5 or C6 of the CEAP classification).

Perforator vein ligation or perforator ligation
Surgical ligation or clipping of an incompetent perforating vein that can be performed by means of a direct approach with a small incision or as part of a subfascial endoscopic perforating vein surgery.

Perforator vein open surgery or perforator open surgery
Surgical ligation or clipping of incompetent perforating veins using any kind of open surgical procedure.

Perfusion scintigraphy
Diagnostic technique using a radioactive tracer and scintillation counter to produce images (scintigrams) of internal parts of the body, particularly the lungs, to exclude or confirm a suspected pulmonary embolism.
**Perineal varicosities**
Varicose veins situated in the perineum (the surface region in both males and females between the pubic symphysis and the coccyx, inferior to the pelvic diaphragm, and between the lower limbs). It includes varicose veins at the anogenital region and the vagina in females. Perineal varicosities may be related to pelvic vein incompetence; they are more common in multiparous women.

**PERTHES test**
A clinical test, which is no longer used, that attempted to establish the competence of deep veins and perforator veins. With the patient standing up, a tourniquet was positioned on the limb. After prolonged exercise, the varicose veins below the tourniquet empty if the deep system is patent and competent, and the perforator veins are competent. Conversely, if the varicose veins do not empty below the tourniquet, the deep system is abnormal and/or the perforator veins are incompetent.

**Pharmacomechanical thrombolysis**
A technique for clot removal for iliofemoral or cavoiliofemoral deep vein thrombosis that aims to restore deep venous patency rapidly and to preserve or limit damage to the infrainguinal deep venous valves. This procedure uses a combination of catheter-directed thrombolysis and the adjunctive use of mechanical devices, involving rotational, rheolytic, or ultrasound technologies, to deliver the thrombolytic agent as well as produce some combination of thrombus fragmentation, distribution of thrombolytic drug through the thrombus, and/or thrombus aspiration.

**Phenindione**
An oral anticoagulant indandione, which functions as a vitamin K antagonist, similar to warfarin. It is a synthetic anticoagulant that acts by interfering with factors II, VII, IX, and X. It produces its effect 36 to 48 hours after the initial dose; the effect wanes over a period of 48 to 72 hours after it has been stopped. It is now rarely used because of a high incidence of severe adverse effects.

**Phlebectasia**
Dilation of the veins. *See also* venectasia and varice, variscose vein, and varicosity.

**Phlebectomy**
Surgical removal of a vein or a segment of a vein that is usually performed through a mini skin incision and a phlebectomy hook. The phlebectomy hook is inserted through the mini incision and then the varicose vein is hooked, extracted, and subsequently fixed with a clamp (eg, mosquito clamp). Next, the vein loop is usually divided and the two ends are sequentially pulled out with gentle traction using two clamps.

**Phlebectomy hook**
Surgical instrument specifically designed to exteriorize a vein through a mini incision. The stainless steel hook is similar to a tiny crochet hook with a blunt tip and a straight shaft. Different types of hooks are available, including the MULLER hook, OESCH hook, VARADY hook, etc.
Phlebectomy power device
See powered phlebectomy.

Phlebitis
Aseptic inflammation of a vein, usually referring to a superficial vein, that is mainly caused by thrombosis due to venous stasis, hypercoagulability, and local endothelial trauma due to an injury, indwelling catheter, or surgery. It is more properly called superficial vein thrombosis. It may occur as part of a systemic disorder (thromboangiitis obliterans, BEHÇET’s syndrome, etc). Clinically, the inflamed area swells and becomes red and warm. A tender cord-like mass may form under the skin.

Phlebography
See venography.

Phlebology
Phlebology (from Greek Phlebo = vein and Logos = speech) is the part of medicine that studies the anatomy, physiology, pathology, diagnosis, and treatment of acute and chronic vein disorders. Modern Phlebology is an interdisciplinary science that is in continuous evolution. Phlebology societies do exist in most countries.

Phlebotomy (venesection, venotomy)
The act of drawing or removing blood from the venous system through a small incision or puncture to obtain a sample for analysis and diagnosis. Therapeutic phlebotomy may be performed for certain blood disorders (eg, hemochromatosis, polycythemia vera). Venotomy is also the opening of the vein wall to perform an endoluminal procedure.

Phlebotonic drug
See venotonic drugs or venoactive drugs.

Phlegmasia alba dolens or white leg
Acute painful swelling and pallor of the entire lower limb due to extensive deep vein thrombosis, usually involving the iliofemoral segment with obstruction of the outflow tract; phlegmasia is an old term for inflammation. In patients presenting with this condition, early thrombus removal may be considered.

Phlegmasia cerulea dolens or painful blue leg
Extremely acute painful swelling and cyanosis of the entire leg due to extensive deep and superficial vein thrombosis, usually involving the iliofemoral segment with complete obstruction of the outflow tract. It may progress to venous gangrene if left untreated. The patient is in severe pain and develops tachycardia, circulatory collapse, and shock. The mortality of this condition is high, if left untreated. It requires an immediate intervention using catheter-directed thrombolysis, mechanical thrombectomy, or surgical thrombectomy. Fasciotomy may be indicated for urgent reduction of the compartment pressures in the calf.
**Photoplethysmography**
An optical technique to evaluate blood volume changes in the microvascular bed of tissue, using a simple, low-cost, and portable device. A probe consisting of a light source and a light-sensitive diode is positioned on the skin. Changes in the number of red cells in the dermis affect the backscatter of light, which is detected by the light-sensitive diode. In practice, photoplethysmography estimates the venous refilling time; it is also known as light reflection rheography.

**Photothermolysis**
Technique where laser energy is applied to the skin to remove cosmetically unappealing blemishes in skin color and texture. In phlebology, it may be used to treat telangiectasia, localized capillary malformations, etc.

**Pigmentation or hyperpigmentation**
Darkening of an area of the skin that may be due to an excess of melanin, or, in the context of venous disease, increased hemosiderin deposits. It is one of the clinical signs of chronic venous insufficiency, caused by venous hypertension. It is classified as C4a according to the CEAP classification.

**PIN stripper**
An instrument used for invaginated stripping of a saphenous trunk.

**PIN stripping**
Surgical removal of a saphenous vein by means of a PIN stripper, which is inserted in a saphenous trunk. The stripper is then advanced retrogradely through the vein and exteriorized through a small distal skin incision. The stripper is encircled by a suture in the proximal end of the vein and the vein is inverted as it is stripped out of the leg.

**Plantar venous subcutaneous network**
Superficial veins in the sole of the foot.

**Plethysmography**
A method of assessing the volume of blood flowing through a limb (or other body part) by measuring the changes in volume using strain gauges, air cuffs, impedance electrodes, or other methods. See also air plethysmography, photoplethysmography, and occlusion plethysmography.

**Polidocanol**
Sclerosing agent, used intravenously to treat incompetent veins, including telangiectasia, reticular veins, and varicose veins including saphenous trunks. It can be used in its liquid form or injected as foam after mixing the sclerosing agent with air or physiological gas.

**Polytetrafluoroethylene patch for containing neovascularization**
A small prosthetic patch (2 x 3 cm) used after saphenofemoral junction ligation or after repeat saphenofemoral junction ligation to contain neovascularization. It is secured to the saphenous stump and/or the common femoral vein to cover the anterior half of the latter. The patch is intended to form a physical barrier to prevent the extension of neovascularization.
**Popliteal fossa perforating vein or popliteal fossa perforator**
Perforating vein that is connected with the popliteal vein; it usually has a tortuous course when it is incompetent. It can be recognized on duplex ultrasonography from its typical location in front of the lateral condyle of the femur, lateral from the saphenopopliteal junction. It is commonly described, mistakenly, as a recurrence after small saphenous vein surgery.

**Popliteal fossa varicose network**
Tortuous network of varicosities at the saphenopopliteal junction after previous intervention in the popliteal fossa, such as ligation or thermal ablation. These varicose veins may connect directly to the popliteal vein or they may connect with incompetent veins in the thigh (eg, GIACOMINI vein, cranial extension of the small saphenous vein, gluteal or pelvic veins, sciatic nerve varices, and sciatic veins). Also called neovascularization at the saphenopopliteal junction.

**Popliteal vein**
Deep vein accompanying the popliteal artery, formed by the union of the transverse crural deep veins (anterior tibial veins) and the longitudinal crural deep veins (posterior tibial and fibular veins). The popliteal vein is often duplicated; it ascends through the popliteal fossa and enters the adductor canal as the femoral vein. The soleal and gastrocnemius veins drain in the popliteal vein as well as usually the small saphenous vein, which ends at the saphenopopliteal junction. See Figures 4 and 10.

**Popliteal vein aneurysm**
A localized dilatation of the popliteal vein. Its definition remains controversial: a dilatation with a diameter of at least two or three times the diameter of the vein above or below, or a diameter of >20 mm. It may be fusiform, saccular, or eccentric. It may be a life-threatening disorder due to the risk of pulmonary embolism. The options for repair include tangential excision and primary repair, excision with interposition, or surgical ligation. See Figure 4.

**Popliteal vein entrapment**
External compression of the popliteal vein by aberrations or hypertrophy of the gastrocnemius muscles or other anatomic structures. It may cause symptoms and signs of chronic venous disease and even deep vein thrombosis.

**Popliteal vein external banding**
Surgical procedure consisting of local reduction in the size of the popliteal vein by externally encircling it with a piece of vascular graft to restore deep venous valvular competence in limbs with KISTNER grade 3 and grade 4 deep venous reflux and chronic venous insufficiency.

**Portland valve or PAVCNIK valve**
Bioprosthetic venous valve consisting of processed small intestinal submucosa (predominantly collagen with some residual growth factors) stretched between a nitinol square stent and fashioned to create a bicuspid valve design.
**Port-wine stain**
A cutaneous and/or mucosal capillary malformation (according to the current International Society for the Study of Vascular anomalies classification) that is usually present from birth. The term port wine refers to the dark crimson color that is commonly seen. Previously known as nevus flammeus.

**Posterior accessory saphenous vein**
Superficial, often extrafascial, vein in the thigh and/or leg that tracks posterior and parallel to the great saphenous vein. It usually drains into the proximal great saphenous vein near the saphenofemoral junction. In the lower leg, it may also be referred to as the LEONARDO’s vein or the posterior arch vein. *See Figure 1.*

**Posterior labial veins (female)**
Female equivalent of the posterior scrotal veins. A collection of veins that drain the female perineum into the vesical venous plexus. It drains into the internal iliac vein via an anterior division corresponding to the arterial supply.

**Posterior leg lateral gastrocnemius perforator vein**
Part of a group of posterior calf perforating veins. It drains into the lateral gastrocnemius vein, it may not be connected to the small saphenous vein, and it usually arises halfway down the posterior calf, lateral to the intergemellar perforating veins.

**Posterior leg medial gastrocnemius perforator vein**
Part of a group of posterior calf perforating veins. It drains into the medial gastrocnemius vein, it may not be connected to the small saphenous vein, and it usually arises halfway down the posterior calf, medial to the intergemellar perforating veins.

**Posterior scrotal veins (male)**
Male equivalent of the posterior labial veins. Venous drainage for the scrotum into the vesical venous plexus. Drains into the internal iliac vein via an anterior division corresponding to the layout.

**Posterior thigh circumflex vein**
A tributary of the great saphenous vein or the posterior accessory saphenous vein, which ascends obliquely in the posterior thigh. It may arise from the small saphenous vein, from the proximal extension of the small saphenous vein, or from the lateral venous plexus of the proximal thigh. An extension of the small saphenous vein that communicates with the great saphenous vein via the posterior thigh circumflex vein. May also be referred to as the GIACOMINI vein.

**Posterior thigh perforator vein posterolateral**
Perforating vein that pierces the semitendinosus and biceps femoris muscles usually 10 to 20 cm above the popliteal fossa. It drains into the femoral and/or deep femoral veins.

**Posterior thigh perforator vein posteromedial**
Perforating vein that pierces the adductor muscles. It usually drains into the femoral vein.
**Posterior tibial perforator veins**
The posterior tibial veins are the lower medial perforator veins of the leg, first described by Franck COCKETT, and divided into 3 groups: higher, middle, and lower, located 11, 8, and 5 cm above the medial malleolus, respectively. They are commonly connected to the tributaries of the great saphenous vein. The lower one could be considered a medial ankle perforator vein.

**Posterior tibial veins**
Usually paired veins located alongside the posterior tibial artery. They drain the plantar aspect of the foot and posterior compartment of the leg and form the popliteal vein with the anterior tibial vein. They usually receive several perforating veins along the medial aspect of the lower leg. *See Figure 4.*

**Postthrombotic syndrome or postthrombotic disease**
A long-term complication of deep vein thrombosis. Patients with postthrombotic syndrome present with a spectrum of disease due to venous hypertension secondary to deep venous obstructive disease and/or valvular incompetence. Disease severity can be assessed using the VILLALTA score and the GINSBERG score, and may be mild, moderate, or severe. The severity of postthrombotic syndrome is associated with the proximal extent of the deep vein thrombosis, with iliofemoral thrombosis most likely to result in postthrombotic syndrome.

**Postthrombotic varicose vein**
Chronically scarred or occluded superficial vein or varicosity after superficial vein thrombosis. May leave a residual firm lump or cause recurrent episodes of superficial vein thrombosis.

**Postural diameter change**
Observed decrease in saphenous vein diameter from the standing to supine positions. The decrease in vein diameter is thought to be around 20% to 25% and may be less apparent in older and overweight patients and in those with saphenous reflux. The postural diameter change is calculated as a percentage using the following formula: (standing diameter – lying diameter) / standing diameter x 100. It reflects the elasticity of the vein wall when exposed to different hydrostatic pressures.

**Postural vasoconstriction reflex**
*See* venoarterial reflex.

**Power pulse AngioJet™**
Pharmacomechanical peripheral thrombectomy device for recanalization of acutely thrombosed arteries and veins. Designed for vessel recanalization with a single treatment, it consists of a treatment catheter and control console. The treatment involves high-pressure delivery of lytic drugs into the thrombus using the power pulse™ technique, followed by aspiration of the thrombus material. *See also* AngioJet™.

**Powered phlebectomy**
Treatment for nonsaphenous varicose veins as an alternative to traditional phlebectomy. Powered phlebectomy involves inserting an endoscopic transilluminator to visualize the varicose vein clusters. A suction device with protected surgical blades is inserted through a second incision in the leg and the varicosities are cut and removed by suction. This procedure is usually performed under general anesthesia in addition to a saphenous procedure.
PREPIC (French acronym for Prévention du Risque d’Embolie Pulmonaire par Interruption Cave) study. In English: inferior vena cava interruption for preventing pulmonary embolism
Randomized clinical trial (published in 1998) that evaluated the role of inferior vena cava filters in patients with proximal deep vein thrombosis. A 2 x 2 design was used (inferior vena cava filter vs no filter; unfractionated heparin vs low-molecular-weight heparin). The study concluded that the routine use of inferior vena cava filters in addition to anticoagulation led to a modest reduction in the risk of pulmonary embolism, but this was offset by a doubling of the risk of recurrent deep venous thrombosis at 2 years.

PREPIC 2 study
Randomized clinical trial (published in 2015) that evaluated the role of inferior vena cava filters in reducing the risk of recurrent pulmonary embolism in high-risk patients. The study showed that, in patients with acute pulmonary embolism and a high risk of recurrence, the routine use of retrievable inferior vena cava filters did not reduce the risk of symptomatic pulmonary embolism compared with anticoagulation alone. See PREPIC to understand the acronym.

PREsence of Varices After Interventional Treatment (PREVAIT)
A term used to describe the presence of either residual or recurrent varices after a previous intervention. Although residual varicose veins after incomplete treatment and new, recurrent varicose veins are clinically distinct entities, there can be considerable difficulty in accurately classifying varicose veins after a previous treatment. Therefore, PREVAIT was introduced as an all-encompassing term to describe all patients with varicose veins after previous interventions. Adapted from VEIN-TERM.

Primary venous incompetence
Retrograde flow of abnormal duration in any venous segment caused by idiopathic venous valve failure. A common contributing factor to lower limb venous hypertension. Also known as primary venous reflux. Adapted from VEIN-TERM. See Figure 12.

Private venous circulation in the lower limb
The phenomenon of blood refluxing down the great saphenous vein, entering the deep veins via perforating veins, moving cephalad on calf muscle contraction, and with a proportion refluxing again down the great saphenous vein, thus taking a circular pathway, according to TRENDELENBURG’s description.

Profunda femoral vein
Accompanies the profunda femoris artery and receives multiple perforating veins to facilitate venous drainage of the thigh. It joins the femoral vein by means of one or more branches in the proximal thigh to form the common femoral vein. It is an extremely important inflow vessel to the iliofemoral venous segment. See also deep femoral vein. See Figure 4.

Prophylactic caval filter
Several designs of filters in various sizes and shapes are placed in the infrarenal segment of the inferior vena cava, specifically to trap emboli and prevent a pulmonary embolism.
**Prostacyclin**
A physiologically active lipid compound that inhibits platelet activation and therefore prevents the formation of the platelet plug required for primary hemostasis. Prostacyclin also acts as a vasodilator, which is prescribed for pulmonary hypertension, RAYNAUD’s disease, and other causes of limb ischemia. Clinically available prostacyclin analogs include epoprostenol and iloprost. Also known as prostaglandin I₂.

**Prostatic venous plexus (male)**
Responsible for the venous drainage of the prostate and consists of a well-defined plexus formed by prostatic veins. The plexus communicates with the vesical venous plexus and drains into the internal iliac vein.

**Prosthetic sleeve valvuloplasty**
Surgical procedure to restore valvular competence to a dilated incompetent vein. The VEDENSKY spiral is a sleeve of Dacron, polytetrafluoroethylene, or metal, etc, which is used to constrict and compress the vein circumferentially, to approximate the valve leaflets better, and to restore valvular competence. This technique did not achieve good long-term results.

**Prosthetic venous valve**
Implantable venous valve designed to restore venous competence. Proposed venous valve designs have usually consisted of a metal scaffold with an organic or inorganic material to form the valve shape. It must be of low thrombogenicity and immunogenicity, and made of material with suitable flexibility and durability.

**Protein C deficiency**
Congenital or acquired condition resulting in thrombophilia. Activated protein C is a natural anticoagulant, so deficiency results in a prothrombotic tendency. Heterozygous protein C deficiency is inherited in an autosomal dominant fashion. Genetic mutations cause either type I (quantitative) or type II (functional) protein C deficiency.

**Protein S deficiency**
Congenital or acquired condition resulting in thrombophilia. Protein S is a cofactor for the action of activated protein C, so a deficiency results in a prothrombotic tendency. Hereditary protein S deficiency is autosomal dominant and thrombosis may be seen with heterozygous or homozygous deficiencies.

**Proximal thrombosis**
Refers to any lower extremity deep venous thrombosis located in the popliteal, femoral, or iliac veins or the inferior vena cava. In modern practice, anatomical classification of acute deep venous thrombosis as iliofemoral or femoropopliteal is more commonly used, because these terms differentiate disease severity, management strategy, and prognosis better. Also known as proximal deep vein thrombosis.

**Pruritis**
*See* itching.
PSATAKIS silastic sling procedure
Surgical procedure to restore venous valve competence in the popliteal vein. A silastic sling is looped around the popliteal vein and attached medially to a knee flexor tendon and laterally to the biceps femoris. The action is intended to be dynamic, with the popliteal vein open when the leg is straight, but kinked shut (by the tense silastic sling) during knee flexion. This procedure superseded earlier descriptions using gracilis or biceps femoris tendons.

Pubic vein
Usually arises from the obturator vein and ascends on the posterior surface of the body of the pubis. It drains into the external iliac vein.

Pudendal perforator veins
Veins connecting superficial venous tributaries in the groin, proximal thigh, perineum, and genital region (including the vulva and labia) to pudendal or other deep pelvic veins.

Pudendal varicose veins
Varicosities in the proximal medial thigh or genital region arising from the genital-vulvar area, which often travel down the leg. They frequently appear during and after pregnancy.

Pudendal (vesicoprostatic) plexus (male)
Venous plexus lying behind the lower part of the symphysis pubis and arcuate pubic ligament; it lies anterior to the bladder and prostate. The main tributary is the dorsal vein of the penis, and the pudendal plexus communicates with prostatic and vesical plexuses. It drains via the vesical plexus into the internal iliac vein (anterior division).

Pulmonary embolism or pulmonary thromboembolism
Obstruction of a pulmonary artery caused by an embolus. The cause is usually thromboembolic secondary to lower extremity deep vein thrombosis, but the embolic source may not be apparent. A pulmonary embolism is commonly subclinical, but common presenting symptoms include dyspnea, tachypnea, pleuritic chest pain, and hemoptysis. Pulmonary embolism is a common cause of sudden death.

Pulse repetition frequency
The number of pulses of ultrasound (send and receive cycles) sent by the transducer per second. Optimization of pulse repetition–frequency settings allows for accurate duplex ultrasonography assessment of blood flow. Low pulse repetition frequency (also referred to as low scale) may be used to examine low velocities, such as venous flow. However, higher flow, such as arterial flow, will result in aliasing if the pulse repetition frequency is too low.

Pulse-spray technique in thrombolysis
Technique for high-pressure delivery of a lytic agent into a thrombus during thrombolysis procedures to achieve better thrombus resolution and shorter treatment times. It may be used in isolation using a multiple sidehole catheter or as part of a pharmacomechanical thrombolysis procedure. See also AngioJet™.

Quality of life in venous disease
A patient-reported assessment of chronic venous disease severity and an important outcome measure after venous interventions. Quality of life can be quantified using generic and disease-
specific questionnaires. Generic questionnaires allow comparisons to be made across populations of patients with different diseases based on standard elements. Disease-specific questionnaires, using specific scales, provide precise details about the impact of a disease or therapeutic effects. Combining the two questionnaires is the best strategy when using quality of life.

Radial vein
Deep veins of the upper limb that are usually paired; the two radial veins are a continuation of the palmar metacarpal veins that accompany the radial artery on the lateral aspect of the forearm just distal to the elbow. They join the ulnar veins to form the brachial veins. See Figure 7.

Radiofrequency ablation
A minimally invasive endovenous thermal ablation procedure used in the treatment of varicose veins. Vein puncture, catheter positioning, and tumescent anesthesia are all performed under ultrasound guidance. The impedance in the vein wall to the passage of the radiofrequency energy causes heat destruction. In addition, a secondary inflammatory response enhances vein wall destruction. Continuous pullback and segmental radiofrequency ablation systems are available.

Radiofrequency generator
A medical device that generates radiofrequency energy, which is designed to heat an element. Depending on the specific generator, monopolar or bipolar electrodes may be used and power settings may be adjusted. In the context of venous disease, radiofrequency generators are used for endovenous radiofrequency thermal ablation procedures where treatment temperatures vary from 85°C to 120°C.

Radiofrequency-induced thermotherapy
An endovenous thermal ablation technique for the treatment of incompetent superficial veins (introduced in 2007). The technique is similar to other endovenous thermal ablation procedures. A flexible catheter (5Fr in diameter, spherical tip) with a distal bipolar thermal electrode (1.5 cm in length) is heated with a continuous pullback in the vein, with a foot switch control. The impedance of the venous tissue is indicated by an acoustic signal (impedance feedback).

RAJU’s valvuloplasty
This valvuloplasty procedure, which was described by RAJU in 1983, was a modification of the KISTNER internal valvuloplasty; it used a transverse supravalvular venotomy through which the free margins of the valve leaflets were plicated and tightened under direct vision. Conversely, the transcommissural valvuloplasty proposed by RAJU in 2000 is an external valvuloplasty technique performed by placing transluminal sutures along the valve attachment lines, which simultaneously close the valve attachment angle and tighten the valve cusps.

Recirculation index
Ratio of the volume of venous blood refluxing down the saphenous vein divided by the antegrade volume. It is measured using duplex ultrasonography with the subject standing and bearing weight on the contralateral leg. Reflux is induced with a calf compression or contraction maneuver, manually or with a pump. A recirculation index >1 indicates recirculation. It may be used to quantify reflux and superficial venous insufficiency.
**Recombinant tissue plasminogen activator**
Tissue plasminogen activator is a protein involved in thrombolysis (breakdown of thrombus). It is a protease that catalyzes the conversion of plasminogen to plasmin, which is the major enzyme responsible for thrombus breakdown. Tissue plasminogen activator may be manufactured using recombinant deoxyribonucleic acid technology, referred to as recombinant tissue plasminogen activator. In the treatment of acute deep vein thrombosis, tissue plasminogen activator may be delivered into the thrombus by catheter-directed thrombolysis or a pharmacomechanical thrombolysis technique.

**Recovery nitinol filter**
The Recovery nitinol filter is a retrievable inferior vena cava filter composed of 12 nitinol wires, 6 arms, and 6 legs, resulting in dual-level protection. Nitinol is a metal alloy of nickel and titanium that exhibits two closely related and unique properties: shape memory effect (reforms at a predetermined design filter shape at body temperature) and super elasticity. The filter is designed for inferior vena cava diameters up to 28 mm.

**Recurrent deep venous thrombosis**
Symptomatic relapse of deep venous thrombosis, which is usually confirmed with duplex ultrasonography. Treatment principles should be the same as for primary deep venous thrombosis, but long-term anticoagulation is usually required if a nonreversible risk factor is present or in case of unprovoked deep venous thrombosis. Recurrent deep venous thrombosis is associated with an increased risk of postthrombotic syndrome.

**Recurrent varice or recurrent varicose vein**
Three patterns of varices may occur, including true recurrences, residual veins, and new varicose veins after interventional treatment. True recurrences represent varices emerging in the same territory (neovascularization, recanalization after endovenous treatment, etc). Varices visible at 1 month postoperatively are defined as residual varices (tactical error, technical failure). Varicose veins in a new territory or in veins normal at the time of initial treatment are quoted as progression of the disease. Adapted from VEIN-TERM.

**Recurrent varices after surgery (REVAS)**
In 1998, the acronym REVAS was defined as the presence of varicose veins in a lower limb previously treated with varicose vein surgery. REVAS has been replaced with PREVAIT (PREsence of Varices After Interventional Treatment), which includes surgery as well as any kind of interventional treatment. Adapted from REVAS.

**Refilling time**
Venous refill time or refilling time is the time taken to return to 90% of the baseline resting venous volume after a period of calf muscle contraction. Calf-muscle contraction maneuvers are performed to empty the foot and lower leg of venous blood. The return of venous blood can then be assessed using an ambulatory venous pressure measurement, photoplethysmography, or air plethysmography. A venous refill time <18 to 20 seconds is associated with chronic venous insufficiency.

**Reflux quantification**
Venous reflux is defined as retrograde flow in a vein segment lasting >0.5 seconds in the superficial and >1 second in the deep venous system; it is usually assessed using pulsed-wave
Doppler or color technology. Reflux time does not correlate with the severity of chronic venous disease. Assessing other hemodynamic parameters, such as peak reflux velocity (cm/s), mean reflux velocity (cm/s), and total refluxing volume (mL) may improve discrimination between various clinical stages of chronic venous disease.

**Refluxive valve**
See valvular incompetence.

**Renal vein**
The left renal vein courses anteriorly between the superior mesenteric artery and the aorta before emptying into the inferior vena cava; it drains the lumbar, ovarian/gonadal, and suprarenal veins. The right renal vein opens directly into the inferior vena cava with a shorter course from the kidneys and drains the ovarian vein in 10% of cases.

**Residual reflux**
A nonspecific term to describe reflux or retrograde flow that remains after an intervention used to treat venous incompetence. Examples include: reflux (>0.5 seconds) in the below-knee segment of the great saphenous vein after a successful above-knee ablation; reflux in the trunk following endothermal treatment; remaining reflux in the leg after only one incompetent system has been treated successfully; reflux (>1 second) after a deep valve repair for gross deep venous incompetence.

**Residual varicose veins or residual varices**
Residual varicose veins are varices remaining after interventional treatment. Causes of residual varices may be incomplete diagnosis, tactical error (intentional or unintentional decision not to treat a significantly refluxing vein), technical error, or treatment failure, ie, when the treated vein remains patent. Adapted from REVAS and VEIN-TERM.

**Residual volume fraction**
A term used in plethysmography that is the ratio of the volume of the leg after exercise divided by the volume at baseline prior to exercise. It describes the ability of the muscle pump to empty the venous volume of the leg.

**Restless legs**
Common neurologic disease (prevalence 5% to 8.8%), also called WILLIS-EKBOM disease, that is defined by bilateral leg (or arm) movements with dysesthesia occurring at night and decreasing with movement, such as walking. Low serum iron levels contributing to dopamine synthesis are recognized as a possible pathophysiological mechanism. Brain function abnormalities of the thalamus and probably genetic susceptibility may play a role, but precise pathophysiological mechanisms remain unproven. Dopamine agonists can be used to treat severe symptoms. This can also be a rare symptom in chronic venous disorders.

**Reticular vein**
Dilated bluish subdermal veins that range from 1 mm to <3 mm in diameter and are usually tortuous. This excludes normal visible veins in people with thin, transparent skin. Synonyms include blue veins, subdermal varices, and venulectases. In the CEAP classification, reticular veins are part of the C₁ clinical class. Adapted from the CEAP classification.
Retrievable cava filter
A type of inferior vena cava filter, which is an endovascular device implanted into the inferior vena cava to trap embolic material and prevent life-threatening pulmonary emboli. Indications for inferior vena cava filters include contraindication to anticoagulants and recurrent venous thromboembolism despite optimal anticoagulation. Retrievable inferior vena cava filters are designed to be removed once the high-risk period has elapsed. However, in clinical practice, not all retrievable filters are removed.

Reviparin (clivarine)
A low-molecular-weight heparin used in a weight-dependent dose; it is extracted from porcine intestinal mucosa. The average molecular weight is about 3900 Daltons. It is used to prevent (once-daily dose) or treat (twice-daily dose) deep venous thrombosis and pulmonary embolism. In patients with renal insufficiency or obese patients, antifactor Xa levels should be measured and doses adjusted accordingly. It has been withdrawn from the market in several countries.

Risk factors for chronic venous disease
See risk factors for varicose veins and risk factors for chronic venous insufficiency (C₃-C₆).

Risk factors for chronic venous insufficiency (C₃-C₆)
Advanced age is the most important risk for chronic venous insufficiency. Obesity and genetic predisposition play an important additional role as well as stiff ankle and calf pump deficiency. There is no obvious sex difference for the prevalence of chronic venous insufficiency. Extended periods of standing or sitting and connective tissue laxity (previous hernia surgery or flat feet) may also be risk factors for both moderate and severe disease. In addition, a previous deep vein thrombosis is an important risk factor for developing chronic venous insufficiency.

Risk factors for deep venous thrombosis
Transient and reversible risk factors include injury or any surgery, pregnancy, abortion, oral contraception or hormone replacement therapy, smoking, prolonged bed rest in the hospital or at home, and long journeys (driving or flying). Permanent risk factors include age (>60), personal or family history of deep venous thrombosis or pulmonary embolism, neoplasm, chemotherapy, previous central venous catheterization or pacemaker placement, thrombophilia, neurologic disease with extremity paresis, obesity, limited mobility, heart failure, and inflammatory bowel disease.

Risk factors for deep venous thrombosis recurrence
The same risk factors mentioned for primary deep venous thrombosis also increase the risk of recurrent deep venous thrombosis. Additional risk factors for deep venous thrombosis recurrence include blood disorders, immobility, and inadequate anticoagulation. Patients with severe thrombophilia, including a natural inhibitor deficiency, lupus anticoagulant, or double heterozygous or homozygous carriers of factor V Leiden or the prothrombin mutation are at a high risk for deep venous thrombosis recurrence.

Risk factors for postthrombotic syndrome
Iterative iliofemoral deep venous thrombosis is the strongest risk factor; it is associated with a 1.3-fold increased risk of postthrombotic syndrome compared with deep venous thrombosis in the popliteal vein. The risk of postthrombotic syndrome is also higher after recurrent deep
venous thrombosis. Obese patients, patients with an inefficient calf pump, and patients who already have varicose veins have an increased risk of postthrombotic syndrome.

**Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)**
In general, risk factors for PREVAIT are incomplete or incorrect identification of the sources of reflux, technical or tactical failure, neovascularization (mainly after classic open surgery), and progression of the disease due to genetic predisposition, underlying anatomical anomalies, etc. In women, a subsequent pregnancy after a previous intervention for varicose veins may be a risk factor for recurrence.

**Risk factors for varicose veins**
Different conditions may increase the likelihood of developing varicose veins. For primary varicose veins, risk factors are family history (about half of all people who have varicose veins have a positive family history), older age, sex (more often higher in women than in men), pregnancy, overweight and obesity, lack of physical movement, and leg trauma. For secondary varicose veins, the obvious risk factor is postthrombotic syndrome. In some exceptional patients, varicose veins are congenital.

**Rivaroxaban**
A selective, direct antifactor Xa inhibitor that prevents thrombin activation and thrombus formation; it does not have an effect on platelets. This drug provides an oral anticoagulation therapy alternative to vitamin K antagonists. Irrespective of age (above 18 years of age), body weight, or sex, there is no dose adjustment. It is used for stroke prevention in nonvalvular atrial fibrillation, treatment of deep venous thrombosis and acute pulmonary embolism, and after hip and knee surgery to prevent venous thromboembolism.

**ROKITANSKY stenosis**
A long and diffuse segment of iliac vein stenosis with no collateral formation. As the severe inflammation of the wall subsides (phlebitis), cylinder fibrosis and scarring may impede any collateral development and expansion of the vein. Due to the lack of collaterals, this significant outflow obstruction may escape diagnosis with conventional techniques.

**Round ligament varices**
The round ligament (originating from the uterus exits the pelvis via the deep inguinal ring, passes through the inguinal canal and continues on to the labia majora) can be a location of varices during pregnancy due to hypervascularity of the uterine wall and pelvic venous obstruction by the gravid uterus, increased cardiac output, and changes in hormonal levels. Color duplex ultrasonography is required to make the diagnosis. Management is conservative during pregnancy. Complications include ruptured and acute thrombosis.

**Sacral venous external rectal plexus**
The net of interconnected veins outside the muscular layer of the rectum. The lower and middle parts of the plexus drain into the internal iliac vein. The upper part of the external plexus drains into the portal vein via the superior rectal vein, a tributary of the inferior mesenteric vein. The external rectal plexus is surrounded by loose connective tissue, which is prone to significant dilation in response to increased venous pressure.
**Sacral venous internal rectal plexus**
The net of interconnected submucosal veins that are arranged in a circular pattern immediately above the anal orifice.

**Saphenofemoral junction**
The anatomical connection of the great saphenous vein with the common femoral vein. The location of the saphenofemoral junction is constant, with very few variations. The term saphenofemoral junction is used to describe a segment that is more extended than the anatomical junction, which extends distally along the saphenous trunk to the penultimate preterminal valve. The saphenofemoral junction is one of the three major anatomical connections between the superficial and deep veins of the lower extremities. The other two are the saphenopopliteal junction and the perforating veins. See Figure 1.

**Saphenofemoral junction preterminal valve**
The first valve located distal (caudal) to the most proximal tributary of the great saphenous vein, usually within 4 cm of the saphenofemoral junction. In the presence of the terminal valve, it is the second most proximal valve of the great saphenous vein.

**Saphenofemoral junction terminal valve**
The most proximal valve of the great saphenous vein that lies between the orifice of the great saphenous vein and the most proximal tributary. Its incidence is about 70%, and it can be a monocusp valve.

**Saphenopopliteal bypass**
The ipsilateral great saphenous vein in the lower limb with femoral vein obstruction is distally divided and the proximal end anastomosed end-to-side to the popliteal vein below the obstructed femoropopliteal axis. A complementary arteriovenous fistula between the popliteal artery and the caudal vein to the saphenopopliteal anastomosis is recommended in the presence of poor inflow.

**Saphenopopliteal junction**
The anatomical connection of the small saphenous vein, which is usually in the popliteal vein; the termination of the small saphenous vein is quite variable. In reality, the term saphenopopliteal junction is used to describe a segment that is more extended than the anatomical junction, which extends distally along the saphenous trunk to the penultimate preterminal valve. It is one of the three major anatomical connections between the superficial and deep veins of the lower extremities. The other two are the saphenofemoral junction and the perforating veins. See Figures 3 and 10.

**Saphenopopliteal junction preterminal valve**
The first valve located distal (caudal) to the most proximal tributary of the small saphenous vein. In the presence of the terminal valve, it is the second most proximal valve of the small saphenous vein.

**Saphenopopliteal junction terminal valve**
The most proximal valve of the small saphenous vein that lies between the orifice of the small saphenous vein and the most proximal tributary.
**Saphenous compartment**
Subcutaneous adipose tissue surrounded by two layers that contains the great saphenous vein. 
*See Figure 9bis. See also* Egyptian eye.

**Saphenous eye**
*See* Egyptian eye.

**Saphenous insufficiency**
Presence of pathological saphenous reflux, which is defined as reflux that lasts longer than a certain time (usually 0.5 sec).

**Saphenous recirculation**
The flow of blood that escapes from the deep veins into the superficial veins, travels downward, and reenters the deep veins. TRENDELENBURG, who first described this process, called it private circulation.

**Saphenous reflux**
A phenomenon of a flow reversal in response to a provoking maneuver, such as the VALSALVA maneuver, or a rapid release of compression of a more distal leg.

**Saphenous stripping**
Surgical removal of a saphenous vein using a stripper, ie, a device that is inserted into the lumen of the vein and removes the venous segment between two incisions. In some procedures, such as cryostripping and other techniques, lower incisions are avoided. Saphenous ablation is usually segmental.

**Saphenous veins**
All longitudinal veins running in the interfascial space (including the great saphenous vein and the small saphenous vein). The other superficial veins (accessory saphenous veins as well other tributaries) are quoted as nonsaphenous veins and numbered A5 in the CEAP classification.

**Sciatic vein**
1. Dilated vein of the sciatic venous plexus. The veins of the plexus are valveless and, in rare cases, can dilate, forming varices as one of the manifestations of chronic venous disease.
2. Persistent sciatic vein is an embryonic vascular remnant of the axial vein, which is the main deep vein of the human embryo at 8 to 15 weeks. This vein becomes, in 90% of the adults, a small venous arcade along the ischiatic nerve connected to the hypogastric vein.

**Sclerosant agent**
A chemical agent that, upon injection into the vein lumen, causes endothelial damage leading to sclerosis of the venous segment.

**Sclerosing foam**
Foam made from a sclerosant agent and a gas.

**Sclerotherapy**
Treatment of veins with liquid sclerosant agents or sclerosing foam.
DEFINITIONS

**Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)**
A technique that is based on the application of perivascular compression when injecting a liquid solution or foam into telangiectases and/or reticular veins. This perivascular compression is achieved by intradermal and subcutaneous infiltration with saline or diluted anesthetic solution. Tumescence of the tissues induces mechanical obliteration of cutaneous veins, which is more effective than is elastic compression. START is supposed to be less painful than conventional sclerotherapy, thus enhancing its effects and yielding better results.

**Secondary patency**
Patency of a vessel restored by an invasive (surgical or endovascular) treatment after the vessel was occluded despite a previous intervention. Secondary patency rate, as a percent of successful reinterventions after an initial failure of vascular reconstruction, is one of the three technical outcome measures of vascular reconstructions along with primary and primary-assisted patency rates.

**Secondary venous incompetence**
Presence of venous reflux due to recanalization of a thrombus in a vein segment.

**Segmental reflux**
Any anatomical segment, including femoral, popliteal, crural for deep veins and above and below the knee for the great saphenous vein.

**Selective ablation of varices under local anesthesia**
In this method, the primary goal of the treatment is a suppression of the varicose reservoir and not the suppression of truncal reflux. The method was popularized in the 80’s when M. Hume, past president of AVF created the “Society for the preservation of the main trunk of the saphenous vein” in the US. The French surgeons P. PITTALUGA and S. CHASTANET reintroduced the concept known as ASVAL, French acronym of Ablation Sélective des Varices sous Anesthésie Locale.

**Self-expanding stent**
A stent that expands upon its release from a holder; it does not require the use of additional devices to expand it to its full size after positioning in a vessel.

**SEPS**
*See* subfascial endoscopic perforator surgery.

**Sequential pneumatic compression**
A submodality of intermittent pneumatic compression in which several bladders of the compression garment are inflated and deflated in a timed sequence.

**SERVELLE-MARTORELL syndrome**
An eponym used to represent a complex form of vascular malformations. It is characterized by venous or, rarely, arterial malformations and bony hypoplasia, which usually affects the
limbs. Destruction of the spongiosa and cortical bone by intraosseous vascular malformations causes a unique condition of bone hypotrophy, which results in a shortening of the limb with cystic changes in the medullary cavity and destruction of the joints. Also known as angio-osteohypotrophic syndrome.

**Short-stretch bandage**
See inelastic bandage.

**Skin hyperpigmentation**
Abnormally increased pigmentation that may be related to venous disease. Its presence indicates a $C_{4a}$ clinical class according to the CEAP classification. Pigmentation can also be adverse sequelae of sclerotherapy, transcutaneous laser, or high-intensity pulsed light.

**Small saphenous vein**
A superficial venous trunk originating from the dorsal venous arch of the foot and usually terminating in the popliteal vein. It runs along the posterior aspect of the calf. In more than 75% of extremities, the small saphenous vein terminates at the saphenopopliteal junction. Less frequently, it continues in the small saphenous vein extension. See also cranial extension of the small saphenous vein. See Figures 3 and 11.

**Sodium morrhuate**
Sclerosant that contains the sodium salts of the fatty acids of cod liver oil mixed with a local anesthetic. It was found to be responsible for local tissue damage if extravasated and potential allergenic reactions, including anaphylaxis.

**Sodium tetradecyl sulfate**
An anionic surfactant that is used as a sclerosant in a sterile nonpyrogenic solution preparation.

**SOTTIURAI’s valvuloplasty**
Internal valvuloplasty using a T-shape venotomy that combines supravalvular semicircular and longitudinal venotomies for better valve exposure. First described by SOTTIURAI.

**Specific quality of life outcome response–venous**
A validated disease-specific quality of life questionnaire for chronic venous disease. Items are grouped into five dimensions that are weighted to a maximum value of 20 each, thus yielding an overall maximum score of 100.

**Spider vein**
See telangiectasia.

**Spiral computed tomography angiography for pulmonary embolism**
Currently, the most accurate test for the diagnosis of pulmonary embolism.

**Stab avulsion or stab phlebectomy**
A technique to remove varicose veins via several small incisions.
**Stasis dermatitis**
Dermatitis or skin inflammation presents various patterns, including circumscribed, diffuse, and disseminated. In addition, stasis dermatitis can be acute or chronic. The presence of this sign classifies patients as $C_4a$ according to the CEAP classification. Also called varicose eczema.

**Static stiffness index**
An index computed by the difference in interface pressure measured in both lying and standing positions. It characterizes the “stiffness” of the compression device (bandages or stockings). By definition, a static stiffness index $>10$ characterizes a stiff device and $\leq 10$, a nonstiff device.

**Steam ablation**
A thermal ablation technique that utilizes steam as an energy source.

**Strain-gauge plethysmography**
A plethysmographic technique that uses strain gauge around the leg filled with mercury or an alloy. Changes in electrical resistance, which are proportional to changes in leg circumference, are used to calculate volume changes or flow in mL/100 mL of tissue/min.

**Strain obstruction syndrome**
Strain obstruction syndrome of the femoral vein was first reported in 1956 by Åke GULLMO (Sweden). He observed that, in patients with venous disorders of the leg, straining was often accompanied by complete obstruction of the femoral vein induced by hemia protrusions. This strain obstruction of the femoral vein creates a sudden large pressure increase in the deep and superficial veins of the leg.

**Streptokinase**
The enzyme produced by $\beta$-hemolytic streptococci. Medical preparations were used as a thrombolytic agent for systemic and catheter-directed thrombolysis.

**Strip test for valve competence**
*See* milking test.

**STURGE-WEBER syndrome**
A complex vascular malformation of mesodermal and ectodermal origin manifested by a port-wine stain on the forehead and scalp. Also present are various neurological manifestations caused by malformed blood vessels in the pia mater overlying the brain on the same side of the head as the birthmark. Neurological manifestations include seizures, mental retardation, and ipsilateral leptomeningeal angioma and glaucoma. Also known as encephalotrigeminal angiomatosis.

**Subclavian vein**
A segment of the deep venous system of the upper extremities located between the axillary vein and the junction with the internal jugular vein where the two form the brachiocephalic vein. It follows the subclavian artery, but lies anterior to the anterior scalene muscle, while the subclavian artery lies posterior to this muscle. *See* Figures 7 and 11.

**Subdermal varices**
*See* telangiectasia.
**Subfascial endoscopic perforator surgery**
A minimally invasive surgical technique to treat incompetent perforating veins. It utilizes endoscopic instrumentation in the subfascial space to visualize directly and interrupt the perforating veins under the deep fascia.

**Superficial accessory of the great saphenous vein**
Thigh or lower leg tributary of the great saphenous vein. It runs parallel and lateral to the great saphenous vein and joins it very close to the saphenofemoral junction. Sometimes it may join the common femoral vein or the external pudendal vein directly. The upper third of this vein is located under the superficial fascia, but, further down, its course is superficial.

**Superficial accessory of the small saphenous vein**
Lower leg tributary of the small saphenous vein. It runs parallel and lateral to the small saphenous vein and joins it very close to the saphenopopliteal junction when present.

**Superficial circumflex iliac vein**
A tributary of the great saphenous vein that runs with its corresponding artery into the groin and usually drains into the great saphenous vein or sometimes directly into the common femoral vein. *See Figure 1.*

**Superficial digital veins (dorsal and plantar) of the lower limb**
In the lower limb, the dorsal digital veins are located on the dorsum of the foot. They receive, in the clefts between the toes, the intercapitular veins from the plantar digital veins and join to form the short common digital veins. The plantar digital veins originate from plexuses at the plantar aspects of the digits and unite to form the four metatarsal veins. Prior to this, they receive intercapitular veins to join the dorsal digital veins.

**Superficial digital veins (dorsal and plantar) of the upper limb**
In the upper limb, the dorsal digital veins run from both sides of the fingers and unite to form the three dorsal metacarpal veins, which are the preferred site for venous cannulation. The palmar digital veins are connected to the dorsal veins with the oblique intercapitular veins.

**Superficial dorsal vein of the clitoris or penis**
A pair of veins on the dorsal aspect in each side of the penis or clitoris that are tributaries of the external pudendal vein.

**Superficial epigastric vein**
Drains the lower and medial part of the anterior abdominal wall. It joins the great saphenous vein near the saphenofemoral junction. It is also connected with the paraumbilical and thoracoepigastric veins. The inferior vena cava and portal vein systems are linked through these two connections of the superficial epigastric vein, thereby establishing a portacaval communication. *See Figure 1.*

**Superficial external pudendal vein**
Vein that receives blood from the skin and superficial fascia of the penis or clitoris, ie, the anterior scrotal, labial, and pubic region, and drains into the great saphenous vein or the common femoral vein.
Superficial metatarsal veins (dorsal and plantar)
The dorsal metatarsal veins receive blood from the dorsal digital veins and drain the metatarsal area of the foot to provide blood to the dorsal venous arch of the foot. The plantar metatarsal veins run along the metatarsal spaces and unite to form the plantar venous arch, which accompanies the plantar arterial arch. In addition, these veins communicate with the dorsal veins of the foot via the perforating veins.

Superficial palmar venous arch
This arch is in the hand and receives blood from the common palmar digital veins. It drains the oxygen-depleted blood from the hand to the ulnar vein. See Figure 7.

Superficial perineal veins
Tributaries that collect blood from the superficial structures of the perineum, such as the external genitalia, labia, and scrotum. They drain into the external veins, such as the external pudendal vein, but they also communicate with the internal veins that drain into the internal iliac venous system. These veins are responsible for the development of atypical lower limb varicose veins in the case of pelvic congestion insufficiency.

Superficial thrombophlebitis
See superficial venous thrombophlebitis.

Superficial vein
Truncal and tributary veins located in the superficial compartment delineated on the surface by the skin and in its deep plane by the muscle fascia (aponeurosis), such as the great saphenous vein and its tributaries in the lower limbs or the basilic vein in the upper limbs.

Superficial vein thrombosis
Thrombosis that develops in the superficial veins near the surface of the skin. It presents with skin redness and tenderness around the hardened vein due to the associated inflammation.

Superficial venous insufficiency
This term is usually used in presence of great saphenous or/and small saphenous incompetence or reflux.

Superficial venous reflux or incompetence
The presence of retrograde flow in the superficial veins due to the compromised function of the valves; it can be primary or secondary and, in this etiology, it can be related to either superficial vein thrombosis or deep vein obstruction or reflux.

Superficial venous thrombophlebitis
See superficial vein thrombosis.

Superimposed leggings
Leggings designed to overcome the problem of nonadherence to wearing compression stockings because of difficulties in putting them on and the feeling of constraint. Superimposed leggings are a kit of stockings composed of understockings, which are superimposable.
**Superior gluteal perforator vein**
The vein that accompanies the corresponding superior gluteal perforator artery. There are several perforator veins (and arteries) that drain blood from the superior gluteal musculocutaneous structures to the superior gluteal veins. The superior gluteal perforator vein and artery are very important when a superior gluteal artery perforator flap transfer is planned in plastic surgery.

**Superior gluteal veins**
The veins that receive tributaries from the buttock and accompany the superior gluteal artery. They enter the pelvis via the greater sciatic foramen and very often unite before their confluence with the internal iliac vein.

**Superior mesenteric vein**
The vein that drains blood from the small bowel (jejunum and ileum) and cecum. It follows a path similar to that of the superior mesenteric artery. At its termination, behind the neck of the pancreas, it joins the splenic vein to form the hepatic portal vein.

**Superior rectal vein**
This vein originates from the hemorrhoidal plexus, which communicates with the middle and inferior hemorrhoidal veins. From the lower pelvis, it crosses, along with the superior rectal artery, the left common iliac vessels, and, as it proceeds upward, it becomes the inferior mesenteric vein. Also called the superior hemorrhoidal vein.

**Superior vena cava**
A short vein with a large diameter that is formed from the brachiocephalic veins in the anterior right superior mediastinum. This vein does not have valves. It receives blood from the head, neck, upper limbs, and chest (except for the heart) and drains into the right atrium.

**Superior vena cava syndrome**
Syndrome caused by an obstruction of the superior vena cava, which is frequently due to a malignant disease in the chest. As the venous return from the upper part of the body is seriously compromised, dilated collateral veins in the anterior chest wall develop. The syndrome is characterized by face and upper limb edema, shortness of breath and coughing, headache, difficulty swallowing, and stridor. Rarely, it may become life-threatening, except if severe neurological symptoms and airway obstruction occur.

**Suprapatellar perforator vein**
Knee perforator veins that connect tributaries of the anterior accessory vein, the external marginal vein, or the thigh anterior circumflex veins with the articular veins of the knee or with the patellar vein. Adapted from the Nomenclature of the veins of the lower limb: an international interdisciplinary consensus statement.

**Suprapubic veins**
The superior, inferior, and superficial epigastric veins that drain into the saphenofemoral junction or directly into the femoral vein, or into an obturator vein. In the case of internal iliac or common iliac vein thrombosis, compression, agenesis, or hypoplasia of an iliac vein, these veins dilate and produce suprapubic varicose veins.
Suprarenal cava filter
A filter implanted in the suprarenal inferior vena cava in the case of inferior vena cava thrombosis that extends up to the confluence of the renal veins. This procedure is done to prevent a pulmonary embolism, a potentially life-threatening complication, in patients who cannot receive full anticoagulation therapy or in those who, despite full anticoagulation therapy, have experienced a pulmonary embolism.

Suprarenal inferior vena cava reconstruction
Reconstruction of the inferior vena cava, which extends from the renal veins to the right atrium. Curative or palliative resection and reconstruction of this vein may be required when invaded by tumors. Restoration of the lumen is achieved using a ringed, reinforced, polytetrafluoroethylene graft or a conduit constructed from the femoral vein or bovine pericardium.

Suprarenal or adrenal veins
The two veins, also called veins of WALSHAW, receive blood from the adrenal glands. The right one drains into the inferior vena cava and the left into the left renal or left inferior phrenic vein. They sometimes form anastomoses with the inferior phrenic veins.

Surgical repair of deep venous valve incompetence
This term encompasses different procedures: valvuloplasty when valves are present and reparable (primary incompetence) and other techniques (valve transposition, valve transplant and neovalve) when valves are absent or destroyed (congenital and secondary incompetence).

Surgical venous thrombectomy
Removal of a thrombus from an acutely thrombosed proximal deep vein, most often the iliac veins, to treat phlegmasia cerulea dolens, a potentially limb-threatening complication of deep vein thrombosis. The procedure entails exposing the common femoral vein, venotomy, Fogarty thrombectomy of the iliac veins, compression evacuation of the thrombus from the veins distal to the venotomy, and closure of the venotomy, with an option of creating an arteriovenous fistula to prevent early rethrombosis.

Symptomatic varicose veins
Varicose veins associated with symptoms, such as pain, limb heaviness, cramping, burning, swelling, or itchiness, etc. Adapted from SYM Vein.

Telangiectasia
Small, dilated, flat, thin-walled, blue or red veins <1 mm in diameter that are seen near the surface of the skin. Numerous telangiectasias near the foot and ankle are termed corona phlebectatica paraplantaris. Commonly termed spider veins, they are distinguished from reticular veins by having no profile, but telangiectasia, spider veins, and reticular veins are all classified as C₁ according to the CEAP classification. Adapted from the CEAP classification.

Telangiectatic matting
A description of the appearance of many tiny new vessels (<0.1 mm in diameter) following sclerotherapy. The process reflects the response of the skin to injury in susceptible patients. High injection pressures or persisting reflux in telangiectatic areas has been considered causal. Telangiectatic matting usually resolves after a few months.
**Temporary arteriovenous fistula**
A surgically constructed communication between an artery and a vein with the purpose of increasing the venous velocity flow and preventing early thrombosis of the proximal vein segment. An example is its use after the deployment of an iliac vein stent and concurrent femoral endovenectomy. The intention is to facilitate venous patency in the early postoperative period when the reconstruction is at the highest risk of thrombosis, but its real efficacy has been challenged.

**Terminal valve**
*See* saphenofemoral junction terminal valve and saphenopopliteal junction terminal valve.

**TESSARI technique**
Method of producing foam for immediate use by agitating liquid sclerosant with a gas at a predefined ratio using two interconnected syringes, which are pumped back and forth rapidly about 10 times until compact foam with microscopic bubbles is produced. Named after L. TESSARI (Italy).

**Testicular veins**
Veins arising from the pampiniform plexus of the testis as multiple veins, which enter the spermatic cord; they unite to form a single vein. The right one usually drains into the inferior vena cava and the left into the left renal vein. If they become incompetent, they exert back pressure into the pampiniform plexus producing a varicocele.

**Thigh compression**
Compression that is commonly in the form of a tubular compression sleeve made of elastic material to support and protect the thighs during sporting and day-to-day activities. Medically, thigh compression using bandages or medical stockings is used to provide support after venous surgery or venous ablation procedures. However, this is usually in conjunction with concurrent calf compression. Strategically placed foam pads can provide extra pressure over treated areas.

**Thigh extension of the small saphenous vein**
A branch of the small saphenous vein that can continue up the thigh, where it may have 4 terminations: (i) direct connection with the great saphenous vein; (ii) connection with the posterior accessory saphenous vein, (iii) termination into the deep veins via a perforating vein; and (iv) termination as multiple deep or superficial tributaries.

**Thoracic outlet syndrome**
Describes a group of heterogeneous, multifactorial symptoms because of solitary venous, arterial, or nerve compression or a combination of these when the subclavian vein, artery, and trunks of the brachial plexus are compressed between the first rib and the clavicle. Also known as the thoracobrahricial outlet syndrome to include the brachial plexus, which is not a structure arising out of the thorax. The clinical manifestations and treatment are specific to the organ affected.

**Thread vein**
*See* telangiectasia and spider veins.
**Throbbing**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Throbbing is described by patients as a pulsating pain along the lower limb. Adapted from SYM Vein.

**Thrombolysis**
*See* venous thrombolytic treatment.

**Thrombophilia**
Abnormal tendency for the blood to coagulate, making the patient susceptible to deep vein thrombosis or pulmonary embolism. Congenital causes include the factor V Leiden mutation, prothrombin mutation, and deficiencies in protein C, protein S, and antithrombin III. Acquired causes include antiphospholipid syndrome, lupus anticoagulant, heparin-induced thrombocytopenia, active cancer, nephrotic syndrome, and myeloproliferative disorders.

**Thrombophlebitis**
Pathological term used to describe the presence of a thrombus within any vein with surrounding inflammation. Often abbreviated to phlebitis, it is used by clinicians to describe an indurated, red, and tender area of skin inflammation caused by an underlying superficial vein thrombosis. This term is now discouraged and, for superficial veins, has been replaced by the term superficial vein thrombosis.

**Tightness**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Patients describe tightness as the feeling that their legs are compressed as if caught in a clamp. Adapted from SYM Vein.

**Tilt table**
A table with a pivot in the middle that allows rapid tilting from the horizontal, which is useful for venous investigations to assess reflux and obstruction. It is used universally to distend veins for cannulation and empty them prior to ablation.

**Tilted inferior vena cava filter**
An inferior vena cava filter whose axis is not parallel to the axis of the inferior vena cava. All inferior vena cava filters tend to tilt at deployment. A tilt <5 degrees occurs in about 50% of cases. Greater tilting is associated with inappropriate placement.

**Tingling**
A nonpathognomonic symptom that is present or absent in patients presenting with a chronic venous disorder. Tingling is the sensation of prickling or “pins and needles” in the legs. Adapted from SYM Vein.

**Tinzaparin**
A low-molecular-weight heparin produced by the fractionation of heparin. It is usually administered as a daily subcutaneous injection. The main indication is prophylaxis or the initiation of treatment for a venous thromboembolism.
**Tiptoe maneuver**
A standard test used for measuring the pumping performance of the calf muscle with plethysmography or ultrasound. The subject is positioned with equal weight bearing on both feet, slightly apart, and then requested to stand on their tiptoes for a second or two and return to the original position. The volume pumped out divided by a calf-volume reference standard is termed the ejection fraction. Ten tiptoes are the standard recommended for measuring ambulatory venous pressure.

**Tissue inhibitors of metalloproteinases (TIMPs)**
Endogenous inhibitors of the matrix metalloproteinases (MMPs). More than 12 types have been identified, the most common being: TIMP1, TIMP2, TIMP3, and TIMP4. Since MMPs are endopeptidases that degrade the extracellular matrix, many cell behaviors may be inhibited by the action of TIMPs, including adhesion, migration, proliferation, and angiogenesis. Furthermore, inhibitors of matrix degradation, by inhibiting collagen degradation, may help strengthen the venous wall and its associated valves.

**Tissue plasminogen activator**
A naturally occurring enzyme that is found on vascular endothelial cells. It catalyzes the conversion of plasminogen to plasmin. Plasmin is the major enzyme responsible for breaking down the fibrin in a thrombus. Thrombolysis (fibrinolysis) can be augmented therapeutically by administering tissue plasminogen activator systemically or locally using an intravenous catheter in the treatment of a venous thromboembolism.

**Titanium GREENFIELD™ filter**
Titanium version of the vena cava filter; developed by Lazar J. GREENFIELD at the University of Michigan. It was designed to trap emboli and prevent them from reaching the lungs, and its main advantage over the stainless-steel version is that it lacks ferromagnetism and allows for the use of magnetic resonance imaging.

**Tourniquet effect**
The inadvertent creation of a tourniquet with a poorly fitting or poorly applied dressing, bandage, or compression stocking.

**Trabeculated vein**
A vein whose lumen is characteristically thickened and scarred with white fibrous tissue, synchia, mural intercommunications, and several lumens; may occur many months or years after a thrombosis.

**Transcommissural valvuloplasty**
An external valvuloplasty, performed without phlebotomy; it was described by RAJU in 1983. Valve competence is restored by reducing the space between the valvular agger close to the cornua. In contrast to a transmural valvuloplasty, the suture involves the cusps and the free border around them.
Transilluminated powered phlebectomy
A method for removing varicose veins using a technique, such as liposuction. It is performed under general, spinal, or epidural anesthesia. Target veins are transilluminated with a subcutaneous probe, while another probe, inserted in the opposite direction, fragments and aspirates the varicose veins into a suction bottle. It is indicated for extensive clusters of large varicose veins, which would overburden existing techniques, such as foam sclerotherapy or multiple phlebectomies.

Transmural valvuloplasty
An external valvuloplasty performed after subadventitial exposure of the valve station; it was described by Robert KISTNER in 1999. Interrupted or continuous nonabsorbable sutures are placed from outside the lumen through the wall to bring together the two adjacent valve attachment lines. In contrast to RAJU’s transcommissural valvuloplasty, the cusps are not involved in the suture.

TrapEase® vena cava filter
A permanent inferior vena cava filter made of nitinol to minimize artifacts during magnetic resonance imaging. It looks like a flattened, hexagonal cage when deployed with a basket design at both ends for dual clot capture. The central barrel resembles a barbed stent, which effaces the venous wall to facilitate deployment and reduce the risk of migration and tilting. The OptEase® filter is the retrievable version.

Trellis thrombectomy catheter
A mechanochemical thrombectomy device with inflatable isolation balloons at both ends used to remove a section of a deep vein thrombus. An oscillating nitinol wire breaks up the thrombus, while thrombolytic agents lyse the remaining pieces. The resulting soup can be aspirated and the vein flushed clean. Advantages include reduced thrombolytic infusion times and reduced thrombus removal times.

TRENDELENBURG position
The head-down, legs-up position on a tilt-table used in the investigation and treatment of venous disease. This contrasts with the reverse TRENDELENBURG position where the body is tilted head up and legs down. Named after the German surgeon Friedrich TRENDELENBURG (1844-1924).

TRENDELENBURG test
The classic tourniquet test, which is used to identify the source of reflux by observing the filling of varicose veins from leg elevation to dependency. If the filling is delayed by the application of a thigh tourniquet, then the source of reflux is above the compressed area.

TRIPATHI trap door valve repair
Surgical approach to a venous valve station to perform internal repair; described by Ramesh TRIPATHI (India) in 2001. Indicated in patients with primary deep vein valvular incompetence who have nonhealing or recurrent venous ulcers. A “trapdoor” is cut into the vein wall using three edges of a rectangle and then reflected to expose the valves. Commonly, the valve cusp edges are plicated at the commissures to tighten the brim of the cusps and restore competency.

Trivex
See transilluminated powered phlebectomy.
DEFINITIONS

**Trophic changes**
*See* venous skin changes.

**Trophic disorders**
*See* venous skin changes.

**Truncal venous ablation**
The destruction, closure, or sealing of the saphenous trunks using endothermal techniques, chemical injury, mechanical damage, or implantation options with glue, suture material, or staples. Combinations are possible.

**Truncular malformation**
Anatomical/embryological subclassification of any vascular malformation (arterial, venous, arteriovenous, capillary, lymphatic, combined). It is based on the anatomy and arrest of the structure at different stages of embryonic life. Truncular malformations form from the later stages of developmental arrest. The venous malformation component of KLIPPEL-TRENAUNAY syndrome is mostly a truncular malformation. Extratruncular malformations arise from an earlier stage of developmental arrest.

**Tumescent anesthesia**
The ultrasound-guided needle placement of a volume of local anesthetic around the saphenous trunk or varicose tributaries to facilitate their destruction. This volume protects the surrounding structures from thermal injury, reduces venous caliber, and empties the blood from the veins. It is used in conjunction with endothermal ablation, foam sclerotherapy, and phlebectomy treatment.

**Tumescent solution**
The composition of the liquid used to surround the target veins prior to destruction. A common formula is 40 mL of 0.5% lignocaine in 500 mL of normal saline. The addition of sodium bicarbonate may reduce pain by reducing the solution’s acidity. Automated injection pumps control the infusion rate to allow the operator to concentrate on accurate needle positioning.

**Ulnar veins**
Veins located in the forearm next to the ulnar bone that follow the same course as the ulnar artery. These veins, which are a continuation of the superficial palmar arch, collect blood from the medial aspect of the forearm and join the radial veins to form the brachial veins at the antecubital fossa. *See Figure 7.*

**Ultrasonography**
Medical application of high-frequency sound (>20 KHz) for the imaging of internal human organs and other structures. Today, it is widely used to image the heart, blood vessels, internal organs, progress of pregnancy, and existence of embryo abnormalities. Additionally, several diagnostic and therapeutic interventional procedures are accomplished easily under ultrasonographic guidance.
**Ultrasound**
Sound waves where the frequency exceeds the upper limit of sound audible to the human ear (>20 KHz). Most ultrasound devices operate from 20 KHz to several GHz. Ultrasound is used in several ways, such as B-mode to image internal organs or M-mode to study motion. Doppler ultrasound makes use of the Doppler effect to measure the velocity of moving objects, such as blood.

**Ultrasound mapping**
A diagnostic procedure that uses ultrasound to provide a detailed venous flow map and to depict any venous wall abnormalities. It is used for the assessment of the presence and extent of venous reflux and for planning the appropriate venous intervention. It is also used to determine the suitability of the saphenous veins to be used as arterial grafts and in the preoperative evaluation of the upper and lower limb veins for the creation of an arteriovenous fistula.

**Ultrasound monitoring**
The ideal modality for the follow-up of several conditions in medicine, such as the course of fetal maturation, gallbladder, kidney lithiasis, and hepatic and splenic diseases or venous compression. In vascular diseases, it can be used to follow up patients after an intervention (carotid endarterectomy or stenting, lower limb bypass surgery, endovascular repair of an abdominal aortic aneurysm, valve repair) as well as to assess the progress of the disease, arterial or venous, in various vascular beds.

**Ultrasound-guided foam sclerotherapy**
Procedure performed under ultrasound guidance for needle placement, injection, and dispersion of foam.

**Ultrasound-guided puncture, cannulation**
A technique to puncture a vein or an artery safely. Under the guidance of ultrasound, the vessel, superficial or deep, is located and punctured with a needle. Once the access has been achieved, a guide wire is introduced through the needle and then, upon the removal of the needle, a cannula or sheath is introduced over the wire. This technique provides safer vessel cannulation with less risk of complications, such as hematoma, arteriovenous fistula, or pseudoaneurysm.

**Ultrasound-guided sclerotherapy**
A method for the treatment of varicose veins. Under the guidance of ultrasound, the vein is punctured and then the sclerosant (liquid or foam) is injected inside the vein to produce an inflammatory reaction, scarring, and eventually closure of the vein.

**Unfractionated heparin**
An anticoagulant extracted from porcine or bovine intestinal mucosa. It has limited bioavailability as it binds to plasma proteins, platelets, macrophages, and endothelial cells and therefore results in a highly variable anticoagulant response. It inactivates several coagulation enzymes, including factors IIa, Xa, IXa, XIa, and XIIa, by binding to cofactor AT.

**UNNA boot**
A special gauze bandage impregnated with a thick creamy mixture of zinc oxide, calamine, acacia, glycerin, castor oil, and white petrolatum. Zinc promotes wound healing, eases skin
irritation, and keeps the area moist. The UNNA boot is used as a dressing for the healing of venous stasis ulcers. It is the extreme version of a short-stretch bandage. It is named for the German dermatologist Paul Gerson UNNA.

**Upper extremity deep vein thrombosis**
Thrombosis of the deep veins of the upper limb. Its incidence has increased over the last decades due to the wide use of central venous catheters for chemotherapy, bone marrow transplantation, hemodialysis, and parenteral nutrition. It may also occur in the context of thoracic outlet syndrome.

**Ureteric vein reflux**
Retrograde flow in the ureteric veins, which may be responsible for pelvic congestion syndrome.

**Urethral bulb veins (male)**
Veins located at the proximal penis that join the cavernous vein to form the internal pudendal vein.

**Urokinase**
A serine protease produced by the kidneys that is present in the blood and the extracellular matrix of various tissues. It was isolated from urine. Used as a thrombolytic agent, given intravascularly, it acts as a plasminogen activator. Urokinase is no longer used because it has been replaced by tissue plasminogen activator.

**Uterine veins (female)**
The two veins located on either side of the uterus that drain into the internal iliac veins. The uterine veins connect the uterine venous plexus to the internal iliac vein.

**Uterine venous plexus (female)**
A network of veins that emerge from both sides of the uterus and lie close to the vagina. This plexus receives blood from the uterus and, through the uterine veins, the blood goes to the internal iliac veins.

**Vaginal veins (female)**
Located with one on either side of the vagina, these veins drain the vaginal plexuses into the internal iliac veins.

**Vaginal venous plexus (female)**
Located on both sides of the vagina, these plexuses are connected with the uterine, vesicle, and hemorrhoidal plexuses. They may present anomalies in pelvic congestion syndrome.

**VALSALVA maneuver**
A maneuver that consists of exhalation against a closed airway, usually obtained by closing the mouth or blowing into a balloon. It is usually applied to detect deep vein reflux or superficial vein reflux.

**Valve**
See venous valve. See Figure 8.
**Valve agger**
*See* valvular agger. *See Figure 8.*

**Valve closure**
Phase of the valve cycle when the cusp-free borders are in contact, thereby avoiding any reflux.

**Valve closure time**
Time interval from the first cusp movement to the complete closure of the valve (approximately 100 to 200 ms).

**Valve commissure**
Space between the attachment of the free margins of the cusps, the union of the valve cornua. *See Figure 8.*

**Valve cornua**
The ending proximal part of the valvular agger, where the free border of the cusp converges on the vein wall. *See Figure 8.*

**Valve cuspid or cusp**
The intraluminal free component of the valve. It is half-moon shaped and is inserted in the venous wall at the valvular agger. Histologically, it consists of thin collagen fibers covered by endothelium. Usually cusps are paired into a valve. *See Figure 8.*

**Valve leaflet**
*See* valve cuspid or cusp.

**Valve opening**
Phase of the valve cycle when the valve is open, which allows for a normal flow direction. The duration of the valve opening is related to muscular activity, breathing rhythm, and all forces able to modify the pressure at the valve.

**Valve reconstruction**
Any surgical procedure addressing valve repair or the creation of a nonrefluxing deep vein segment.

**Valve repair**
*See* valve reconstruction.

**Valve sinus**
The space between the venous wall and the valve cusps. *See Figure 8.*

**Valve surgery**
Any surgical procedure designed to restore valve function.

**Valve transplantation**
Surgical procedure that consists of inserting a valved segment into a refluxing axis to obtain valve competence again. Usually, a donor segment from the axillary vein is inserted at the femoral or popliteal level.
**Valvular agger**
Thickened line where the valvular cusp is inserted into the vein wall. The shape is usually a double arch presenting a distally directed convexity. *See Figure 8.*

**Valvular function**
The main function of the valve is to avoid reflux during pressure variations related to muscular activity. A secondary function is to increase blood velocity in the space between the cusps.

**Valvular incompetence**
Failure in valvular function with consequent reflux during muscular activity.

**Valvular reflux**
A flow directed distally due to valvular incompetence. In the lower extremities, there are 4 degrees of reflux that can be distinguished based on its extent from the groin to the calf.

**Valvuoplasty**
A surgical procedure that consists of remodeling or correcting the shape of an incompetent valve to restore competence. First described by Robert KISTNER in 1968.

**Varice or varicose vein ablation**
*See* vein ablation.

**Varice pathogenesis**
The descending or valvular theory implies that varicose veins develop from incompetence in the terminal valve of the great saphenous vein. Reflux progresses in a retrograde direction and the valves become incompetent. The ascending or venous wall theory had many advocates since the 1980’s. Dilatation and reflux of the great saphenous vein and its tributaries are frequently found to precede saphenofemoral junction incompetence. The two theories imply that there are different therapeutic approaches.

**Varice, varicose vein, varicosity**
Subcutaneous dilated vein 3 mm in diameter or larger, when measured in an upright position. May involve the saphenous veins, saphenous tributaries, or nonsaphenous superficial leg veins. Varicose veins are usually tortuous, but tubular saphenous veins with demonstrated reflux may be classified as varicose veins. Adapted from the CEAP classification.

**Varicocele**
Presence of scrotal varicose veins.

**Varicography**
Radiologic examination of varicose veins by directly injecting contrast dye into the varicosities. The routine application of an ultrasound examination has reduced its application.

**Varicosity**
*See* varice, varicose vein, varicosity.
Vein
Blood vessel that carries blood back to the heart. Most veins have valves to prevent blood from flowing in the reverse direction. Due to their specific wall characteristics, veins are capacitance vessels.

Vein ablation
Removal or destruction of a vein by mechanical, thermal, or chemical means.

Vein atresia
A congenital condition in which a vein segment is absent or not patent; the inferior vena cava and femoropopliteal tracts are the segments most frequently involved.

Vein compression
See venous compression.

Vein obstruction
See venous obstruction.

Vein occlusion
See venous occlusion.

Vein of the bulb of the penis (male)
A tributary of the internal pudendal vein that drains into the internal iliac vein.

Vein of the bulb of the vestibule (female)
Drains into the internal iliac vein.

Vein segment transplantation or vein segment transfer
See valve transplantation.

Vein transposition
See KISTNER’s vein transposition.

Vein wall remodeling
A process after deep venous thrombosis where the vein wall presents continuous parietal modifications that involve matrix metalloproteinases.

Vena cava
Either of two large veins by which the blood is returned to the right atrium of the heart. However, the vena cava is not in itself a precise anatomical entity and so should not be used alone. Anatomically, it should be separated into the inferior vena cava and superior vena cava. It is also possible to speak of the left (inferior) vena cava.

Venectasia
Dilation of the veins. See also phlebectasia or varice, varicose vein, varicosity.
**Venepuncture or venipuncture**
A procedure to gain intravenous access for blood sampling, intravenous injection of drugs, including sclerosing agents to treat varicose veins. However, venipuncture is also the first step in introducing a catheter or probe in any kind of vein.

**Venesuture**
Surgical suture of a vein.

**Venoactive drugs**
A heterogeneous group of plant-derived, animal-derived, or synthetic medicinal products that have effects on edema and symptoms associated with chronic venous disorders. Even though venoactive drugs belong to different families, they share similar modes of action on capillary permeability, lymphatic drainage, orthostatic edema, venous tonus, leukocyte adhesion to the venous and valvular wall, release of inflammation mediators, and reduction in blood viscosity and red blood cell deformation.

**Venoarterial flow index**
Ratio of the volume of venous blood draining the leg divided by the volume of the arterial supply that is measured using duplex ultrasonography over the common femoral vein and common femoral artery. The subject is positioned at rest and supine on an examination couch. The venoarterial flow index is 1 when the patient is healthy and the index increases with superficial venous insufficiency. The additional volume from venous recirculation may explain this increase.

**Venoarterial reflex (postural vasoconstriction reflex)**
In the dependent position, blood flow in the leg decreases due to an augmentation in precapillary vascular resistance. This postural vasoconstriction reflex prevents loss of fluid and reduces the formation of orthostatic edema. This reflex tends to fall with age, partially explaining orthostatic edema in the elderly. It is also dysfunctional in severe chronic venous disease and contributes to the perpetuation of ulcers in patients who are not restricted to bed rest.

**Venoarteriolar response**
The precapillary vasoconstriction that occurs in healthy legs on dependency, which may be induced by gravitational venous distension and can be assessed by measuring skin blood flow using laser Doppler. This reflex is important for normal autoregulation of tissue perfusion and drainage. It fails in patients with peripheral arterial disease and chronic venous insufficiency. Also known as venoarteriolar reflex.

**Venoconstriction**
Narrowing of the vein diameter. Once a vein becomes circular in shape, the smooth muscle in its media responds to different stimuli. The stimulation by adrenergic nerves and the release of chemical mediators promote contraction of the wall musculature. Venoconstriction is triggered by various physiological stimulations, such as cold, standing, exercise, stress, hyperventilation, or the VALSALVA maneuver. Conversely, heat, lying down, ingestion of alcohol, and other drugs, relax venous tone.
DEFINITIONS

Venography
Angiography of the veins that is performed by injecting a contrast medium into the vein lumen. See also ascending phlebography/venography and descending phlebography/venography.

Venoplasty
A procedure where an inflatable balloon is inserted to widen the vein lumen.

Venotomy (phlebotomy, venesection)
A procedure performed surgically in which an incision is made in a vein.

Venotonic drugs
See venoactive drugs.

Venous ablation
An invasive technique that removes or destroys veins. This procedure may be surgical (stripping, phlebectomy), thermal (endoenous application of heat by laser, steam, or radiofrequency), or chemical (sclerosing agent or glue).

Venous aneurysm
Rare vascular disorder that may occur at any age and throughout the venous system (mostly in the legs, especially the popliteal vein, head, neck, abdominal, and thoracic veins) and involves a localized widening and bulging of a vein with a weakened wall, which may rupture or be complicated by local thrombosis. Aneurysms are described as saccular or fusiform, an important distinction when choosing a treatment. MALETI et al classify venous aneurysm as concentric (saccular, fusiform) or eccentric. In total, six types of morphology. See Figure 21.

Venous back flow
See venous reflux.

Venous balloon angioplasty
Insertion of a balloon-tipped catheter into a narrow or blocked vein, where the balloon is inflated to open or dilate the vessel and improve blood flow.

Venous bicuspid valve
Venous valves are mostly bicuspid (two), flap-like structures, although parietal venous valves have been reported with 1 to 5 cusps. The valve or leaflet wall has two intimal layers separated by tissue containing smooth muscle fibers, collagen fibers, and elastic tissue. Functionally, the valves close the lumen of the vein by bringing together the two free edges of the cusps during muscle diastole to prevent venous reflux. See Figure 8.

Venous bioprosthetic valve
Valves that have been developed to be implanted by using a transcatheter technique or open surgical technique.

Venous blow down
See venous reflux.
DEFINITIONS

**Venous blow out**
Dilatation of a superficial vein above or near an incompetent perforator vein. This clinical situation is often confused with simple venous dilatation. An ultrasound investigation can provide decisive information.

**Venous bypass**
A surgical process to reroute blood flow around a diseased vein by creating a new pathway for blood flow using venous or prosthetic materials in an anatomical or extra-anatomical position.

**Venous calf pump function**
The function of the venous pump that facilitates blood flow from the foot and calf to the more proximal vein segments. Contraction of the calf muscles compresses the muscle veins to push the blood toward the popliteal vein and increase the dynamic pressure at this level.

**Venous capacitance**
The maximum volume of blood that can be accommodated within the venous networks of the leg, which may be achieved by stationary standing or with a proximal occlusion cuff. Total venous capacitance includes the blood volume within the muscle pumping chambers, the venous reservoirs (deep, saphenous, and superficial), and the microcirculation. Venous capacitance increases with age and reflux.

**Venous claudication**
Symptom characterized by pain when walking in patients presenting with signs of chronic venous insufficiency. Differential diagnoses include arterial and neurogenic claudication (narrow lumbar canal). This infrequent symptom of postthrombotic syndrome, mainly after iliac or iliofemoral thrombosis, can affect patients mechanically, with an increase in venous pressure in the legs, or neurologically, following compression of the neurological components of the lumbar canal from dilatation of collateral veins.

**Venous clinical severity score (VCSS)**
Based on the clinical elements of CEAP, VCSS utilizes a progressive ranking of severity of chronic venous disease. Clinical items are graded from 0 to 3, which is helpful to evaluate disease improvement, and include scoring of pain, varicose veins, venous edema, skin pigmentation, inflammation, induration, and different items of leg ulcers. This precise evaluation allows for longitudinal and objective follow-up of a patient’s clinical condition, especially before and after a treatment.

**Venous compliance**
The ability of a vein to distend and increase in volume with increasing transmural pressure or the tendency of a vein to resist recoil toward its original dimensions when applying a distending or compressing force.

**Venous compressibility**
Veins are physiologically easy to compress, as demonstrated during an ultrasound examination. The pressure of the probe on a permeable vein induces its transitory flattening. However, if its lumen is obliterated, pressure does not change the shape of the vein. This compressibility is a major test in diagnosing venous thrombosis or venous obliteration after chemical or thermal ablation.
**Venous compression**
Narrowing or occlusion of the venous lumen because of extraluminal pressure. Adapted from VEIN-TERM.

**Venous disability score**
Score used to evaluate the effect of venous disease by quantifying the level of work-based disability. It is scored on a scale of 0 to 3, based on the ability to work an 8-hour day with or without provisions for external support. The total score represents the degree of disability attributable to venous disease.

**Venous disease**
Lesions and diseases of the veins of any part of the body.

**Venous disorders**
The full spectrum of morphological and functional abnormalities of the venous system, either acute or chronic. Adapted from VEIN-TERM.

**Venous drainage index**
A validated air plethysmography parameter that measures the rate of reduction in calf volume from leg dependency to leg elevation in mL/s. It is calculated from the venous drainage curve in exactly the same way that the venous filling index is calculated from the venous filling curve. It is used clinically as a noninvasive test to quantify venous obstruction.

**Venous drugs**
Part of the medical treatment of chronic venous disorders, including deep venous thrombosis and venous ulcers.

**Venous echogenicity**
Concerns the venous wall, which is modified by parietal fibrosis after thrombosis, thermal ablation, or chemical ablation; the obliteration of the vein is identified by its incompressibility with the probe of the ultrasound machine.

**Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)**
An inflammatory and pruriginous condition of the skin of the lower legs consecutive to venous hypertension (reflux, obstruction, obesity, articular ankylosis). This disorder corresponds to class C4a of the CEAP classification. It may be acute (redness, exudation, oozing) or chronic (dry and lichenified skin). Contact dermatitis is quite often associated with venous eczema; allergologival investigations are mandatory to detect sensitization.

**Venous edema (phlebedema)**
Limb swelling due to increased venous pressure that progressively stretches the venule and capillary wall, thereby increasing its permeability, resulting in peripheral edema, observed mainly in the evening. It is relieved by elevating the legs, using compression stockings, or taking venoactive drugs. Venous edema occurs as a result of both superficial and deep venous insufficiency (C3 of the CEAP classification). In chronic venous insufficiency, lymphatic drainage from the legs becomes overloaded and may decompensate secondarily, aggravating phlebedema.
**Venous embryology**
Venous development during the different stages of embryogenesis; this process is highly complex, with regression of most primitive axes before development of the mature venous system. This evolution explains the high intra-individual variability of venous anatomy. Venous malformations may be explained by the persistence of embryonic veins, such as in patients with Klippel-Trenaunay syndrome.

**Venous filling index (VFI)**
One parameter of venous plethysmography and phlebodynamometry (ambulatory venous pressure). VFI is a measure of reflux and is indicative of the degree of valvular insufficiency. It corresponds to the ratio of the 90% of the blood volume that filled the leg veins on standing from a recumbent position (venous volume in mL and the time needed for 90% filling of the veins in seconds).

**Venous filling time (VFT)**
Venous plethysmography techniques evaluate the changes in the volume of blood that fills the leg veins on standing from a recumbent position. Venous volume is measured in mL and the time needed for 90% filling of the veins (VFT90) in seconds. VFT may be measured by air plethysmography, photoplethysmography, and phlebodynamometry.

**Venous flow**
Blood flow in the veins; it is influenced by many factors, including the position of the limbs, exercise, temperature, drugs, and venous reflux or obstruction.

**Venous function**
The return of blood to the right side of the heart regardless of the position of the body (at rest and during exercise), a blood reservoir, regulator of cardiac output, and regulator of cutaneous temperature under different climatic conditions.

**Venous gangrene**
Term reserved for cases of gangrene of a limb that occur in the presence of an extensive venous occlusion, without obliteration of the arterial tree. The preliminary stage is phlegmasia cerulea dolens, which is characterized by severe swelling, cyanosis, and blue discoloration of the extremity. Venous gangrene is a very severe and rare condition. It is often associated with cancer patients with a poor prognosis.

**Venous hemodynamic changes in venous disease**
Major changes in venous return are due to venous reflux and/or obstruction. Elevated venous pressure is the key event, inducing venous dilation, venous wall and valve alterations, microcirculatory troubles, and inflammation, which lead to trophic changes (eg, pigmentation, gravitational dermatitis, lipodermatosclerosis, atrophie blanche, and venous ulcers).

**Venous hemodynamic measurement**
Different invasive and noninvasive techniques to measure venous hemodynamics include ambulatory venous pressure, femoral vein pressure, and central venous pressure measurements, arm/foot pressure differential, light reflection rheography, photoplethysmography, quantitative digital photoplethysmography, ambulatory strain gauge plethysmography, foot volumetry, continuous-wave Doppler ultrasound, and duplex scanning echography.
**Venous hemodynamics**
The study of venous blood flow, pressure, and volume. Investigation modalities include duplex ultrasonography, plethysmography, direct pressure/volume measurements, and magnetic resonance flow calculations. The investigation can be done at rest or with standardized provocation maneuvers. Examples include calf compression/contraction, body weight transfer, Valsalva maneuver, and gravitational positioning. Typical parameters measured include venous velocity, flow volume, reflux duration, ambulatory venous pressure, femoral vein pressure, venous diameter, and calf volume changes.

**Venous hypertension**
Elevated pressure in the venous system. *See also* ambulatory venous hypertension.

**Venous hypoplasia**
Hypoplasia refers to the incomplete development of a vein or segment of a vein: the difference with aplasia is that the caliber of the vein is reduced but its structure is normal. The clinical repercussions of hypoplasia are more severe if it is associated with risk factors for chronic venous disease, such as multiple pregnancies, work standing in an immobile position, obesity, advanced age, and great height.

**Venous incompetence**
Retrograde venous flow of abnormal duration.

**Venous insufficiency epidemiological and economic studies (VEINES)**
An outcome tool with 25 items to quantify the effect of the disease on quality of life and 10 items that measure physical symptoms. Responses are made using a 2- to 7-point scale that rates intensity, frequency, and agreement. Higher scores are associated with better quality of life.

**Venous leg ulcer**
Leg wound associated with reflux of superficial, deep, or perforating veins, or a combination thereof, or with venous obstruction and the ensuing venous hypertension, which in turn generates microcirculatory disorders. Onset may be triggered (injury, hemorrhagic rupture of a varicose vein, skin infection) or insidious.

**Venous leg ulcer quality of life questionnaire**
Outcome questionnaire adding 17 specific items to 17 items of the SKINDEX-29. This new index aims to evaluate the specific burden of patients suffering from venous leg ulcers, concerning 3 domains: activities (12 items), psychological (12 items), and symptom distress. This questionnaire may be useful to evaluate the outcomes of treatment from the patients’ perspective.

**Venous ligation**
Surgical tying of veins.

**Venous lumen**
The interior of the vein, ie, the central space in a vein through which blood flows.
**Venous malformation**
One type of congenital vascular malformation. Such malformations are the outcome of a defective development that only affects the venous system during two different stages of embryogenesis (e.g., the abnormal development of the superficial and/or deep vein system). Together with lymphatic malformations, venous malformations are the most common birth defect of the circulatory system.

**Venous obliteration**
Anatomical concept: narrowing of the venous lumen related to postthrombotic lesions, extrinsic compression, venous parietal lesion and also secondary to therapeutic procedures, such as thermal or chemical vein ablation or their combination. *See Figures 14 and 15.*

**Venous obstruction**
Hemodynamic concept caused by venous obliteration or occlusion.

**Venous occlusion**
Anatomical concept: total obliteration of the venous lumen related to the lesions described in the term venous obliteration and in the presence of acute venous thrombosis.

**Venous open surgery**
Open surgical procedures on the superficial, perforator, or deep vein systems.

**Venous outflow resistance**
The presence of an obstructive disease in the proximal veins.

**Venous pharmacotherapy**
The use of natural and synthetic agents to influence the veins and the microcirculation by inhibiting inflammatory reactions, decreasing vessel permeability, and increasing lymphatic drainage and venous tone.

**Venous physiology**
Function of venous flow and venous outflow in the vein system. Vein flow is regulated by calf muscle pump activity, the presence of competent valves, proper vein patency, and negative thorax pressure. In a competent vein system, vein flow is directed from the superficial to the deep vein system and from the distal part of the extremity to the proximal vein segments.

**Venous plethysmography**
A method to assess the function of the vein system of the leg based on changes in leg volume related to inflow and outflow of the venous system. Currently, various plethysmography techniques are available, including impedance plethysmography, strain-gauge plethysmography, photoplethysmography, and air plethysmography. The baseline values are recorded and the subject is asked to perform a series of maneuvers that influence changes in vein system volume and leg volume.
**Venous pressure**
The value of the venous pressure depends on the level of measurement, body position, and the possible anomaly of the venous system (obstruction and/or reflux). In the supine position, pressure in the lower extremity veins is like the pressures in the abdomen. In the region of the chest, negative vein pressure values can be observed, which are related to the negative thorax pressure during respiration. In the standing position, the pressure in the distal veins is related to gravitational forces as well as the state of the venous system.

**Venous pump function**
Facilitates blood flow from the foot and calf to the more proximal vein segments. The calf muscle contraction and its related crural vein compression is the major force responsible for proper venous return, if properly functioning venous valves are present. Venous pump insufficiency may be due to the lack of muscle or ankle movement.

**Venous reconstructive surgery**
Surgery performed in trauma patients or patients with vein obstruction or venous valve incompetence in the deep vein system. The main goal of venous reconstructive surgery in patients with vein injury or obstruction is to restore venous outflow (eg, vein suture, vein anastomosis, bypass procedure). Valvuloplasty, vein transposition, vein transplantation, and neovalve procedures can be performed.

**Venous refill time**
*See* refilling time.

**Venous reflux**
Reversal of blood flow either from the deep veins into the superficial veins or in the deep or superficial veins from the proximal part to the distal part of the extremity. Its presence is related to a lack of venous valves or the presence of valve incompetence, which can have a primary or secondary (eg, postthrombotic) etiology.

**Venous segment transfer**
*See* valve transplantation.

**Venous segmental disease score**
Score created to complement the CEAP classification and venous clinical score and to standardize the reporting of disease location by condensing the 18 possible vein segments into eight groups. Duplex ultrasonography or phlebography can determine reflux, obstruction, or a combination of both. The validity of the venous segmental disease score has not been confirmed by robust studies.

**Venous severity scoring**
There are several systems created for scoring the severity of chronic and acute venous disease: (i) CEAP classification of chronic venous disorders; (ii) venous clinical severity score to assess patients undergoing interventions for chronic venous disease; (iii) venous clinical severity score for standardizing the reporting of disease localization; (iv) venous disease score to assess daily living activities; (v) VILLALTA scale or GINBERG's criteria to evaluate the development of postthrombotic syndrome; (vi) quality of life assessment with generic and disease-specific quality of life tools.
DEFINITIONS

Venous skin changes
Skin and subcutaneous tissue changes related to venous hypertension and the presence of chronic venous disease. Most of the changes result from microcirculatory disturbances that lead to chronic tissue inflammation in the distal extremity segment. The most frequent skin changes include lipodermatosclerosis, hyperpigmentation, venous eczema, and atrophie blanche. Further skin changes and abnormalities can cause venous ulcers to develop.

Venous stenosis
Presence of a narrowing lesion in the venous system. It can be caused by external compression or intravascular abnormalities leading to venous hypertension. The hemodynamic importance of the venous stenosis can be difficult to establish.

Venous stenting
An implantation of a stent into the vein lumen due to stenosis or occlusion; it is usually performed percutaneously under fluoroscopy. The procedure is performed mostly in the cases of proximal vein system obstruction with a postthrombotic or nonthrombotic disease. See Figure 20.

Venous stripping
Removal of a vein using a specially designed probe introduced into the vein lumen (internal stripping) or segmental stripping with vein removal through small stab incisions. This procedure is a clinically proven method for removing the great and small saphenous veins. Various modifications to the stripping technique have been proposed (classic stripping, stripping by invagination, cryostripping).

Venous surgery
Surgical open procedures on the superficial or deep vein system.

Venous symptoms
Reported complaints related to unpleasant sensations felt by the patient, such as pain or aching, throbbing, tightness, heaviness, fatigue, feeling of swelling, cramps, itching, restless legs, tingling, heat or burning sensation, and secondary symptoms, all of which can significantly reduce the patient’s quality of life. Adapted from SYM Vein.

Venous system
Part of the vasculature that drains blood back to the heart from either the peripheries or the lungs.

Venous thermal ablation
Method for vein lumen closure using thermal energy that is introduced into the vein using a special heating probe. The following thermal energy can be used: laser light energy (endovenous laser treatment), radiofrequency (radiofrequency ablation), steam (steam vein sclerosis), or cryotherapy (freezing). The method is dedicated mostly to truncal vein ablation in the superficial vein system.
**Venous thoracic outlet syndrome**  
Compression of the veins on the way from the upper thorax aperture through the lower neck to the arm. The compressions can concern nerves, veins, and/or arteries, and various compression points can be diagnosed (compression between the first rib and clavicle, compression by a cervical rib, compression by the scalenus muscle or others). Subclavian vein compression can lead to axillary and/or subclavian thrombosis, which is expressed by swelling, pain, color changes of the upper limb. *See also* PAGET-von SCHRÖTTER syndrome.

**Venous thrombectomy**  
Procedure for removing a thrombus from the vein lumen. The goal of the procedure is to restore vein patency. Venous thrombectomy can be performed using open surgery or endovascular methods.

**Venous thromboembolism**  
Cases involving deep venous thrombosis and/or pulmonary embolism.

**Venous thrombolytic treatment**  
Systemic or local thrombolytic drug administration implemented to achieve resolution of a thrombus present in a treated vein segment. The procedure requires proper patient selection (low risk of bleeding, good functional condition, early acute deep vein thrombosis phase (optimal ≤14 days), and proper experience, monitoring, and technical facilities of the center. Currently, most local thrombolytic treatments use catheter-directed thrombolysis or pharmacomechanical methods.

**Venous thromboprophylaxis**  
Prevention of venous thrombosis. In daily practice, early ambulation and mechanical and pharmacological methods are used. For pharmacological prophylaxis, low doses of unfractionated heparin, low-molecular-weight heparin, fondaparinux, or direct oral anticoagulants can be used. Concerning the mechanical methods, both compression stockings and intermittent pneumatic compression are options.

**Venous thrombosis**  
The presence of a thrombus in the vein lumen. Its occurrence is usually related to the presence of VIRCHOW’s triad connected with thrombosis risk factors. The clinical course can be symptomatic or asymptomatic.

**Venous thrombosis risk factors**  
See risk factors for deep venous thrombosis.

**Venous thrombus**  
Presence of a clot in the vein lumen. *See also* venous thrombosis.

**Venous thrombus formation**  
Process that is initiated by the mechanisms described in VIRCHOW’s triad (stasis, hypercoagulability, endothelial injury), which can progress in an ascending or descending way. Several risk factors are known for thrombus formation, including thrombophilia, cancer, hormonal treatment, surgery, sepsis, etc.
**Venous thrombus resolution**
Resolution can be spontaneous or due to fibrinolytic treatment. The complete spontaneous resolution of a thrombus in the deep vein system can be observed in only some affected patients; in most cases, residual obstructive postthrombotic changes will persist.

**Venous valve**
Anatomic structure located in veins that regulates blood flow direction. Embryonically, it originates from endothelium plication. Usually, it consists of two cusps, but it may vary from 1 to 5 cusps. In an open valve, blood flows in the direction from higher pressure to lower pressure. The valve is a crucial functional element to avoid reflux in the vein system of the lower extremities. *See Figure 8.*

**Ventilation–perfusion scintigraphy**
The imaging method used to evaluate air and blood circulation within the lung. It is performed to determine the ventilation/perfusion ratio using scintigraphy and medical isotope administration. The method is used in patient with a suspected pulmonary embolism, but it is also proposed in cases of other serious lung diseases. Currently, in patients with a suspected pulmonary embolism, pulmonary artery computed tomography angiography is more commonly performed.

**VENTURI effect**
A reduction in the fluid static pressure when a fluid flows through a constricted part of a catheter/tube. An increased velocity through a constriction is balanced by a drop in pressure that can be used as a suction mechanism. The effect is used in some medical devices (rheolytic thrombectomy catheters, suction catheters for wound cleaning, and debridement). Named after the Italian physicist Giovanni VENTURI.

**VILLALTA score**
A disease-specific score for evaluating and categorizing postthrombotic syndrome. Points are given for five symptoms and six clinical signs. The number of points given for each sign and symptom ranges from 0 (not present) to 3 (severe). If the VILLALTA score is 5 to 14, the patient is diagnosed with mild-to-moderate postthrombotic syndrome, and, if the score is >15 or if a venous ulcer is present, the patient is diagnosed with severe postthrombotic syndrome.

**VIRCHOW’s triad**
VIRCHOW’s triad describes the three broad categories of factors that are thought to contribute to venous thrombosis: hypercoagulability, hemodynamic changes (stasis, turbulence), and endothelial injury or dysfunction. It is named after the German physician Rudolf VIRCHOW (1821-1902).

**Vitamin K antagonist**
A drug that inhibits the production of vitamin K–related coagulation cascade factors (factor II, VII, IX, and X) in the liver. These drugs are used in anticoagulation therapy for cardiovascular diseases, such as atrial fibrillation, and after mechanical valve implantation or for venous thromboembolism. Their administration also decreases protein C and S production in the liver. The activity of the vitamin K antagonists can be measured and tested by assessing the international normalized ratio.
Wallstent™  
A universal, self-expanding, stainless steel stent with a closed-cell design used for stenting biliary, hepatic, arterial, bronchial, and venous lesions with the aim of creating, improving, or sustaining a flow across the lesion or bypass. Most of the original studies on thrombotic or nonthrombotic iliac venous lesions have used this stent.

Warfarin  
Slow-acting (2 to 5 days) oral anticoagulant used to prevent and treat venous thromboembolism. The word originates from the organization that funded the pioneering research (Wisconsin Alumni Research Foundation). It inhibits vitamin K recycling, which is an important process for the activation of many coagulation proteins. It interacts with several drugs and must be monitored using the international normalized ratio to prevent over- or underactivity, which may result in hemorrhage or undertreatment, respectively.

WARREN operation  
See femoropopliteal and femorocrural saphenous vein bypass.

Waterfall drainage  
A resistance-free, pressure-volume–independent flow in collapsible tubes, such as veins. It is the classic line produced on a plethysmography tracing when a nonobstructed leg is elevated. It quantifies the gravitational descent of a column of venous blood. This is in direct contrast to the prolonged hydrostatic drainage curve from a growing column of blood in a patient with venous obstruction.

Water-specific laser wavelengths  
Thermal ablation lasers can be divided into hemoglobin-specific laser wavelengths and water-specific laser wavelengths based on their proposed mechanism of action. The water-specific laser wavelengths damage the vein wall by passing through the blood to target interstitial fluid and collagen. Absorption causes the collagen to denature and contract, leading to vein wall shrinkage. Water-specific laser wavelengths include 1064, 1320, and 1470 nm.

Weight transfer maneuvers  
A way to assess the performance of the venous pumps in the leg with plethysmography or duplex ultrasonography, like the tiptoe maneuver. The maneuvers include the global push of a Paraná maneuver, the walking step in the Vasculab maneuver, and a weight shift from one leg to the other. Whichever method is chosen, all are very effective in quantifying pumping performance using the ejection fraction.

WELLS score  
Clinical scoring systems that grade patients’ level of risk of developing deep vein thrombosis (or pulmonary embolism). Once a probability score is available, it can be used to direct further investigations, including D-dimer levels, compression ultrasonography, contrast venography, pulmonary angiography, and ventilation/perfusion scanning. Developed by Philip Steven WELLS (Canada), the WELLS score undergoes frequent revisions.

White atrophy  
See atrophie blanche.
**WIDMER’s classification**
WIDMER (Basel, Switzerland) described 2 classifications. The first encompasses only varices (telangiectasia, reticular veins, and varices) and the second classifies chronic venous insufficiency into 3 categories of increasing severity: I – ankle flare or subclinical edema; II – edema, eczema, lipodermatosclerosis, or pigmentation; III – healed or active venous ulcer. Currently, the clinical part of the CEAP classification is the preferred classification for use in everyday practice.

**Working compression pressure**
Assessing compression bandages or stockings by measuring interface pressures during wear, which provides information on positional data as well as the effect of muscle pumping during walking. In this way, elastic and inelastic material can be compared. Implantable sensors are now available to record data on working compression pressures at several sites.

**Working venous volume**
The volume increase and decrease in mL/s recorded on a plethysmography tracing when an elevated/dependent leg is moved into a dependent/elevated position. Assessment using a tilt-table improves standardization. It is the denominator of the derived plethysmography parameters of ejection fraction, venous filling index, and venous drainage index.

**Xenograft valve**
A venous valve, a segment of a vein containing a venous valve, or material derived from a host of animal origin that is used as a venous valve and transplanted into humans. Rejection is prevented by neutralizing any foreign antigens or decellularization prior to open or endoluminal transplantation into the venous system in humans. Common problems with such transplants include thrombosis, incompetency, and wall fibrosis.

**Ximelagatran**
The original direct thrombin inhibitor anticoagulant that was taken orally twice a day; it showed great promise as a replacement for warfarin in the prevention and treatment of venous thromboembolism. It was designed to avoid the warfarin-associated problems of monitoring, drug interactions, and dietary constraints. Hepatotoxicity resulted in its discontinuation in favor of new direct oral anticoagulants.

**X-sizer™ helical thrombectomy catheter**
Device incorporating a battery-powered, stainless steel, helical cutting head to macerate and fragment a thrombus with a simultaneous, negative-pressure, peripheral aspiration channel. This catheter is approved for the use of mechanical thrombus removal in hemodialysis access grafts.

**X-vein**
Second-generation patented device for nontumescent and nonthermal mechanochemical ablation. A small circumferential wire brush, like a dental brush or pipe cleaner, is used to scratch the vein wall back and forth. Then, foam or liquid sclerosant can be deployed, if necessary, to complete the ablation.
**YAG laser**

*See* ND-YAG laser.

**Z-stent™**

Stent with an open-cell, zig-zag configuration with a wide strut structure and hooks to prevent migration. The GIANTURCO Z-stent™ was originally used to treat obstructions in the inferior or superior vena cava. It possesses the properties of high radial strength, insignificant shortening during deployment, which facilitates precise placement, and wide interstices to minimize the probability of ostial interference. There is less metal than in the wallstent, meaning a lower likelihood of intimal hyperplasia.

**Zinc paste impregnated stockinette**

A mildly elasticized tubular gauze stockinette impregnated with an ointment containing 20% zinc oxide. It is a substitute for a zinc oxide paste bandage in the treatment of venous leg ulcers. Zinc has bactericidal, hypoallergenic, and soothing properties, and is an ideal interface between a compression bandage and fragile inflamed skin.
**FR**

Ablation chimique
Ablation de la veine perforante
Ablation des varices Voir Ablation veineuse
Ablation endoveineuse par radiofréquence
Ablation endoveineuse par vapeur
Ablation laser Voir Ablation par laser endoveineux des veines saphènes
Ablation non thermique
Ablation par laser endoveineux des veines saphènes
Ablation par radiofréquence
Ablation par vapeur
Ablation percutanée des perforantes
Ablation pharmacomécanique
Ablation sélective des varices sous anesthésie locale
Ablation thermique endoveineuse
Ablation veineuse
Ablation veineuse tronculaire
Acénocoumarol
Activateur tissulaire du plasminogène
Activateur tissulaire recombinant du plasminogène
Activation des leucocytes
Aescine Voir Extrait de marron d’Inde ou de racine de marronnier d’Inde
Affections veineuses
Affections veineuses chroniques
Agent d’embolisation adhésif Voir Embolisation par injection de colle ou ablation par injection d’un adhésif/de colle
Agger valvulaire
Allogreffes de valvules veineuses cryopréservées
Alpha benzopyrone
Altérations cutanées d’origine veineuse
American Venous Forum (AVF)
Anesthésie par tumescence
Anesthésie pour le traitement interventionnel des varices
Anévrisme de la veine poplitée
Anévrisme veineux
Anévrisme Voir Anévrisme veineux
Angiographie par tomodensitométrie hélicoidal pour le diagnostic de l’embolie pulmonaire
AngioJet™
Angiome
Angiome arachnéen Voir Télangiectasie
Angiome cavernieux
Angiome stellaire Voir Télangiectasie
Angioplastie percutanée par ballonnet ou veinoplastie percutanée
Angioplastie veineuse par ballonnet
Antagoniste de la vitamine K
Antagonistes oraux de la vitamine K
Anthocyanes voir aussi Bioflavonoïdes
Antithrombine (antithrombine III)

**EN**

- Chemical ablation
- Perforator vein ablation or perforator ablation
- Varice or varicose vein ablation. See vein ablation
- Endovenous radiofrequency ablation
- Endovenous steam ablation
- Laser ablation. See endovenous laser ablation of saphenous veins
- Nonthermal vein ablation
- Endovenous laser ablation of saphenous veins
- Radiofrequency ablation
- Steam ablation
- Percutaneous ablation of perforating veins
- Mechanicochemical ablation
- Selective ablation of varices under local anesthesia
- Endovenous thermal ablation
- Venous ablation / Vein ablation
- Truncal venous ablation
- Acenocoumarol
- Tissue plasminogen activator
- Recombinant tissue plasminogen activator
- Leukocyte activation
- Aescin. See horse chestnut seed or root extract
- Venous disorders
- Chronic venous disorders
- Adhesive embolization. See glue embolization or glue/adhesive ablation
- Valvular agger
- Cryopreserved venous valves
- Alpha benzopyrone
- Venous skin changes
- American Venous Forum (AVF)
- Tumescent anaesthesia
- Anesthesia for interventional treatment of varicose veins
- Popliteal vein aneurysm
- Venous aneurysm
- Aneurysm. See venous aneurysm
- Spiral computed tomography angiography for pulmonary embolism
- AngioJet™
- Angioma
- Spider vein. See telangiectasia
- Cavernous angioma
- Thread vein. See telangiectasia
- Percutaneous balloon angioplasty or percutaneous venoplasty
- Venous balloon angioplasty
- Vitamin K antagonist
- Oral vitamin K antagonists
- Anthocyanins. See also bioflavonoids
- Antithrombin (antithrombin III)
<table>
<thead>
<tr>
<th>FR</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antithrombotiques</td>
<td>▶ Antithrombotic agents</td>
</tr>
<tr>
<td>Apixaban</td>
<td>▶ Apixaban</td>
</tr>
<tr>
<td>Arcade veineuse dorsale du pied</td>
<td>▶ Dorsal venous arch of the foot</td>
</tr>
<tr>
<td>Arcade veineuse palmaire profonde</td>
<td>▶ Deep palmar venous arch</td>
</tr>
<tr>
<td>Arcade veineuse palmaire superficielle</td>
<td>▶ Superficial palmar venous arch</td>
</tr>
<tr>
<td>Argatroban</td>
<td>▶ Argatroban</td>
</tr>
<tr>
<td>Atresie veineuse</td>
<td>▶ Vein atresia</td>
</tr>
<tr>
<td>Atrophie blanche</td>
<td>▶ White atrophy. See atrophie blanche</td>
</tr>
<tr>
<td>Atteinte nerveuse après éveinage (“stripping”)</td>
<td>▶ Nerve damage after stripping</td>
</tr>
<tr>
<td>Augmentation de la résistance à l’écoulement</td>
<td>▶ Increased outflow resistance</td>
</tr>
<tr>
<td>Autotransplantation d’une valvule compétente dans la veine poplitée</td>
<td>▶ Autotransplantation of a competent valve into the popliteal vein. See valve transplantation</td>
</tr>
<tr>
<td>Bandes adhésives</td>
<td>▶ Adhesive bandage</td>
</tr>
<tr>
<td>Bandes de compression</td>
<td>▶ Compression bandages</td>
</tr>
<tr>
<td>Bandes de compression à allongement court (“short-stretch”)</td>
<td>▶ Short-stretch bandage. See inelastic bandage</td>
</tr>
<tr>
<td>Bandes de compression élastiques</td>
<td>▶ Elastic compression bandages</td>
</tr>
<tr>
<td>Bandes de compression multicouches</td>
<td>▶ Multilayered compression bandages</td>
</tr>
<tr>
<td>Bandes inélastiques</td>
<td>▶ Inelastic bandage</td>
</tr>
<tr>
<td>Bandes Voir également Bandes de compression</td>
<td>▶ Bandage. See also compression bandages</td>
</tr>
<tr>
<td>Bas antithrombotiques</td>
<td>▶ Antithrombotic stockings</td>
</tr>
<tr>
<td>Bas de contention élastiques</td>
<td>▶ Elastic compression stockings</td>
</tr>
<tr>
<td>Bas de contention médicaux</td>
<td>▶ Medical compression stockings</td>
</tr>
<tr>
<td>Bas et chaussettes de contention Voir Bonneterie de compression</td>
<td>▶ Compression stockings. See compression hosiery</td>
</tr>
<tr>
<td>Bascule d’un filtre de veine cave inférieure</td>
<td>▶ Tilted inferior vena cava filter</td>
</tr>
<tr>
<td>Bioflavonoïdes</td>
<td>▶ Bioflavonoids</td>
</tr>
<tr>
<td>Bivalirudine</td>
<td>▶ Bivalirudin</td>
</tr>
<tr>
<td>Bonneterie de compression</td>
<td>▶ Compression hosiery</td>
</tr>
<tr>
<td>Botte à la colle de zinc (botte de UNNA)</td>
<td>▶ UNNA boot</td>
</tr>
<tr>
<td>Capacitance veineuse</td>
<td>▶ Venous capacitance</td>
</tr>
<tr>
<td>Cartographie veineuse</td>
<td>▶ Ultrasound mapping</td>
</tr>
<tr>
<td>Cathéter ClosureFAST™</td>
<td>▶ ClosureFAST™ catheter</td>
</tr>
<tr>
<td>Cathéter de thrombectomie – AKönya Eliminator</td>
<td>▶ AKönya Eliminator – thrombectomy catheter</td>
</tr>
<tr>
<td>Cathéter de thrombectomie à hélice X-Sizer™</td>
<td>▶ X-sizer™ helical thrombectomy catheter</td>
</tr>
<tr>
<td>Cathéter de thrombectomie Trellis</td>
<td>▶ Trellis thrombectomy catheter</td>
</tr>
<tr>
<td>Cathéter Oasis®</td>
<td>▶ Oasis® catheter</td>
</tr>
<tr>
<td>Chirurgie à ciel ouvert de la veine perforante</td>
<td>▶ Perforator vein open surgery or perforator open surgery</td>
</tr>
<tr>
<td>Chirurgie des veines profondes</td>
<td>▶ Deep venous surgery</td>
</tr>
<tr>
<td>Chirurgie endoscopique des perforantes sous-fasciales</td>
<td>▶ Subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Chirurgie endoscopique des perforantes Voir Chirurgie endoscopique des perforantes sous-fasciales</td>
<td>▶ Endoscopic perforator surgery. See subfascial endoscopic perforator surgery</td>
</tr>
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<td>Chirurgie hémodynamique de l’insuffisance veineuse en ambulatoire (CHIVA)</td>
<td>▶ Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire</td>
</tr>
<tr>
<td>Chirurgie reconstructrice des veines profondes</td>
<td>▶ Deep vein reconstructive surgery</td>
</tr>
<tr>
<td>Chirurgie valvulaire</td>
<td>▶ Valve surgery</td>
</tr>
<tr>
<td>Chirurgie veineuse</td>
<td>▶ Venous surgery</td>
</tr>
<tr>
<td>Chirurgie veineuse à ciel ouvert</td>
<td>▶ Venous open surgery</td>
</tr>
<tr>
<td>Chirurgie veineuse reconstructrice</td>
<td>▶ Venous reconstructive surgery</td>
</tr>
<tr>
<td>ClariVein®</td>
<td>▶ ClariVein®</td>
</tr>
<tr>
<td>Classes cliniques de la classification CEAP</td>
<td>▶ Clinical classes of the CEAP</td>
</tr>
</tbody>
</table>
FR
Classification CEAP de base
Classes cliniques de la classification CEAP
Classification clinique, étiologique, anatomique, physiopathologique (CEAP)
Classification clinique, étiologique, anatomique, physiopathologique (CEAP) avancée
Classification de HACH
Classification de Hambourg
Classification de HERMAN Voir Classification de KISTNER
Classification de KABNICK Voir également Thrombose endoveineuse causée par la chaleur
Classification de KISTNER
Classification de Widmer
Classification des anomalies vasculaires de l’ISSVA (société internationale pour l’étude des anomalies vasculaires) Voir également Classification de Hambourg
Claudication veineuse
Commissure valvulaire
Compartiment saphénien Voir Œil égyptien
Compliance veineuse
Composant A de la classification CEAP
Composant C de la classification CEAP
Composant E de la classification CEAP
Composant P de la classification CEAP
Compressibilité veineuse
Compression d’une veine Voir Compression veineuse
Compression de la cuisse
Compression de la veine iliaque
Compression de la veine rénale gauche Voir Syndrome du casse-noisette
Compression élastique graduée
Compression excentrique
Compression pneumatique intermittente
Compression pneumatique séquentielle
Compression veineuse
Congestion des veines pelviennes Voir Syndrome de congestion pelvienne
Conseils en matière d’hygiène de vie dans le cadre des affections veineuses chroniques
Constriction
Continuation azygos de la veine cave inférieure
Cornes de la valvule
Coumarine
Couronne phlébectasique
Couronne phlébectasique paraplantaire
Crampe
Crampe musculaire Voir Crampe
Crampe nocturne Voir Crampe
Création d’une néovalvule de MALETI
Crochet de phlébectomie
Crossectomie
Cryoéveinage

EN
▸ Basic CEAP classification
▸ CEAP clinical classes. See clinical classes of the CEAP
▸ Clinical, Étiological, Anatomical, Physiopathological (CEAP) classification
▸ Advanced clinical, etiological, anatomical, and pathophysiological (CEAP) classification
▸ HACH classification
▸ Hamburg classification
▸ HERMAN’s classification. See KISTNER’s classification
▸ KABNICK classification. See also endovenous heat-induced thrombus
▸ KISTNER’s classification
▸ Widmer’s classification
▸ International Society for the Study of Vascular Anomalies (classification of vascular anomaly). See also Hamburg classification
▸ Venous claudication
▸ Valve commissure
▸ Saphenous compartment. See Egyptian eye
▸ Venous compliance
▸ A component of the CEAP classification
▸ C component of the CEAP classification
▸ E component of the CEAP classification
▸ P component of the CEAP classification
▸ Venous compressibility
▸ Vein compression. See venous compression
▸ Thigh compression
▸ Iliac vein compression
▸ Left renal vein compression. See nutcracker syndrome
▸ Graduated elastic compression
▸ Eccentric compression
▸ Intermittent pneumatic compression
▸ Sequential pneumatic compression
▸ Venous compression
▸ Congestion in the pelvic veins. See pelvic congestion syndrome
▸ Lifestyle advice for chronic venous disorders
▸ Tightness
▸ Azygos continuation of the inferior vena cava
▸ Valve cornua
▸ Coumarin
▸ Ankle flare / Malleolar flare / Corona phlebectatica
▸ Corona phlebectatica paraplantaris
▸ Cramp
▸ Muscle cramp. See cramp
▸ Night cramp. See Cramp
▸ MALETI neovalve construction
▸ Phlebectomy hook
▸ Crossectomy
▸ Cryostripping
FR

Cuspide de valvule
D-dimère
Dabigatran (dabigatran étexilate)
Daléparine (daléparine sodique)
Danaparoidé (danaparoidé sodique)
Débit de la pompe musculaire du mollet
Déficience en protéine C
Déficience en protéine S
Démangeaisons
Dermatite (dermatite veineuse, eczéma variqueux)
Dermatite ocre
Diosmine
Dispositif compressif
Dispositif d’électrostimulation des muscles du mollet
Dispositif de cathéter à perfusion Lysus (EKOS)
Dispositifs d’aide à l’enfilage et au retrait (pour les bas)
Doppler continu
Douleur pulsative ou battante
Douleur Voir Endolorissement
Échogénicité veineuse
Échographie
Échographie Doppler Voir Échographie-doppler Duplex
Échographie Duplex Voir Échographie-doppler Duplex
Échographie intravasculaire en phlébologie
Échographie-doppler Duplex
Échosclérothérapie Voir Sclérothérapie échoguidée
Écorce de pin maritime français
Ectasie de la jonction superficielle (“blow-out”)
Éczéma
Éczéma veineux (eczéma variqueux, eczéma gravitationnel, dermite ou dermatite de stase)
Édoxaban
Effet “tourniquet”
Effet de cascade
Effet VENTURI
Électrostimulation neuromusculaire dans le cadre de l’insuffisance veineuse chronique
Embolectomie
Emboles
Embolie
Embolie ou thromboembolie pulmonaire
Embolisation
Embolisation aux cyanoacrylates Voir Embolisation par injection de colle
Embolisation de la veine ovarienne
Embolisation des veines gonadiques
Embolisation par injection de colle ou ablation par injection d’un adhésif/de colle
Embolisation veineuse pelvienne
Embryologie veineuse
Endolorissement

EN

Valve cuspid or cusp
D-dimer
Dabigatran (dabigatran etexilate)
Dalteparin (dalteparin sodium)
Danaparoid (danaparoid sodium)
Calf pump output
Protein C deficiency
Protein S deficiency
Itching
Dermatitis (venous dermatitis, venous eczema)
Stasis dermatitis
Diosmin
Compression device
Electrical calf muscle stimulation device
Lysus infusion catheter system (EKOS)
Donning and doffing devices (for stockings)
Hand-held Doppler. See also continuous-wave Doppler
Throbbing
Pain. See aching
Venous echogenicity
Ultrasonography
Doppler ultrasound. See Duplex ultrasonography
Duplex sonography. See Duplex ultrasonography
Intravascular ultrasound in phlebology
Duplex ultrasonography
Echosclerotherapy. See ultrasound-guided sclerotherapy
French maritime pine bark
Venous blow out
Eczema
Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)
Édoxaban
Tourniquet effect
Waterfall drainage
VENTURI effect
Neuromuscular electric stimulator in chronic venous insufficiency
Embolectomy
Embolism
Pulmonary embolism or pulmonary thromboembolism
Embolization
Cyanoacrylate embolization. See glue embolization
Ovarian vein embolization
Gonadal vein embolization
Glue embolization or glue/adhesive ablation
Pelvic vein embolization
Venous embryology
Aching
TERMS IN OTHER LANGUAGES - FRENCH

FR
Endophlébectomie ou endoveinectomie
Endoprothèse (stent) expansible sur ballonnet
Endoprothèse vasculaire périphérique autoexpansible Wallstent™
Endoveineux
Énoxaparine
Étude d’Édimbourg
Étude de l’évaluation des maladies veineuses et standardisation des essais
Étude nord-américaine de la chirurgie endoscopique des perforantes sous-fasciales (SEPS)
Étude PREPIC
Étude PREPIC 2 voir Étude PREPIC
Études économiques et épidémiologiques de l’insuffisance veineuse
European Venous Forum
Évaluation de la sévérité de la maladie veineuse
Éveinage (ou “stripping”) saphénien
Éveinage par perforation-invagination (PIN) Voir Pin-stripping
Éveinage veineux (ou “Stripping”)
Exercices de transfert de poids
Extension crâniale de la petite veine saphène
Extension post-axiale de la petite veine saphène
Extrait de marron d’Inde ou de racine de marronnier d’Inde
Extrait de pépins de raisin
Facteur VIII
Facteurs de risque de l’insuffisance veineuse chronique (C₃-C₆)
Facteurs de risque de la maladie veineuse chronique
Voir Facteurs de risques des varices et de l’insuffisance veineuse chronique (C₃-C₆)
Facteurs de risque de la présence de varices après intervention (PREVAIT)
Facteurs de risque de la récidive d’une thrombose veineuse profonde
Facteurs de risque de la thrombose veineuse profonde
Facteurs de risque de thrombose veineuse Voir Facteurs de risque de la thrombose veineuse profonde
Facteurs de risque des varices
Facteurs de risque du syndrome post-thrombotique
Fasciectomy en cas de maladie veineuse
Fatigue
Fermeture valvulaire
Feuillet valvulaire Voir Cuspide de valvule
Fibre radiale à double anneau
Fibre Voir Fibres laser
Fibres laser
Fibrine
Fibrinolysé
Filtre cave Bird’s Nest

EN
Endophlebectomy or endovenectomy
Balloon-expanding stent
Wallstent™
Endovenous
Enoxaparin
Edinburgh vein study
Investigating venous disease evaluation and standardization of testing
North American subfascial endoscopic perforator surgery (SEPS) study
PREPIC study
PREPIC 2 study. See PREPIC study
Venous insufficiency epidemiological and economic studies (VEINES)
European Venous Forum
Venous severity scoring
Saphenous stripping
Perforate INvaginate (PIN) stripping. See PIN stripping
Venous stripping
Weight transfer maneuvers
Cranial extension of the small saphenous vein
Thigh extension of the small saphenous vein
Horse chestnut seed or root extract
Grape seed extract
Factor VIII
Risk factors for chronic venous insufficiency (C₃-C₆)
Risk factors for chronic venous disease. See risk factors for varicose veins and for chronic venous insufficiency (C₃-C₆)
Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)
Risk factors for deep venous thrombosis recurrence
Risk factors for deep venous thrombosis
Venous thrombosis risk factors. See risk factors for deep venous thrombosis
Risk factors for varicose veins
Risk factors for postthrombotic syndrome
Fasciectomy in venous disease
Fasciectomy in venous disease
Fatigue
Valve closure
Valve leaflet. See valve cuspid or cusp
Double ring radial fiber
Fiber. See laser fibers
Laser fibers
Fibrin
Fibrinolysis
Bird’s nest filter
TERMS IN OTHER LANGUAGES - FRENCH

FR

Filtre cave prophylactique
Filtre cave récupérable
Filtre cave suprARénal
Filtre cave TrapEase®
Filtre d’Amplatz de veine cave inférieure
Filtre de la veine cave inférieure
Filtre en nitinol Recovery
Filtre G2 Voir aussi Filtre GREENFIELD™ et Filtre GUNTHER™ Tulip
Filtre GREENFIELD™ Titanium
Filtre GREENFIELD™ Voir également Filtre G2 et Filtre GUNTHER™ Tulip
Filtre GUNTHER™ Tulip Voir également Filtre GREENFIELD™ et Filtre G2
Filtre ombrelle de MOBIN-UDDIN
Filtre OptEase®
Filtre ou clip d’ADAMS-DEWEESE
Filtres cave
Fistule artério-veineuse
Fistule artério-veineuse temporaire
Flavonoïdes
Flexions-extensions sur la pointe des pieds
Flux veineux
 Fonction de la pompe veineuse
 Fonction valvulaire
 Fonction veineuse
 Fonction veineuse de la pompe musculaire du mollet
Fondaparinux
Formation d’un thrombus veineux
Forme veineuse du syndrome du défilé thoracobrachial Voir aussi Syndrome de PAGET-von SCHRÖTTER
Fraction d’écoulement
Fraction d’éjection voir aussi Volume d’éjection
Fraction de volume résiduel
Fraction flavonoïque purifiée micronisée
Fréquence de répétition des impulsions
Gamma-benzopyrone Voir Flavonoïdes
Gangrène veineuse
Générateur de radiofréquence
Générateur laser
Glycérine
Glycérine chromée
Grande veine saphène
Greffon homologue de valvule veineuse
Hémangioendothéliome
Hémangiome
Hémangiome intraosseux
Hématome digital spontané paroxystique ("syndrome d’ACHENBACH")
Hémodynamique veineuse

EN

Filtrs prophylactic caval
Filtrs recoverable
dFiltrs suprarenal
Filtrs TrapEase®
Filtr d’Amplatz of inferior vena caval
Filtr of the inferior vena caval
Filtr en nitinol Recovery
Filtr G2 Voir aussi Filtre GREENFIELD™ et Filtre GUNTHER™ Tulip
Filtre GREENFIELD™ Titanium
Filtre GREENFIELD™ Voir également Filtre G2 et Filtre GUNTHER™ Tulip
Filtre GUNTHER™ Tulip Voir également Filtre GREENFIELD™ et Filtre G2
Filtre umbrella of MOBIN-UDDIN
Filtre OptEase®
Filtre or clip of ADAMS-DEWEESE
Caval filters
Fistula arteriovenous
Fistula arteriovenous temporary
Flavonoids
Flexions-extensions on the tips of the feet
Vein flow
Venous pump function
Valvular function
Venous function
Venous calf pump function
Fondaparinux
Venous thrombus formation
Venous thoracic outlet syndrome. See also PAGET-von SCHRÖTTER syndrome
Outflow fraction
Ejection fraction. See also ejection volume
Residual volume fraction
Micronized purified flavonoid fraction (MPFF)
Pulse repetition frequency
Gamma benzopyrone. See flavonoids
Venous gangrene
Radiofrequency generator
Laser generator
Glycerin
Chromed glycerin
Great saphenous vein
Allograft valve
Hemangiogenesis
Hemangioma
Intraosseous hemangioma
ACHENBACH’s syndrome
Venous hemodynamics
<table>
<thead>
<tr>
<th><strong>FR</strong></th>
<th><strong>EN</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Héparine</td>
<td>Heparin</td>
</tr>
<tr>
<td>Héparine à bas poids moléculaire</td>
<td>Low molecular-weight heparin</td>
</tr>
<tr>
<td>Héparines non fractionnées</td>
<td>Unfractionated heparin</td>
</tr>
<tr>
<td>Hétérogreffevalvulaire</td>
<td>Xenograft valve</td>
</tr>
<tr>
<td>Hirudine</td>
<td>Hirudin</td>
</tr>
<tr>
<td>Hyperpigmentation cutanée</td>
<td>Skin hyperpigmentation</td>
</tr>
<tr>
<td>Hypertension veineuse ambulatoire</td>
<td>Ambulatory venous hypertension</td>
</tr>
<tr>
<td>Hypertension veineuse Voir Hypertension veineuse ambulatoire</td>
<td>Venous hypertension. See also ambulatory venous hypertension</td>
</tr>
<tr>
<td>Hypoplasie veineuse</td>
<td>Venous hypoplasia</td>
</tr>
<tr>
<td>Hypothèse pariétale de la pathogénèse des varices</td>
<td>Venous filling theory of varicose vein pathogenesis</td>
</tr>
<tr>
<td>Impatience des membres inférieurs</td>
<td>Restless legs</td>
</tr>
<tr>
<td>Index de remplissage veineux</td>
<td>Venous filling index (VFI)</td>
</tr>
<tr>
<td>Indice de drainage veineux</td>
<td>Venous drainage index</td>
</tr>
<tr>
<td>Indice de masse corporelle</td>
<td>Body mass index</td>
</tr>
<tr>
<td>Indice de recirculation</td>
<td>Recirculation index</td>
</tr>
<tr>
<td>Indice de rigidité dynamique</td>
<td>Dynamic stiffness index</td>
</tr>
<tr>
<td>Indice de rigidité statique</td>
<td>Static stiffness index</td>
</tr>
<tr>
<td>Indice du débit veinoartériel</td>
<td>Venoarterial flow index</td>
</tr>
<tr>
<td>Indice tibiobrachial ou indice de pression systolique cheville-bras</td>
<td>Ankle brachial index or ankle-brachial pressure index</td>
</tr>
<tr>
<td>Inhibiteurs tissulaires des métalloprotéases</td>
<td>Tissue inhibitors of metalloproteinases (TIMPs)</td>
</tr>
<tr>
<td>Injection intra-artérielle d’un sclérosant</td>
<td>Intra-arterial injection of sclerosant</td>
</tr>
<tr>
<td>Injection intra-artérielle lors d’une sclérothérapie</td>
<td>Arterial injection during sclerotherapy</td>
</tr>
<tr>
<td>Insertion pariétale Voir Agger valvulaire</td>
<td>Valve agger. See valvular agger</td>
</tr>
<tr>
<td>Insuffisance de la veine perforante</td>
<td>Perforator vein incompetence</td>
</tr>
<tr>
<td>Insuffisance de la veine perforante du mollet</td>
<td>Incompetent calf perforator</td>
</tr>
<tr>
<td>Insuffisance saphénienne</td>
<td>Saphenous insufficiency</td>
</tr>
<tr>
<td>Insuffisance valvulaire</td>
<td>Valvular incompetence</td>
</tr>
<tr>
<td>Insuffisance valvulaire du réseau veineux profond</td>
<td>Deep venous incompetence</td>
</tr>
<tr>
<td>Insuffisance valvulaire primaire</td>
<td>Primary venous incompetence</td>
</tr>
<tr>
<td>Insuffisance veineuse secondaire</td>
<td>Secondary venous incompetence</td>
</tr>
<tr>
<td>Insuffisance veineuse</td>
<td>Venous incompetence</td>
</tr>
<tr>
<td>Insuffisance veineuse cérébrospinale chronique</td>
<td>Chronic cerebrospinal venous insufficiency</td>
</tr>
<tr>
<td>Insuffisance veineuse chronique</td>
<td>Chronic venous insufficiency</td>
</tr>
<tr>
<td>Insuffisance veineuse superficielle</td>
<td>Superficial venous insufficiency</td>
</tr>
<tr>
<td>Intervention de LINTON voir aussi Chirurgie endoscopique des perforantes sous-fasciales</td>
<td>LINTON's operation. See also subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Intervention de PALMA Voir Transposition fémorofémorale-saphène</td>
<td>PALMA operation. See femorofemoral saphenous vein transposition</td>
</tr>
<tr>
<td>Intervention de PSATAKIS par tendon de silastic</td>
<td>PSATAKIS silastic sling procedure</td>
</tr>
<tr>
<td>Intervention de WARREN Voir Pontage fémoropoplité ou fémorocrural de la veine saphène</td>
<td>WARREN operation. See femoropopliteal or femorocrural saphenous vein bypass</td>
</tr>
<tr>
<td>Intervention endoveineuse Voir Technique endoveineuse</td>
<td>Endovenous procedure. See endovenous technique</td>
</tr>
<tr>
<td>Jambe lourde Voir Lourdeur</td>
<td>Heavy leg. See heaviness</td>
</tr>
<tr>
<td>Jonction saphénofémorale</td>
<td>Saphenofemoral junction</td>
</tr>
<tr>
<td>Jonction saphéno-poplitée</td>
<td>Saphenopopliteal junction</td>
</tr>
<tr>
<td>Laser à diode</td>
<td>Diode laser</td>
</tr>
<tr>
<td>Laser Alexandrite long pulse</td>
<td>Long-pulse Alexandrite laser. See Alexandrite long-pulse laser</td>
</tr>
</tbody>
</table>
### TERMS IN OTHER LANGUAGES - FRENCH

<table>
<thead>
<tr>
<th><strong>FR</strong></th>
<th><strong>EN</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Laser KTP</td>
<td>KTP laser</td>
</tr>
<tr>
<td>Laser ND-YAG (grenat d'yttrium-aluminium dopé au néodyme)</td>
<td>ND-YAG laser (neodymium-doped yttrium aluminum garnet)</td>
</tr>
<tr>
<td>Laser YAG Voir Laser ND-YAG</td>
<td>YAG laser. See ND-YAG LASER</td>
</tr>
<tr>
<td>Leggings superposés</td>
<td>Superimposed leggings</td>
</tr>
<tr>
<td>Léiomyosarcome</td>
<td>Leiomysarcoma</td>
</tr>
<tr>
<td>Lépirudine</td>
<td>Lepirudin</td>
</tr>
<tr>
<td>Lésion veineuse iliaque non thrombotique</td>
<td>Nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Ligature de la terminaison de la grande ou de la petite veine saphène au ras de la veine profonde</td>
<td>Flush ligation</td>
</tr>
<tr>
<td>Ligature de la veine perforante</td>
<td>Perforator vein ligation or perforator ligation</td>
</tr>
<tr>
<td>Ligature des perforantes de COCKETT</td>
<td>COCKETT’s perforator vein ligation</td>
</tr>
<tr>
<td>Ligature haute</td>
<td>High ligation</td>
</tr>
<tr>
<td>Ligature haute et division</td>
<td>High ligation and division</td>
</tr>
<tr>
<td>Ligature haute et “stripping”</td>
<td>High ligation and stripping</td>
</tr>
<tr>
<td>Ligature veineuse</td>
<td>Venous ligation</td>
</tr>
<tr>
<td>Lipodermatosclérose</td>
<td>Lipodermatosclerosis</td>
</tr>
<tr>
<td>Lipodème</td>
<td>Lipedema</td>
</tr>
<tr>
<td>Longueurs d’ondes laser spécifiques à l’eau</td>
<td>Water-specific laser wavelengths</td>
</tr>
<tr>
<td>Longueurs d’ondes laser spécifiques à l’hémoglobine</td>
<td>Hemoglobin-specific laser wavelengths</td>
</tr>
<tr>
<td>Lourdeur</td>
<td>Heaviness</td>
</tr>
<tr>
<td>Luciliathérapie, asticothérapie, “traitement de débridement des plaies par des larves”</td>
<td>Maggot treatment (maggot debridement therapy)</td>
</tr>
<tr>
<td>Lumière intense pulsée</td>
<td>Intense pulsed light</td>
</tr>
<tr>
<td>Lumière veineuse</td>
<td>Venous lumen</td>
</tr>
<tr>
<td>Maladie de BEHÇET</td>
<td>BEHÇET’s disease</td>
</tr>
<tr>
<td>Maladie de BUERGER (ou thromboangéite oblitérante)</td>
<td>BUERGER’s disease</td>
</tr>
<tr>
<td>Maladie de MONDOR</td>
<td>MONDOR’s disease</td>
</tr>
<tr>
<td>Maladie veineuse</td>
<td>Venous disease</td>
</tr>
<tr>
<td>Maladie veineuse chronique</td>
<td>Chronic venous disease</td>
</tr>
<tr>
<td>Malformation artérioiveineuse</td>
<td>Arteriovenous malformation</td>
</tr>
<tr>
<td>Malformation capillaire</td>
<td>Capillary malformation</td>
</tr>
<tr>
<td>Malformation lymphatique</td>
<td>Lymphatic malformation</td>
</tr>
<tr>
<td>Malformation tronculaire</td>
<td>Truncular malformation</td>
</tr>
<tr>
<td>Malformation vasculaire congénitale</td>
<td>Congenital vascular malformation</td>
</tr>
<tr>
<td>Malformation veineuse</td>
<td>Venous malformation</td>
</tr>
<tr>
<td>Malformation veineuse extratronculaire</td>
<td>Extratruncluar venous malformation</td>
</tr>
<tr>
<td>Malformation veineuse intraosseuse</td>
<td>Intratruncluar venous malformation</td>
</tr>
<tr>
<td>Manchonnage, “stenting” (ou cerclage) externe de la veine poplitée</td>
<td>Popliteal vein external banding</td>
</tr>
<tr>
<td>Manchonnage, cerclage ou “stenting” veineux externe</td>
<td>External venous banding / cuff</td>
</tr>
<tr>
<td>Manœuvre de Paraná</td>
<td>Paraná maneuver</td>
</tr>
<tr>
<td>Manœuvre de Valsalva</td>
<td>Valsalva maneuver</td>
</tr>
<tr>
<td>Mastocytes dans le cadre de la maladie veineuse chronique</td>
<td>Mast cells in chronic venous disease</td>
</tr>
<tr>
<td>Matting</td>
<td>Matting</td>
</tr>
<tr>
<td>Matting télangiectasique</td>
<td>Telangiectatic matting</td>
</tr>
<tr>
<td>Médicaments veinoactifs</td>
<td>Venoactive drugs / Venous drugs</td>
</tr>
<tr>
<td>Mesure de l’hémodynamique veineuse</td>
<td>Venous hemodynamic measurement</td>
</tr>
<tr>
<td>Métalloprotéases matricielles</td>
<td>Matrix metalloproteinases</td>
</tr>
<tr>
<td>FR</td>
<td>EN</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Microphlébectomie Voir Phlébectomie ambulatoire ou Phlébectomie ambulatoire de MULLER</td>
<td>➤ Microphlebectomy. See ambulatory stab avulsion or MULLER’s phlebectomy</td>
</tr>
<tr>
<td>Milking test</td>
<td>➤ Milking test</td>
</tr>
<tr>
<td>Mise en place d’une endoprothèse veineuse (”stenting veineux”)</td>
<td>➤ Venous stenting</td>
</tr>
<tr>
<td>Modifications trophiques Voir Altérations cutanées d’origine veineuse</td>
<td>➤ Trophic changes. See venous skin changes</td>
</tr>
<tr>
<td>Monitorage échographique</td>
<td>➤ Ultrasound monitoring</td>
</tr>
<tr>
<td>Morrhuate sodique</td>
<td>➤ Sodium morrhuate</td>
</tr>
<tr>
<td>Mousse sclérosante</td>
<td>➤ Sclerosing foam</td>
</tr>
<tr>
<td>Mousse sclérosante à base de biomatériaux</td>
<td>➤ Biomatrix sclerofoam</td>
</tr>
<tr>
<td>Mutation du facteur V de Leiden (hétérozygote ou homozygote)</td>
<td>➤ Factor V Leiden mutation (heterozygous, homozygous)</td>
</tr>
<tr>
<td>Nécrose cutanée post-sclérothérapie</td>
<td>➤ Cutaneous necrosis after sclerotherapy</td>
</tr>
<tr>
<td>Néojonction saphéno-fémorale</td>
<td>➤ Neosaphenofemoral junction</td>
</tr>
<tr>
<td>Néovalvule (autologue)</td>
<td>➤ Neovalve (autogenous)</td>
</tr>
<tr>
<td>Néovascularisation</td>
<td>➤ Neovascularization</td>
</tr>
<tr>
<td>NICE, haute autorité de santé britannique Voir</td>
<td>➤ National Institute for health and Care Excellence (NICE). See NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Recommandations du NICE pour le traitement des varices</td>
<td>➤ Venous obliteration</td>
</tr>
<tr>
<td>Oblitération veineuse</td>
<td>➤ Compression adherence</td>
</tr>
<tr>
<td>Observance du traitement de compression</td>
<td>➤ Vein obstruction. See venous obstruction</td>
</tr>
<tr>
<td>Obstruction d’une veine Voir Obstruction veineuse</td>
<td>➤ Outflow obstruction</td>
</tr>
<tr>
<td>Obstruction de l’écoulement</td>
<td>➤ Iliac vein obstruction</td>
</tr>
<tr>
<td>Obstruction de la veine iliaque</td>
<td>➤ Venous obstruction</td>
</tr>
<tr>
<td>Obstruction veineuse ilio cave</td>
<td>➤ Iliocaval vein obstruction</td>
</tr>
<tr>
<td>Obstruction veineuse primaire non thrombotique Voir Lésion veineuse iliaque non thrombotique</td>
<td>➤ Nonthrombotic vein primary obstruction. See nonthrombotic vein lesion</td>
</tr>
<tr>
<td>Obstruction veineuse profonde</td>
<td>➤ Deep venous obstruction</td>
</tr>
<tr>
<td>Occlusion d’une veine Voir Occlusion veineuse</td>
<td>➤ Vein occlusion. See venous occlusion</td>
</tr>
<tr>
<td>Occlusion de la veine iliaque</td>
<td>➤ Iliac vein occlusion</td>
</tr>
<tr>
<td>Occlusion veineuse</td>
<td>➤ Venous occlusion</td>
</tr>
<tr>
<td>Occlusion veineuse ilio cave</td>
<td>➤ Iliocaval vein occlusion</td>
</tr>
<tr>
<td>Êdème d’origine veineuse (phlébødème)</td>
<td>➤ Venous edema (phlebedema)</td>
</tr>
<tr>
<td>Êdème véspréal</td>
<td>➤ Occupational leg swelling</td>
</tr>
<tr>
<td>Êdème Voir Êdème d’origine veineuse (phlébødème)</td>
<td>➤ Edema. See venous edema</td>
</tr>
<tr>
<td>Êil égyptien</td>
<td>➤ Egyptian eye</td>
</tr>
<tr>
<td>Êil saphène Voir Êil égyptien</td>
<td>➤ Saphenous eye. See egyptian eye</td>
</tr>
<tr>
<td>Oléate d’éthanolamine</td>
<td>➤ Ethanolamine oleate</td>
</tr>
<tr>
<td>Ouverture valvulaire</td>
<td>➤ Valve opening</td>
</tr>
<tr>
<td>Oxygénothérapie hyperbare des ulcères veineux</td>
<td>➤ Hyperbaric oxygen treatment (or therapy) of venous ulcers</td>
</tr>
<tr>
<td>Oxygénothérapie hyperbare en cas d’ulcères veineux</td>
<td>➤ Oxygen, hyperbaric treatment of venous ulcers</td>
</tr>
<tr>
<td>Patch en polytétrafluoroéthylène pour inhiber la néovasculatisation</td>
<td>➤ Polytetrafluoroethylene patch for containing neovascularization</td>
</tr>
<tr>
<td>Pathogénèse des varices</td>
<td>➤ Varices pathogenesis</td>
</tr>
<tr>
<td>Patient C</td>
<td>➤ C C patient</td>
</tr>
<tr>
<td>Pentoxifylline</td>
<td>➤ Pentoxifylline</td>
</tr>
<tr>
<td>Perméabilité secondaire</td>
<td>➤ Secondary patency</td>
</tr>
<tr>
<td>Petite veine saphène voir aussi Extension crâniale de la petite veine saphène</td>
<td>➤ Small saphenous vein. See also cranial extension of the small saphenous vein</td>
</tr>
<tr>
<td><strong>FR</strong></td>
<td><strong>EN</strong></td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Pharmacothérapie en cas de maladie veineuse</td>
<td>Venous pharmacotherapy</td>
</tr>
<tr>
<td>Phénindione</td>
<td>Phenindione</td>
</tr>
<tr>
<td>Phénprocoumone</td>
<td>Fenprocoumon</td>
</tr>
<tr>
<td>Phlébectasie Voir également Venectasie et Varice, veine variqueuse, varicosité</td>
<td>Phlebectasia. See also venectasia and varice, varicose vein, and varicosity</td>
</tr>
<tr>
<td>Phlébectomie</td>
<td>Phlebectomy</td>
</tr>
<tr>
<td>Phlébectomie ambulatoire</td>
<td>Stab avulsion or stab phlebectomy / Ambulatory phlebectomy. See ambulatory stab avulsion</td>
</tr>
<tr>
<td>Phlébectomie ambulatoire de MULLER</td>
<td>MULLER’s ambulatory phlebectomy</td>
</tr>
<tr>
<td>Phlébectomie mécanique avec transillumination Voir</td>
<td>Phlebectomy power device. See powered phlebectomy</td>
</tr>
<tr>
<td>Phlébectomie par transillumination</td>
<td>Hook phlebectomy</td>
</tr>
<tr>
<td>Phlébectomie par transillumination</td>
<td>Powered phlebectomy / Transilluminated powered phlebectomy</td>
</tr>
<tr>
<td>Phlébite</td>
<td>Phlebitis</td>
</tr>
<tr>
<td>Phlébographie avec soustraction digitale</td>
<td>Digital subtraction phlebography</td>
</tr>
<tr>
<td>Phlébographie Voir Veinographie</td>
<td>Phlebography. See venography</td>
</tr>
<tr>
<td>Phlébographie/Phleynographie ascendante</td>
<td>Ascending phlebography/venography</td>
</tr>
<tr>
<td>Phlébographie/Phleynographie descendante</td>
<td>Descending phlebography/venography</td>
</tr>
<tr>
<td>Phlébologie</td>
<td>Phlebology</td>
</tr>
<tr>
<td>Phlébotomie</td>
<td>Phlebotomy (venesection, venotomy)</td>
</tr>
<tr>
<td>Phlébotoniques Voir Veinotoniques ou Médicaments venoactifs</td>
<td>Phlebotonic drug. See venotonic drugs or venaactive drugs</td>
</tr>
<tr>
<td>Phlegmatia alba dolens ou phlébite blanche</td>
<td>Phlegmasia alba dolens or white leg</td>
</tr>
<tr>
<td>Phlegmatia coerulea dolens ou phlébite bleue</td>
<td>Phlegmasia cerulea dolens or painful blue leg</td>
</tr>
<tr>
<td>Photopléthysmographie</td>
<td>Photoplethysmography</td>
</tr>
<tr>
<td>Photothermolysé</td>
<td>Photothermolysis</td>
</tr>
<tr>
<td>Physiologie veineuse</td>
<td>Venous physiology</td>
</tr>
<tr>
<td>Picotements</td>
<td>Tingling</td>
</tr>
<tr>
<td>Pigmentation ou hyperpigmentation</td>
<td>Pigmentation or hyperpigmentation</td>
</tr>
<tr>
<td>Pin-stripper (ou tire-veine)</td>
<td>PIN stripper</td>
</tr>
<tr>
<td>Pin-stripping (ou Éveinage par tire-veine)</td>
<td>PIN stripping</td>
</tr>
<tr>
<td>Pléthysmographie à air</td>
<td>Air Plethysmography</td>
</tr>
<tr>
<td>Pléthysmographie à jauge de mercure</td>
<td>Strain-gauge plethysmography</td>
</tr>
<tr>
<td>Pléthysmographie avec occlusion veineuse</td>
<td>Occlusion plethysmography</td>
</tr>
<tr>
<td>Pléthysmographie d’impédance</td>
<td>Impedance plethysmography</td>
</tr>
<tr>
<td>Pléthysmographie veineuse</td>
<td>Venous plethysmography</td>
</tr>
<tr>
<td>Pléthysmographie Voir également Pléthysmographie à air, Photopléthysmographie et Pléthysmographie avec occlusion veineuse</td>
<td>Plethysmography. See also air plethysmography, photoplethysmography and occlusion plethysmography</td>
</tr>
<tr>
<td>Plexus (vésicoprostatique) pudendal (homme)</td>
<td>Pudendal (vesicoprostatic) plexus (male)</td>
</tr>
<tr>
<td>Plexus pampiniforme</td>
<td>Pampiniform plexus</td>
</tr>
<tr>
<td>Plexus veineux prostatique (homme)</td>
<td>Prostatic venous plexus (male)</td>
</tr>
<tr>
<td>Plexus veineux rectal externe sacral</td>
<td>Sacral venous external rectal plexus</td>
</tr>
<tr>
<td>Plexus veineux rectal interne sacral</td>
<td>Sacral venous internal rectal plexus</td>
</tr>
<tr>
<td>Plexus veineux utérin (femme)</td>
<td>Uterine venous plexus (female)</td>
</tr>
<tr>
<td>Plexus veineux vaginal (femme)</td>
<td>Vaginal venous plexus (female)</td>
</tr>
<tr>
<td>Point de fuite</td>
<td>Escape point</td>
</tr>
<tr>
<td>Polidocanol</td>
<td>Polidocanol</td>
</tr>
<tr>
<td>Pompe musculaire du mollet</td>
<td>Calf muscle pump or calf pump</td>
</tr>
<tr>
<td>Pompe veineuse du pied</td>
<td>Foot muscle pump</td>
</tr>
<tr>
<td>FR</td>
<td>EN</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>----------------------------------</td>
</tr>
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<td>Ponction, canulation échoguidée</td>
<td>Ultrasound-guided puncture, cannulation</td>
</tr>
<tr>
<td>Ponction croisé</td>
<td>Crossover bypass</td>
</tr>
<tr>
<td>Ponction de MAY-HUSNI Voir Pontage saphénopoplité</td>
<td>MAY-HUSNI bypass. See saphenopopliteal bypass</td>
</tr>
<tr>
<td>Pontage fémoroliolique ou fémorocave</td>
<td>Femoroliolocaval bypass</td>
</tr>
<tr>
<td>Pontage fémoropoplité ou fémorocrural de la veine saphène</td>
<td>Femoropopliteal and femorocrural saphenous vein bypass</td>
</tr>
<tr>
<td>Pontage prothétique croisé sus-pubien</td>
<td>Cross-pubic prosthetic bypass</td>
</tr>
<tr>
<td>Pontage saphénopoplité</td>
<td>Saphenopopliteal bypass</td>
</tr>
<tr>
<td>Pontage veineux (&quot;bypass&quot;)</td>
<td>Venous bypass</td>
</tr>
<tr>
<td>Pontage veineux jugulaoxillaire</td>
<td>Jugular axillary vein bypass</td>
</tr>
<tr>
<td>Pose d’une endoprothèse (stent) dans la veine iliaque</td>
<td>Iliac vein stenting</td>
</tr>
<tr>
<td>Position de TRENDELENBURG</td>
<td>TRENDELENBURG position</td>
</tr>
<tr>
<td>Power-Pulse AngioJet™ Voir également AngioJet™</td>
<td>Power pulse AngioJet™. See also AngioJet™</td>
</tr>
<tr>
<td>Présence de varices après traitement interventionnel (PREVAIT)</td>
<td>PRÉsence of Varices After Interventional Treatment (PREVAIT)</td>
</tr>
<tr>
<td>Pression d’interface</td>
<td>Interface pressure</td>
</tr>
<tr>
<td>Pression de compression</td>
<td>Compression pressure</td>
</tr>
<tr>
<td>Pression de compression fonctionnelle</td>
<td>Working compression pressure</td>
</tr>
<tr>
<td>Pression différentielle cheville/bras</td>
<td>Arm/foot pressure differential</td>
</tr>
<tr>
<td>Pression hydrostatique</td>
<td>Hydrostatic pressure</td>
</tr>
<tr>
<td>Pression intramusculaire</td>
<td>Intramuscular pressure</td>
</tr>
<tr>
<td>Pression veineuse</td>
<td>Venous pressure</td>
</tr>
<tr>
<td>Pression veineuse ambulatoire</td>
<td>Ambulatory venous pressure</td>
</tr>
<tr>
<td>Pression veineuse dynamique</td>
<td>Dynamic venous pressure</td>
</tr>
<tr>
<td>Prévention/Prophylaxie de la thrombose veineuse profonde</td>
<td>Deep vein thrombosis prevention/prophylaxis</td>
</tr>
<tr>
<td>Prostacycline</td>
<td>Prostacyclin</td>
</tr>
<tr>
<td>Prurit Voir Démangeaisons</td>
<td>Pruritis. See itching</td>
</tr>
<tr>
<td>Qualité de vie en cas de maladie veineuse</td>
<td>Quality of life in venous disease</td>
</tr>
<tr>
<td>Quantification du reflux</td>
<td>Reflux quantification</td>
</tr>
<tr>
<td>Questionnaire d’Aberdeen sur les varices</td>
<td>Aberdeen Varicose Vein Questionnaire</td>
</tr>
<tr>
<td>Questionnaire de l’hôpital Charing Cross sur l’ulcère veineux</td>
<td>Charing Cross Venous Ulcer Questionnaire</td>
</tr>
<tr>
<td>Questionnaire Qualité de vie sur les ulcères veineux de jambe</td>
<td>Venous leg ulcer quality of life questionnaire</td>
</tr>
<tr>
<td>Questionnaire SQOR-V (Specific Quality of life Outcome Response - Venous)</td>
<td>Specific quality of life outcome response-venous</td>
</tr>
<tr>
<td>Radiologie interventionnelle en phlébologie</td>
<td>Interventional radiology (in phlebology)</td>
</tr>
<tr>
<td>Raideur dans la cheville</td>
<td>Ankle stiffness</td>
</tr>
<tr>
<td>Récidive de varice ou varice récidivante</td>
<td>Recurrent varice or recurrent varicose vein</td>
</tr>
<tr>
<td>Récidives de varices après chirurgie (REcurrent Varices After Surgery, REVAS)</td>
<td>Recurrent varices after surgery (REVAS)</td>
</tr>
<tr>
<td>Recirculation saphénienne</td>
<td>Saphenous recirculation</td>
</tr>
<tr>
<td>Recommandations de la Société européenne de chirurgie vasculaire pour la veine veineuse chronique</td>
<td>European Society for Vascular Surgery guidelines for chronic venous disease</td>
</tr>
<tr>
<td>Recommandations du NICE (National Institute for Health and Care Excellence) pour le traitement des varices</td>
<td>NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Reconstruction de la veine cave inférieure supraránale</td>
<td>Suprarenal inferior vena cava reconstruction</td>
</tr>
<tr>
<td>Reconstruction valvulaire</td>
<td>Valve reconstruction</td>
</tr>
<tr>
<td>Reconstructions à ciel ouvert en cas d’occlusion bénigne de la veine cave</td>
<td>Open surgical reconstructions for nonmalignant occlusion of the vena cava</td>
</tr>
<tr>
<td>Réflexe de vasoconstriction posturale Voir Réflexe veinoarterioloire</td>
<td>Postural vasoconstriction reflex. See venoarterial reflex</td>
</tr>
<tr>
<td>Réflexe veinoarterioloire (réflexe de vasoconstriction posturale)</td>
<td>Venoarterial reflex (postural vasoconstriction reflex)</td>
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TERMS IN OTHER LANGUAGES - FRENCH

<table>
<thead>
<tr>
<th>FR</th>
<th>EN</th>
</tr>
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<tbody>
<tr>
<td>Reflux axial</td>
<td>Axial reflux</td>
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<tr>
<td>Reflux ou insuffisance de la veine ovarienne</td>
<td>Ovarian vein reflux or ovarian vein incompetence</td>
</tr>
<tr>
<td>Reflux ou insuffisance veineuse superficielle</td>
<td>Superficial venous reflux or incompetence</td>
</tr>
<tr>
<td>Reflux résiduel</td>
<td>Residual reflux</td>
</tr>
<tr>
<td>Reflux saphénien</td>
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</tr>
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</tr>
<tr>
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</tr>
<tr>
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<td>Venous reflux</td>
</tr>
<tr>
<td>Reflux veineux pelvien</td>
<td>Pelvic vein reflux</td>
</tr>
<tr>
<td>Reflux veineux profond</td>
<td>Deep venous reflux</td>
</tr>
<tr>
<td>Reflux veineux superficiel et profond associés</td>
<td>Associated deep and superficial venous reflux</td>
</tr>
<tr>
<td>Reflux veineux urétéral</td>
<td>Ureteric vein reflux</td>
</tr>
<tr>
<td>Reflux veineux superficiel</td>
<td>Venous back flow. See venous reflux</td>
</tr>
<tr>
<td>Reflux veineux pelvien</td>
<td>Vein wall remodeling</td>
</tr>
<tr>
<td>Reflux veineux superficiel et profond associés</td>
<td>Surgical repair of deep venous valve incompetence</td>
</tr>
<tr>
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</tr>
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<td>Réfoulement du flux veineux Voir Reflux veineux</td>
<td>TRIPATHI trap door valve repair</td>
</tr>
<tr>
<td>Régurgitation du flux sanguin Voir Reflux veineux</td>
<td>Valve repair. See valve reconstruction</td>
</tr>
<tr>
<td>Remodelage de la paroi veineuse</td>
<td>Venoarteriolar response</td>
</tr>
<tr>
<td>Réparation chirurgicale d’une insuffisance valvulaire du réseau veineux profond</td>
<td>ALBANESE venous system</td>
</tr>
<tr>
<td>Réparation valvulaire en forme de ”trappe” de TRIPATHI</td>
<td>Popliteal fossa varicose network</td>
</tr>
<tr>
<td>Réparation valvulaire Voir Reconstruction valvulaire</td>
<td>Groin varicose network. See also neovascularization</td>
</tr>
<tr>
<td>Réponse veinoartériolaire</td>
<td>Dorsal venous network of the foot</td>
</tr>
<tr>
<td>Réseau d’ALBANESE</td>
<td>Plantar venous subcutaneous network</td>
</tr>
<tr>
<td>Réseau variqueux de la fosse poplitée</td>
<td>First rib resection</td>
</tr>
<tr>
<td>Réseau variqueux inguinal Voir également</td>
<td>Venous outflow resistance</td>
</tr>
<tr>
<td>Néovascularisation</td>
<td>Venous thrombus resolution</td>
</tr>
<tr>
<td>Réseau veineux dorsal du pied</td>
<td>Filter retrieval</td>
</tr>
<tr>
<td>Réseau veineux superficiel plantaire</td>
<td>Reviparin (clivarine)</td>
</tr>
<tr>
<td>Résection de la première côte</td>
<td>Rivaroxaban</td>
</tr>
<tr>
<td>Résistance à l’écoulement veineux</td>
<td>Perfusion scintigraphy</td>
</tr>
<tr>
<td>Résolution d’un thrombus veineux</td>
<td>Ventilation-perfusion scintigraphy</td>
</tr>
<tr>
<td>Retrait du filtre</td>
<td>Sclerosant agent</td>
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<tr>
<td>Réviparine (Clivarine)</td>
<td>Chemical irritant (sclerosing agent) in sclerotherapy</td>
</tr>
<tr>
<td>Rivaroxaban</td>
<td>Detergent sclerosing agent for sclerotherapy</td>
</tr>
<tr>
<td>Scintigraphie de perfusion</td>
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</tr>
<tr>
<td>Scintigraphie pulmonaire de ventilation-perfusion</td>
<td>Sclerotherapy</td>
</tr>
<tr>
<td>Scérosant</td>
<td>Microfoam sclerotherapy. See foam sclerotherapy</td>
</tr>
<tr>
<td>Scérosant chimique irritant en sclérothérapie</td>
<td>Foam sclerotherapy. See also sclerotherapy</td>
</tr>
<tr>
<td>Scérosant détergent en sclérothérapie</td>
<td>Ultrasound-guided sclerotherapy</td>
</tr>
<tr>
<td>Scérosant osmotique en sclérothérapie</td>
<td>Ultrasound-guided foam sclerotherapy</td>
</tr>
<tr>
<td>Scérothérapie</td>
<td>Liquid sclerotherapy</td>
</tr>
<tr>
<td>Scérothérapie à la micromousse Voir Scérothérapie à la mousse</td>
<td>Antwerp clinical score for pulmonary embolism</td>
</tr>
<tr>
<td>Scérothérapie à la mousse Voir également Scérothérapie</td>
<td>Aberdeen Varicose Vein Severity Score</td>
</tr>
<tr>
<td>Scérothérapie échoguidée</td>
<td>Venous disability score</td>
</tr>
<tr>
<td>Scérothérapie échoguidée à la mousse</td>
<td>CAPRINI score</td>
</tr>
<tr>
<td>Scérothérapie liquide</td>
<td>Pain score</td>
</tr>
<tr>
<td>Score clinique d’Anvers pour les embolies pulmonaires</td>
<td>Ginsberg scale</td>
</tr>
<tr>
<td>Score d’Aberdeen de sévérité des varices</td>
<td></td>
</tr>
<tr>
<td>FR</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Score de Homburg de sévérité des varices</td>
<td>Homburg varicose vein severity score</td>
</tr>
<tr>
<td>Score de la maladie segmentaire veineuse</td>
<td>Venous segmental disease score</td>
</tr>
<tr>
<td>Score de sévérité anatomo- et physiopathologique Voir Score de la maladie segmentaire veineuse</td>
<td>Anatomic score. See venous segmental disease score</td>
</tr>
<tr>
<td>Score de sévérité clinique (Venous Clinical Severity Score, VCSS)</td>
<td>Venous clinical severity score (VCSS)</td>
</tr>
<tr>
<td>Score de VILLALTA</td>
<td>VILLALTA score</td>
</tr>
<tr>
<td>Score de Wells</td>
<td>Wells score</td>
</tr>
<tr>
<td>Semelle veineuse plantaire de LEJARS</td>
<td>LEJARS’ sole</td>
</tr>
<tr>
<td>Sensation de chaleur ou de brûlure</td>
<td>Heat or burning sensation</td>
</tr>
<tr>
<td>Sensation de gonflement</td>
<td>Impression of swelling. See feeling of swelling</td>
</tr>
<tr>
<td>SEPS Voir Chirurgie endoscopique des perforantes sous-fasciales</td>
<td>SEPS. See subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Shunt (ou court-circuit veineux) dans le membre inférieur</td>
<td>Private venous circulation in the lower limb</td>
</tr>
<tr>
<td>Signe de HOMANS</td>
<td>HOMANS sign</td>
</tr>
<tr>
<td>Signe de l’alignement</td>
<td>Alignment sign</td>
</tr>
<tr>
<td>Signe de Mickey Mouse</td>
<td>Mickey Mouse sign</td>
</tr>
<tr>
<td>Sinus valvulaire</td>
<td>Valve sinus</td>
</tr>
<tr>
<td>Société européenne de chirurgie vasculaire</td>
<td>European Society for Vascular Surgery</td>
</tr>
<tr>
<td>Solution tumescente</td>
<td>Tumescent solution</td>
</tr>
<tr>
<td>Sténose de ROKITANSKY</td>
<td>ROKITANSKY stenosis</td>
</tr>
<tr>
<td>Sténose veineuse</td>
<td>Venous stenosis</td>
</tr>
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<td>Stent autoexpansible</td>
<td>Self-expanding stent</td>
</tr>
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<td>Stent de GIANTURCO</td>
<td>GIANTURCO stent</td>
</tr>
<tr>
<td>Stent en nitinol</td>
<td>Nitinol stent</td>
</tr>
<tr>
<td>Stent en Z ou “Z-Stent™”</td>
<td>Z-stent™</td>
</tr>
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<td>Stockinette imprégnée de pâte à l’oxyde de zinc</td>
<td>Zinc paste impregnated stockinette</td>
</tr>
<tr>
<td>Streptokinase</td>
<td>Streptokinase</td>
</tr>
<tr>
<td>Strip test – Test de la compétence valvulaire Voir Milking test</td>
<td>Strip test for valve competence. See milking test</td>
</tr>
<tr>
<td>Stripper de OESCH Voir Pin-stripper</td>
<td>OESCH stripper. See PIN stripper</td>
</tr>
<tr>
<td>Structures valvulaires d’EISEMANN et MALETTE Voir Valvule veineuse autologue</td>
<td>EISEMANN and MALETTE valve-like structures. See autologous vein valve</td>
</tr>
<tr>
<td>Suivi du traitement de compression</td>
<td>Compression compliance</td>
</tr>
<tr>
<td>Suture</td>
<td>Venesuture</td>
</tr>
<tr>
<td>Symptômes des jambes Voir Symptômes veineux</td>
<td>Leg symptoms. See venous symptoms</td>
</tr>
<tr>
<td>Symptômes veineux</td>
<td>Venous symptoms</td>
</tr>
<tr>
<td>Syndrome d’obstruction compressive</td>
<td>Strain obstruction syndrome</td>
</tr>
<tr>
<td>Syndrome de BUDD-CHIARI</td>
<td>BUDD-CHIARI syndrome</td>
</tr>
<tr>
<td>Syndrome de COCKETT Voir également Syndrome de MAY-THURNER</td>
<td>COCKETT syndrome. See also MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Syndrome de congestion pelvienne</td>
<td>Pelvic congestion syndrome</td>
</tr>
<tr>
<td>Syndrome de GULLMO Voir Syndrome d’obstruction compressive</td>
<td>GULLMO’s syndrome. See strain obstruction syndrome</td>
</tr>
<tr>
<td>Syndrome de KASABACH-MERRITT</td>
<td>KASABACH-MERRIT syndrome</td>
</tr>
<tr>
<td>Syndrome de KLIPPEL-TRENAUNAY</td>
<td>KLIPPEL-TRENAUNAY syndrome</td>
</tr>
<tr>
<td>Syndrome de la classe économique Voir Thromboembolie veineuse liée à un voyage aérien</td>
<td>Economy class syndrome. See air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Syndrome de la veine cave supérieure</td>
<td>Superior vena cava syndrome</td>
</tr>
<tr>
<td>Syndrome de MAFFUCCI</td>
<td>MAFFUCCI syndrome</td>
</tr>
<tr>
<td>Syndrome de MAY-THURNER</td>
<td>MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Syndrome de PAGET-von SCHRÖTTER</td>
<td>PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>FR</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Syndrome de PARKES WEBER</td>
<td>PARKES WEBER syndrome</td>
</tr>
<tr>
<td>Syndrome de SERVELLE MARTORELL</td>
<td>SERVELLE MARTORELL syndrome</td>
</tr>
<tr>
<td>Syndrome de STURGE WEBER</td>
<td>STURGE WEBER syndrome</td>
</tr>
<tr>
<td>Syndrome des antiphospholipides</td>
<td>Antiphospholipid syndrome</td>
</tr>
<tr>
<td>Syndrome des compartiments en cas de maladie veineuse</td>
<td>Compartment syndrome in venous disease</td>
</tr>
<tr>
<td>Syndrome des défilés cervicoaxillaires</td>
<td>Thoracic outlet syndrome</td>
</tr>
<tr>
<td>Syndrome du casse-noisette</td>
<td>Nutcracker syndrome</td>
</tr>
<tr>
<td>Syndrome post-thrombotique ou maladie post-phlébitique</td>
<td>Postthrombotic syndrome or postthrombotic disease</td>
</tr>
<tr>
<td>Système à deux seringues (Double Syringe System, DSS)</td>
<td>Double syringe system</td>
</tr>
<tr>
<td>Système azygos</td>
<td>Azygos system</td>
</tr>
<tr>
<td>Système de notation clinique, score de sévérité clinique</td>
<td>Clinical scoring system, clinical severity score</td>
</tr>
<tr>
<td>Système EKOS™ - Thrombolyse par cathéter à ultrasons</td>
<td>EKOS™ ultrasound-assisted thrombolysis system</td>
</tr>
<tr>
<td>Système veineux</td>
<td>Venous system</td>
</tr>
<tr>
<td>Systèmes rotationnels de thrombectomie Cleaner</td>
<td>Cleaner rotational thrombectomy systems</td>
</tr>
<tr>
<td>Table basculante</td>
<td>Tilt table</td>
</tr>
<tr>
<td>Tache de vin</td>
<td>Port-wine stain</td>
</tr>
<tr>
<td>Technique “air-bloc”</td>
<td>Air-block technique</td>
</tr>
<tr>
<td>Technique de TESSARI</td>
<td>TESSARI technique</td>
</tr>
<tr>
<td>Technique du pulse-spray (injection de produit thrombolytique sous haute pression) Voir également AngioJet™</td>
<td>Pulse-spray technique in thrombolysis. See also AngioJet™</td>
</tr>
<tr>
<td>Technique endoveineuse</td>
<td>Endovenous technique</td>
</tr>
<tr>
<td>Technique START (sclérothérapie lors d’une anesthésie en tumescence des veines réticulaires et télangiectasies)</td>
<td>Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)</td>
</tr>
<tr>
<td>Télangiectasie</td>
<td>Telangiectasia</td>
</tr>
<tr>
<td>Temps de fermeture valvulaire</td>
<td>Valve closure time</td>
</tr>
<tr>
<td>Temps de remplissage veineux</td>
<td>Venous filling time (VFT), See refilling time</td>
</tr>
<tr>
<td>Test de PERTHES</td>
<td>PERTHES test</td>
</tr>
<tr>
<td>Test de TRENDELENBURG</td>
<td>TRENDELENBURG test</td>
</tr>
<tr>
<td>Tétradécyl sulfate de sodium</td>
<td>Sodium tetradecyl sulfate</td>
</tr>
<tr>
<td>Théorie ascendante des varices</td>
<td>Ascending theory for varicose veins</td>
</tr>
<tr>
<td>Théorie descendante de la pathogénèse des varices</td>
<td>Descending theory in the pathogenesis of varicose veins</td>
</tr>
<tr>
<td>Thermothérapie par radiofréquence</td>
<td>Radiofrequency-induced thermotherapy</td>
</tr>
<tr>
<td>Thrombectomie mécanique</td>
<td>Mechanical thrombectomy</td>
</tr>
<tr>
<td>Thrombectomie mécanique percutanée</td>
<td>Percutaneous mechanical thrombectomy</td>
</tr>
<tr>
<td>Thrombectomie par voie percutanée avec le dispositif Arrow TREROTOLA™</td>
<td>Arrow TREROTOLA™ percutaneous thrombectomy</td>
</tr>
<tr>
<td>Thrombectomie veineuse</td>
<td>Venous thrombectomy</td>
</tr>
<tr>
<td>Thrombectomie veineuse chirurgicale</td>
<td>Surgical venous thrombectomy</td>
</tr>
<tr>
<td>Thromboembolie veineuse</td>
<td>Venous thromboembolism</td>
</tr>
<tr>
<td>Thromboembolie veineuse liée à un voyage aérien</td>
<td>Air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Thrombolyse dirigée par cathéter</td>
<td>Catheter-directed thrombolysis</td>
</tr>
<tr>
<td>Thrombolyse pharmacomécanique</td>
<td>Pharmacomechanical thrombolysis</td>
</tr>
<tr>
<td>Thrombolyse Voir Traitement veineux thrombolytique</td>
<td>Thrombolysis. See venous thrombolytic treatment</td>
</tr>
<tr>
<td>Thrombopénie induite par l’héparine</td>
<td>Heparin-induced thrombocytopenia</td>
</tr>
<tr>
<td>Thrombophilie</td>
<td>Thrombophilia</td>
</tr>
<tr>
<td>Thrombophlébite</td>
<td>Thrombophlebitis</td>
</tr>
<tr>
<td>Thrombophlébite superficielle Voir Thrombophlébite veineuse superficielle</td>
<td>Superficial thrombophlebitis. See superficial venous thrombophlebitis</td>
</tr>
<tr>
<td>Thrombophlébite veineuse superficielle Voir Thrombose veineuse superficielle</td>
<td>Superficial venous thrombophlebitis. See superficial vein thrombosis</td>
</tr>
<tr>
<td>Thromboprophylaxie veineuse</td>
<td>Venous thromboprophylaxis</td>
</tr>
<tr>
<td><strong>FR</strong></td>
<td><strong>EN</strong></td>
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<td>----------------------------------------------------------------------</td>
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<tr>
<td>Thrombose d’effort Voir syndrome de PAGET-von SCHRÖTTER</td>
<td>Effort thrombosis. See PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Thrombose de la veine cave inférieure</td>
<td>Inferior vena cava thrombosis</td>
</tr>
<tr>
<td>Thrombose de la veine mésentérique</td>
<td>Mesenteric vein thrombosis</td>
</tr>
<tr>
<td>Thrombose endoveineuse causée par la chaleur Voir Classification de KABNICK</td>
<td>Endovenous heat-induced thrombus. See KABNICK classification</td>
</tr>
<tr>
<td>Thrombose induite par la chaleur Voir Thrombose endoveineuse causée par la chaleur</td>
<td>Heat-induced thrombosis. See endovenous heat-induced thrombus</td>
</tr>
<tr>
<td>Thrombose liée aux contraceptifs oraux</td>
<td>Oral contraceptive-related thrombosis</td>
</tr>
<tr>
<td>Thrombose proximale</td>
<td>Proximal thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse</td>
<td>Venous thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse axillo-sous-clavière ou Syndrome de PAGET-von SCHRÖTTER</td>
<td>Axillo-subclavian vein thrombosis also called PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Thrombose veineuse du mollet, thrombose veineuse profonde isolée du mollet</td>
<td>Calf vein thrombosis, deep vein thrombosis isolated in the calf</td>
</tr>
<tr>
<td>Thrombose veineuse profonde</td>
<td>Deep venous thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse profonde aigüe Voir Thrombose veineuse profonde</td>
<td>Acute deep vein thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse profonde concomitante à une veine superficielle</td>
<td>Concomitant superficial and deep venous thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse profonde des extrémités supérieures</td>
<td>Upper extremity deep vein thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse profonde fémoropoplitée voir aussi</td>
<td>Femoropopliteal deep vein thrombosis. See also deep vein thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse profonde iliocéphalique</td>
<td>Iliofemoral deep vein thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse profonde récidivante</td>
<td>Recurrent deep venous thrombosis</td>
</tr>
<tr>
<td>Thrombose veineuse superficielle</td>
<td>Superficial vein thrombosis</td>
</tr>
<tr>
<td>Thrombus flottant</td>
<td>Free-floating thrombus</td>
</tr>
<tr>
<td>Thrombus veineux Voir aussi Thrombose veineuse</td>
<td>Venous thrombus. See also venous thrombosis</td>
</tr>
<tr>
<td>Tinzaparine</td>
<td>Tinzaparin</td>
</tr>
<tr>
<td>Tire-veine pour l’éveinage par perforation-invagination (PIN) Voir Pin-stripper</td>
<td>Perforate INvaginate (PIN) stripper. See PIN stripper</td>
</tr>
<tr>
<td>Tomodensitométrie en cas de maladie veineuse</td>
<td>Computed tomography in venous disease</td>
</tr>
<tr>
<td>Traitement chirurgical hybride des thromboses</td>
<td>Hybrid operative thrombectomy</td>
</tr>
<tr>
<td>Traitement conservateur en cas de maladie veineuse</td>
<td>Conservative treatment in venous disease</td>
</tr>
<tr>
<td>Traitement de compression</td>
<td>Compression therapy</td>
</tr>
<tr>
<td>Traitement de compression des ulcères veineux</td>
<td>Compression therapy for venous ulcers</td>
</tr>
<tr>
<td>Traitement Endothermique</td>
<td>Endothermal treatment</td>
</tr>
<tr>
<td>Traitement endoveineux</td>
<td>Endovenous treatment</td>
</tr>
<tr>
<td>Traitement fibrinolytique</td>
<td>Fibrinolytic therapy</td>
</tr>
<tr>
<td>Traitement par anticoagulants oraux</td>
<td>Oral anticoagulant therapy</td>
</tr>
<tr>
<td>Traitement par laser endoveineux Voir Ablation par laser endoveineux des veines saphènes</td>
<td>Endovenous laser treatment. See endovenous laser ablation of saphenous veins</td>
</tr>
<tr>
<td>Traitement par laser percutané des télangiectasies et varices</td>
<td>Percutaneous laser therapy for télangiectasia and varicose veins</td>
</tr>
<tr>
<td>Traitement par occlusion d’un reflux veineux profond</td>
<td>Coiling for deep venous reflux</td>
</tr>
<tr>
<td>Traitement par occlusion de la ou des veines ovariiennes ou pelviennes Voir Embolisation veineuse pelvienne</td>
<td>Coiling of ovarian or pelvic veins. See also pelvic vein embolization</td>
</tr>
<tr>
<td>Traitement par thermoablation veineuse</td>
<td>Venous thermal ablation</td>
</tr>
<tr>
<td>Traitement veineux thrombolytique</td>
<td>Venous thrombolytic treatment</td>
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<tr>
<td>Transfert de segment veineux Voir Transplantation valvulaire</td>
<td>Venous segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Transfert ou transplantation de la veine axillaire</td>
<td>Axillary vein transfer or transplantation</td>
</tr>
</tbody>
</table>
Vein segment transplantation or vein segment transfer. See valve transplantation

Valve transplantation

Femorofemoral saphenous vein transposition

KISTNER’s vein transposition

Vein transposition. See KISTNER’s vein transposition

VIRCHOW’s triad

Trivex. See transilluminated powered phlebectomy

Trophic disorders. See venous skin changes

Leg ulcer. See venous leg ulcer

MARJOLIN’s ulcer

MARTORELL’s ulcer

Mixed arterial and venous ulcer

Active venous ulcer. See venous leg ulcer

Venous leg ulcer

Ultrasound

International Union of Phlebology

Urokinase

PAVCNIK valve

Portland valve or PAVCNIK valve

Refluxive valve. See valvular incompetence

Saphenofemoral junction preterminal valve

Saphenopopliteal junction preterminal valve

Saphenofemoral junction terminal valve

Saphenopopliteal junction terminal valve

Terminal valve. See saphenofemoral junction terminal valve and saphenopopliteal junction terminal valve

Venous valve

Artificial venous valve

Autologous vein valve

Venous bicuspid valve

Venous bioprosthetic valve

Prosthetic venous valve

Valve. See venous valve

Valvuloplasty

KISTNER’s valvuloplasty

Raju’s valvuloplasty

SOTTIURAI’s valvuloplasty

External / extraluminal valvuloplasty

Internal valvuloplasty

Prosthetic sleeve valvuloplasty

Transcommisural valvuloplasty

Transmural valvuloplasty

Postural diameter change

Venous hemodynamic changes in venous disease

Postthrombotic varicose vein

Residual varicose vein or residual varice
<table>
<thead>
<tr>
<th>FR</th>
<th>EN</th>
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</thead>
<tbody>
<tr>
<td>Varice, veine variqueuse, varicosité</td>
<td>• Varice, varicose vein, varicosity</td>
</tr>
<tr>
<td>Varices du ligament rond</td>
<td>• Round ligament varices</td>
</tr>
<tr>
<td>Varices pelviennes</td>
<td>• Pelvic varices</td>
</tr>
<tr>
<td>Varices périnéales</td>
<td>• Perineal varicosities</td>
</tr>
<tr>
<td>Varices pudendales</td>
<td>• Pudendal varicose veins</td>
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<tr>
<td>Varices sous-cutanées Voir Télangiectasie</td>
<td>• Subdermal varices. See telangiectasia</td>
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<td>Varices symptomatiques</td>
<td>• Symptomatic varicose veins</td>
</tr>
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<td>Varicocèle</td>
<td>• Varicocele</td>
</tr>
<tr>
<td>Varicographie</td>
<td>• Varicography</td>
</tr>
<tr>
<td>Varicosité Voir Varice, veine variqueuse, varicosité</td>
<td>• Varicosity. See varice, varicose vein, varicosity</td>
</tr>
<tr>
<td>Varicosités pelviennes Voir Varices pelviennes</td>
<td>• Pelvic varicosity. See pelvic varices</td>
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<td>Veine</td>
<td>• Vein</td>
</tr>
<tr>
<td>Veine accessoire antérieure de la grande veine saphène</td>
<td>• Anterior accessory of the great saphenous vein. See Anterior accessory saphenous vein</td>
</tr>
<tr>
<td>Voir Veine saphène accessoire antérieure</td>
<td></td>
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<tr>
<td>FR</td>
<td>EN</td>
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<tr>
<td>-----------------</td>
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<tr>
<td>Veine iliolumbaire</td>
<td>liolumbar vein</td>
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<tr>
<td>Veine incompétente</td>
<td>Incompetent vein</td>
</tr>
<tr>
<td>Veine intergémellaire ou veine intergastrocnémienne</td>
<td>Intergemellar vein or intergastrocnemial vein</td>
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<tr>
<td>Veine jugulaire interne</td>
<td>Internal jugular vein</td>
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<tr>
<td>Veine marginale du pied latérale</td>
<td>Lateral marginal vein of the foot</td>
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<tr>
<td>Veine marginale du pied médiale</td>
<td>Medial marginal vein of the foot</td>
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<tr>
<td>Veine médiane antébrachiale</td>
<td>Median antebrachial vein</td>
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<tr>
<td>Veine médiane céphalique</td>
<td>Median cephalic vein</td>
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<td>Veine médiane cubitale</td>
<td>Median cubital vein</td>
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<tr>
<td>Veine médiane de l’avant-bras</td>
<td>Median vein of the forearm</td>
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<tr>
<td>Veine médiane du coude</td>
<td>Median vein of the elbow</td>
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<tr>
<td>Veine médiane sacrale</td>
<td>Median sacral vein</td>
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<tr>
<td>Veine mésentérique inférieure</td>
<td>Inferior mesenteric vein</td>
</tr>
<tr>
<td>Veine mésentérique supérieure</td>
<td>Superior mesenteric vein</td>
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<tr>
<td>Veine métatarsienne dorsale</td>
<td>Metatarsal dorsal vein</td>
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<tr>
<td>Veine métatarsienne plantaire</td>
<td>Metatarsal plantar vein</td>
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<tr>
<td>Veine non saphène</td>
<td>Nonsaphenous vein</td>
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<tr>
<td>Veine ovarienne</td>
<td>Ovarian vein</td>
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<tr>
<td>Veine pédieuse</td>
<td>Pedal vein</td>
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<tr>
<td>Veine perforante</td>
<td>Perforator vein</td>
</tr>
<tr>
<td>Veine perforante de cheville médiale Voir Veines perforantes tibiales postérieures</td>
<td>Medial ankle perforator vein. See posterior tibial perforator veins</td>
</tr>
<tr>
<td>Veine perforante de cuisse latérale</td>
<td>Lateral thigh perforator vein</td>
</tr>
<tr>
<td>Veine perforante de cuisse postérieure postérolatérale</td>
<td>Posterior thigh perforator vein posterolateral</td>
</tr>
<tr>
<td>Veine perforante de cuisse postérieure postéromédiale</td>
<td>Posterior thigh perforator vein posteromedial</td>
</tr>
<tr>
<td>Veine perforante de jambe latérale</td>
<td>Lateral leg perforator vein</td>
</tr>
<tr>
<td>Veine perforante de jambe médiale tibiale postérieure (anciennement veine perforante de COCKETT)</td>
<td>Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)</td>
</tr>
<tr>
<td>Veine perforante de jambe postérieure gastrocnémienne latérale</td>
<td>Posterior leg lateral gastrocnemius perforator vein</td>
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<tr>
<td>Veine perforante de jambe postérieure gastrocnémienne médiale</td>
<td>Posterior leg medial gastrocnemius perforator vein</td>
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<tr>
<td>Veine perforante de la fosse poplitée</td>
<td>Popliteal fossa perforating vein or popliteal fossa perforator</td>
</tr>
<tr>
<td>Veine perforante dorsale du pied</td>
<td>Dorsal foot perforator (perforating) vein</td>
</tr>
<tr>
<td>Veine perforante du genou latérale</td>
<td>Lateral knee perforator vein</td>
</tr>
<tr>
<td>Veine perforante du genou latérale Voir réseau d’ALBANESE</td>
<td>Lateral venous system. See ALBANESE venous system</td>
</tr>
<tr>
<td>Veine perforante gastrocnémienne latérale</td>
<td>Lateral gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Veine perforante glutéale moyenne</td>
<td>Midgluteal perforator vein</td>
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<tr>
<td>Veine perforante glutéale supérieure</td>
<td>Superior gluteal perforator vein</td>
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<tr>
<td>Veine perforante indirecte</td>
<td>Direct perforating vein</td>
</tr>
<tr>
<td>Veine perforante infrapatellaire</td>
<td>Infrapatellar perforator vein</td>
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<tr>
<td>Veine perforante inguinale de cuisse médiale</td>
<td>Medial thigh inguinal perforator vein</td>
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<tr>
<td>Veine perforante médiale de cuisse du canal fémoral</td>
<td>Medial thigh perforator vein of the femoral canal</td>
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<tr>
<td>Veine perforante suprapatellaire</td>
<td>Suprapatellar perforator vein</td>
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<tr>
<td>Veine poplitée</td>
<td>Popliteal vein</td>
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<tr>
<td>Veine poplitée piégée</td>
<td>Popliteal vein entrapment</td>
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<tr>
<td>Veine profonde</td>
<td>Deep vein</td>
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<tr>
<td>Veine pubienne</td>
<td>Pubic vein</td>
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<tr>
<td>Veine pudendale externe</td>
<td>External pudendal vein</td>
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<tr>
<td>Veine pudendale externe superficielle</td>
<td>Superficial external pudendal vein</td>
</tr>
<tr>
<td>Veine pudendale interne</td>
<td>Internal pudendal vein</td>
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</tbody>
</table>
TERMS IN OTHER LANGUAGES

**FR**
Veine radiale
Veine rectale supérieure
Veine rénale
Veine réticulaire
Veine saphène accessoire antérieure
Veine saphène accessoire postérieure
Veine sciatique
Veine sous-clavière
Veine superficielle
Veine superficielle accessoire de la grande veine saphène
Veine superficielle accessoire de la petite veine saphène
Veine trabéculée
Veine(s) intersaphénienne(s)
Veinectasie voir Phlébectasie ou Varice, veine variqueuse, varicosité
Veines azygos
Veines brachiales
Veines collatérales pubiennes croisées
Veines communicantes
Veines digitales profondes (plantaires et dorsales)
Veines digitales superficielles (dorsales et plantaires) du membre inférieur
Veines digitales superficielles (dorsales et plantaires) du membre supérieur
Veines du bulbe urétral (homme)
Veines fibulaires ou péronières
Veines gastrocnémiennes
Veines gastrocnémiennes latérales
Veines gastrocnémiennes médiales
Veines glutéales inférieures
Veines glutéales supérieures
Veines gonadiques
Veines interosseuses antérieures
Veines labiales antérieures
Veines labiales postérieures (femme)
Veines lombaires
Veines métacarpennes dorsales
Veines métatarsiennes profondes (plantaires et dorsales)
Veines métatarsiennes superficielles (plantaires et dorsales)
Veines musculaires
Veines obturatrices
Veines perforantes de cheville latérales
Veines perforantes de cuisse antérieures
Veines perforantes de jambe antérieures
Veines perforantes de jambe médiales
Veines perforantes directes
Veines perforantes du pied latérales
Veines perforantes du pied médiales
Veines perforantes gastrocnémiennes médiales
Veines perforantes pudendales

**EN**
Radial vein
Superior rectal vein
Renal vein
Reticular vein
Anterior accessory saphenous vein
Posterior accessory saphenous vein
Sciatic vein
Subclavian vein
Superficial vein
Superficial accessory of the great saphenous vein
Superficial accessory of the small saphenous vein
Trabeculated vein
Intersaphenous vein(s)
Venectasia. See also phlebectasia or varice, varicose vein, varicosity
Azygos veins
Brachial veins
Cross-pubic collateral veins
Communicating veins
Deep digital veins (plantar and dorsal)
Superficial digital veins (dorsal and plantar) of the lower limb
Superficial digital veins (dorsal and plantar) of the upper limb
Urethral bulb veins (male)
Fibular or peroneal veins
Gastrocnemius veins
Lateral gastrocnemius veins
Medial gastrocnemius veins
 Inferior gluteal veins
Superior gluteal veins
Gonadal veins
Anterior interosseous veins
Anterior labial veins
Posterior labial veins (female)
Lumbar veins
Dorsal metacarpal veins
Deep metatarsal veins (plantar and dorsal)
Superficial metatarsal veins (dorsal and plantar)
Muscular veins
Obturator veins
Lateral ankle perforator veins
Anterior thigh perforator veins
Anterior leg perforator veins
Medial leg perforator veins
Direct perforating veins
Lateral foot perforator veins
Medial foot perforator veins
Medial gastrocnemius perforator veins
Pudendal perforator veins
### TERMS IN OTHER LANGUAGES - FRENCH

<table>
<thead>
<tr>
<th>FR</th>
<th>EN</th>
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<tbody>
<tr>
<td>Veines perforantes tibiales postérieures</td>
<td>Posterior tibial perforator veins</td>
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<tr>
<td>Veines périnéales superficielles</td>
<td>Superficial perineal veins</td>
</tr>
<tr>
<td>Veines plantaires médiales</td>
<td>Medial plantar veins</td>
</tr>
<tr>
<td>Veines profondes du clitoris ou Veine dorsale profonde du clitoris (femme)</td>
<td>Deep veins of the clitoris or deep dorsal veins of the clitoris (female)</td>
</tr>
<tr>
<td>Veines profondes du pénis (homme)</td>
<td>Deep veins of the penis (male)</td>
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<tr>
<td>Veines rectales inférieures</td>
<td>Inferior rectal veins</td>
</tr>
<tr>
<td>Veines rectales moyennes</td>
<td>Middle rectal veins</td>
</tr>
<tr>
<td>Veines sacrées latérales</td>
<td>Lateral sacral veins</td>
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<tr>
<td>Veines saphènes</td>
<td>Saphenous veins</td>
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<td>Veines scrotales antérieures</td>
<td>Anterior scrotal veins</td>
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<tr>
<td>Veines scrotales postérieures (homme)</td>
<td>Posterior scrotal veins (male)</td>
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<td>Veines surrénales</td>
<td>Suprarenal or adrenal veins</td>
</tr>
<tr>
<td>Veines sus-pubiennes</td>
<td>Suprapubic veins</td>
</tr>
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<td>Veines testiculaires</td>
<td>Testicular veins</td>
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<td>Veines tibiales antérieures</td>
<td>Anterior tibial veins</td>
</tr>
<tr>
<td>Veines tibiales postérieures</td>
<td>Posterior tibial veins</td>
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<tr>
<td>Veines ulnaires</td>
<td>Ulnar veins</td>
</tr>
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<td>Veines utérines (femme)</td>
<td>Uterine veins (female)</td>
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<tr>
<td>Veines vaginales (femme)</td>
<td>Vaginal veins (female)</td>
</tr>
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<td>Venoconstriction</td>
<td>Venoconstriction</td>
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<td>Veinographie à base de gadolinium</td>
<td>Gadolinium-based venography</td>
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<tr>
<td>Veinographie par résonance magnétique</td>
<td>Magnetic resonance venography</td>
</tr>
<tr>
<td>Veinographie par résonance magnétique avec injection d’un produit de contraste</td>
<td>Contrast-enhanced magnetic resonance venography</td>
</tr>
<tr>
<td>Veinographie par tomodensitométrie ou veinographie par tomodensitométrie hélicoïdale</td>
<td>Computed tomography venography or spiral computed tomography venography</td>
</tr>
<tr>
<td>Veinographie Voir aussi Phlébographie/Veinographie ascendante et Phlébographie/Veinographie descendante</td>
<td>Venography. See also ascending phlebography/venography and Descending phlebography/venography</td>
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<td>Veinoplastie</td>
<td>Venoplasty</td>
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<tr>
<td>Veinopuncture</td>
<td>Venepuncture or venipuncture</td>
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<tr>
<td>Veinotomie (phlébotomie)</td>
<td>Venotomy (phlebotomy, venesection)</td>
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<td>Veinotoniques Voir Médicaments veinoactifs</td>
<td>Venoactive drugs. See venoactive drugs</td>
</tr>
<tr>
<td>Vélocimétrie laser à effet doppler</td>
<td>Laser doppler flowmetry</td>
</tr>
<tr>
<td>Vitesse maximale du reflux</td>
<td>Peak reflux velocity</td>
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<td>Vol long-courrier Voir Thromboembolie veineuse liée à un voyage aérien</td>
<td>Long-haul flight. See air travel-related venous thromboembolism</td>
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<tr>
<td>Volume d’éjection</td>
<td>Ejection volume</td>
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<td>Volume veineux fonctionnel</td>
<td>Working venous volume</td>
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<td>Volumétrie du pied</td>
<td>Foot volumetry</td>
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<td>Warfarin</td>
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<td>Ximelagatran</td>
<td>Ximelagatran</td>
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<td>X-Vein</td>
<td>X-vein</td>
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<tr>
<td>Zone de la guêtre</td>
<td>Gaiter zone</td>
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</tbody>
</table>
TERMS IN OTHER LANGUAGES - GERMAN

GE

Aberdeen Varicose vein questionnaire (AVVQ)
Aberdeen varicose vein severity score (AVVSS)
Abflussfraktion
Abflusstopobstruktion
Aenocumarol
ACHENBACH-Syndrom
ADAMS-DEWESE-Klemme oder -Filter
Adhäsive Embolisation, siehe Embolisation mit Venenkleber oder Ablation mit Venenkleber
Agger
Ägyptisches Auge
Air-Block-Technik
Air-Plethysmographie (APG)
AKönys Eliminator-Thrombektomiekatheter
Aktives Ulcus cruris venosum, offenes Bein, siehe Venöser Ulcus cruris
Akute tiefe Venenthrombose, siehe Tiefe Beinvenenthrombose
ALBANESE-Venen system
Alexandrit langgepulster Laser

EN

Aberdeen Varicose Vein Questionnaire
Aberdeen Varicose Vein Severity Score
Outflow fraction
Outflow obstruction
Aenocumarol
ACHENBACH’s syndrome
ADAMS-DEWESE clip or filter
Adhesive embolization. See glue embolization or glue/adhesive ablation
Valvular agger
Egyptian eye
Air-block technique
Air Plethysmography
AKönys Eliminator – thrombectomy catheter
Active venous ulcer. See venous leg ulcer
Acute deep vein thrombosis. See deep vein thrombosis
ALBANESE venous system
Alexandrite long-pulse laser / Long-pulse Alexandrite laser
Allograft valve
Alpha benzopyrone
Ambulatory stab avulsion
MULLER’s ambulatory phlebectomy
Ambulatory phlebectomy. See ambulatory stab avulsion
Ambulatory venous hypertension
Ambulatory venous pressure
American Venous Forum (AVF)
Amplatz inferior vena cava filter
Donning and doffing devices (for stockings)
Anesthesia for interventional treatment of varicose veins
A component of the CEAP classification
Anatomic score. See venous segmental disease score
Nonsaphenous vein
Popliteal vein aneurysm
Aneurysm. See venous aneurysm
Congenital vascular malformation
AngioJet™
Angioma
Interface pressure
Effort thrombosis. See PAGET-von SCHRÖTTER syndrome
Antihistamins. See also bioflavonoids
Antiphospholipid syndrome
Antithrombin (antithrombin III)
Antithrombotic stockings
Antithrombotic agents
Apixaban
<table>
<thead>
<tr>
<th><strong>GE</strong></th>
<th><strong>EN</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Arbeitsdruck</td>
<td>Working compression pressure</td>
</tr>
<tr>
<td>Arbeitsvenenvolumen</td>
<td>Working venous volume</td>
</tr>
<tr>
<td>Arcus venosus dorsalis pedis</td>
<td>Dorsal venous arch of the foot</td>
</tr>
<tr>
<td>Argatroban</td>
<td>Argatroban</td>
</tr>
<tr>
<td>Arterielle Injektion bei der Sklerotherapie</td>
<td>Arterial injection during sclerotherapy</td>
</tr>
<tr>
<td>Arteriovenöse Fistel</td>
<td>Arteriovenous fistula</td>
</tr>
<tr>
<td>Arteriovenöse Missbildung</td>
<td>Arteriovenous malformation</td>
</tr>
<tr>
<td>Äscin, siehe Rosskastanienextrakt oder Wurzelextrakt</td>
<td>Aescin. See Horse chestnut seed or root extract</td>
</tr>
<tr>
<td>Aszendenztheorie zur Entstehung von Krvmpfdern</td>
<td>Ascending theory for varicose veins</td>
</tr>
<tr>
<td>Aszendierende Phlebographie/Venographie</td>
<td>Ascending phlebography/venography</td>
</tr>
<tr>
<td>Atrophie blanche (weiße Atrophie)</td>
<td>Atrophie blanche (white atrophy)</td>
</tr>
<tr>
<td>Auflösung eines Venenthrombus</td>
<td>Venous thrombus resolution</td>
</tr>
<tr>
<td>Auswurffraktion (EF = Ejection fraction), siehe Auswurfvolumen</td>
<td>Ejection fraction. See also ejection volume</td>
</tr>
<tr>
<td>Auswurfvolumen (EV = Ejection volume)</td>
<td>Ejection volume</td>
</tr>
<tr>
<td>Autologe Venenklappe</td>
<td>Autologous vein valve</td>
</tr>
<tr>
<td>Autotransplantation einer suffizienten Klappe in die Vena poplitea, siehe Klappentransplantation</td>
<td>Autotransplantation of a competent valve into the popliteal vein. See valve transplantation</td>
</tr>
<tr>
<td>Axialer Rückstrom</td>
<td>Axial reflux</td>
</tr>
<tr>
<td>Axialvene</td>
<td>Axial vein</td>
</tr>
<tr>
<td>Axillojugularer Bypass</td>
<td>Jugular axillary vein bypass</td>
</tr>
<tr>
<td>Azygos-Venen</td>
<td>Azygos veins</td>
</tr>
<tr>
<td>Azygos-Venensystem</td>
<td>Azygos system</td>
</tr>
<tr>
<td>Ballon-expandierender Stent</td>
<td>Balloon-expanding stent</td>
</tr>
<tr>
<td>Bauchwandvenen</td>
<td>Suprapubic veins</td>
</tr>
<tr>
<td>Beckenvarikosität, siehe Varizen des Beckens</td>
<td>Pelvic varicosity. See pelvic varices</td>
</tr>
<tr>
<td>Beckenvenenembolisation</td>
<td>Pelvic vein embolization</td>
</tr>
<tr>
<td>Beckenvenenstauung, siehe Parametropathia spastica-Syndrom</td>
<td>Congestion in the pelvic veins. See pelvic congestion syndrome</td>
</tr>
<tr>
<td>Behandlung mit oralen Gerinnungshemmern</td>
<td>Oral anticoagulant therapy</td>
</tr>
<tr>
<td>BEHÇET-Krankheit</td>
<td>BEHÇET’s disease</td>
</tr>
<tr>
<td>Beinsymptome, siehe Venöse Symptome</td>
<td>Leg symptoms. See venous symptoms</td>
</tr>
<tr>
<td>Berufsbedingte Beinschwellung</td>
<td>Occupational leg swelling</td>
</tr>
<tr>
<td>Besenreiser, siehe Teleangiektasie</td>
<td>Spider vein/Thread vein. See telangiectasia</td>
</tr>
<tr>
<td>Bioflavonoide</td>
<td>Bioflavonoids</td>
</tr>
<tr>
<td>Biomatrix-Verödungsschaum</td>
<td>Biomatrix sclerofoam</td>
</tr>
<tr>
<td>Bivalirudin</td>
<td>Bivalirudin</td>
</tr>
<tr>
<td>Blutfuss in den Venen</td>
<td>Venous flow</td>
</tr>
<tr>
<td>Blutfuss in der V. saphena</td>
<td>Saphenous recirculation</td>
</tr>
<tr>
<td>BUDD-CHIARI-Syndrom</td>
<td>BUDD-CHIARI syndrome</td>
</tr>
<tr>
<td>BUERGER-Krankheit</td>
<td>BUERGER’s disease</td>
</tr>
<tr>
<td>Capillaritis alba (Weiße Athrophie), siehe Atrophie blanche</td>
<td>White atrophy. See atrophie blanche</td>
</tr>
<tr>
<td>CAPRINI-Score</td>
<td>CAPRINI score</td>
</tr>
<tr>
<td>Cavafilter</td>
<td>Cavafilter</td>
</tr>
<tr>
<td>Charing Cross venous ulceration questionnaire (CXVUQ)</td>
<td>Charing Cross Venous Ulcer Questionnaire</td>
</tr>
<tr>
<td>Chemische Ablation</td>
<td>Chemical ablation</td>
</tr>
<tr>
<td>Chemisch-irrativ wirkendes Verödungsmittel in der Sklerotherapie</td>
<td>Chemical irritant (sclerosing agent) in sclerotherapy</td>
</tr>
<tr>
<td><strong>GE</strong></td>
<td><strong>EN</strong></td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Chromiertes Glycerin</td>
<td>Chromated glycerin</td>
</tr>
<tr>
<td>Chronisch venöse Erkrankung</td>
<td>Chronic venous disease</td>
</tr>
<tr>
<td>Chronisch venöse Insuffizien</td>
<td>Chronic venous insufficiency</td>
</tr>
<tr>
<td>Chronisch venöse Störungen</td>
<td>Chronic venous disorders</td>
</tr>
<tr>
<td>Chronische zerebrospinale Veneninsuffizien</td>
<td>Chronic cerebrospinal venous insufficiency</td>
</tr>
<tr>
<td>C-Komponente der CEAP-Klassifikation (siehe auch CEAP-Klassifikation)</td>
<td>C component of the CEAP classification</td>
</tr>
<tr>
<td>Clarivein®</td>
<td>ClariVein®</td>
</tr>
<tr>
<td>Claudicatio venosa (Venensperre)</td>
<td>Venous claudication</td>
</tr>
<tr>
<td>Cleaner rotierende Thrombektomie-Systeme</td>
<td>Cleaner rotational thrombectomy systems</td>
</tr>
<tr>
<td>ClosureFast™-Katheter</td>
<td>ClosureFAST™ catheter</td>
</tr>
<tr>
<td>COCKETT-Syndrom, siehe MAY-THURNER-Syndrom</td>
<td>COCKETT syndrome. See also MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Compliance mit Kompressionstherapie</td>
<td>Compression compliance</td>
</tr>
<tr>
<td>Computertomographie bei Venenerkrankungen</td>
<td>Computed tomography in venous disease</td>
</tr>
<tr>
<td>“Continuous Wave”-Doppler (CWD)</td>
<td>Continuous-wave Doppler</td>
</tr>
<tr>
<td>Corona phlebectatica, siehe Corona phlebectatica paraplantaris</td>
<td>Corona phlebectatica. See corona phlebectatica paraplantaris</td>
</tr>
<tr>
<td>C50-Patient</td>
<td>C50 patient</td>
</tr>
<tr>
<td>“Cross-over”-Bypass</td>
<td>Crossover bypass</td>
</tr>
<tr>
<td>Crossektomie</td>
<td>Cesectomy</td>
</tr>
<tr>
<td>CT-Venographie</td>
<td>Computed tomography venography or spiral computed tomography venography</td>
</tr>
<tr>
<td>Cumarin</td>
<td>Coumarin</td>
</tr>
<tr>
<td>Dabigatran</td>
<td>Dabigatran (dabigatran etexilate)</td>
</tr>
<tr>
<td>Dalteparin</td>
<td>Dalteparin (dalteparin sodium)</td>
</tr>
<tr>
<td>Dampfablation</td>
<td>Steam ablation</td>
</tr>
<tr>
<td>Danaparoid</td>
<td>Danaparoid (danaparoid sodium)</td>
</tr>
<tr>
<td>D-Dimer</td>
<td>D-dimer</td>
</tr>
<tr>
<td>Dehnungsmessstreifen-Plethysmographie</td>
<td>Strain-gauge plethysmography</td>
</tr>
<tr>
<td>Dermatitis (Stauungsdermatitis, Stauungsexem)</td>
<td>Dermatitis (venous dermatitis, venous eczema)</td>
</tr>
<tr>
<td>Deszendenztheorie zur Entstehung von Krampfaden</td>
<td>Descending theory in the pathogenesis of varicose veins</td>
</tr>
<tr>
<td>Deszendierende Phlebographie oder Venographie</td>
<td>Descending phlebography, venography</td>
</tr>
<tr>
<td>Digitale Subtraktionsphlebographie</td>
<td>Digital subtraction phlebography</td>
</tr>
<tr>
<td>Diodenlaser</td>
<td>Diode laser</td>
</tr>
<tr>
<td>Diosmin</td>
<td>Diosmin</td>
</tr>
<tr>
<td>Direkte Perforansvene</td>
<td>Direct perforating veins</td>
</tr>
<tr>
<td>Doppelring-Radialfaser</td>
<td>Double ring radial fiber</td>
</tr>
<tr>
<td>Doppelspritzensystem</td>
<td>Double syringe system</td>
</tr>
<tr>
<td>Doppler-Ultraschall, siehe Duplex-Ultraschall</td>
<td>Doppler ultrasound. See Duplex ultrasonography</td>
</tr>
<tr>
<td>Dorsale Fingervenen</td>
<td>Dorsal digital vein of the hand</td>
</tr>
<tr>
<td>Dorsale Metatarsalvene</td>
<td>Metatarsal dorsal vein</td>
</tr>
<tr>
<td>Dorsale Mittelhandvenen</td>
<td>Dorsal metacarpal veins</td>
</tr>
<tr>
<td>Duplex-Sonographie, siehe Duplex-Ultraschall</td>
<td>Duplex sonography. See Duplex ultrasonography</td>
</tr>
<tr>
<td>Duplex-Ultraschall</td>
<td>Duplex ultrasonography</td>
</tr>
<tr>
<td>Durch orale Kontraceptiva bedingte Thrombose</td>
<td>Oral contraceptive-related thrombosis</td>
</tr>
<tr>
<td>Dynamic Stiffness Index</td>
<td>Dynamic stiffness index</td>
</tr>
<tr>
<td>GE</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Dynamischer Venendruck</td>
<td>Dynamic venous pressure</td>
</tr>
<tr>
<td>Echosklerotherapie, siehe Ultraschallkontrollierte Sklerotherapie</td>
<td>Echosclerotherapy. See ultrasound-guided sclerotherapy</td>
</tr>
<tr>
<td>Economy-Class-Syndrom, siehe Flugreisebedingte venöse Thromboembolie</td>
<td>Economy class syndrome. See air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Edinburgh-Venenstudie</td>
<td>Edinburgh vein study</td>
</tr>
<tr>
<td>Edoxaban</td>
<td>Edoxaban</td>
</tr>
<tr>
<td>Einfache CEAP-Klassifikation</td>
<td>Basic CEAP classification</td>
</tr>
<tr>
<td>Einklemmung der Vena poplitea</td>
<td>Popliteal vein entrapment</td>
</tr>
<tr>
<td>EISEMANN-MALETTE-Klappe, siehe Autologe Venenklappe</td>
<td>EISEMANN and MALETTE valve-like structures. See autologous vein valve</td>
</tr>
<tr>
<td>E-Komponente der CEAP-Klassifikation</td>
<td>E component of the CEAP classification</td>
</tr>
<tr>
<td>EKOS ultraschallunterstütztes Thrombolysesystem</td>
<td>EKOS (tm) ultrasound-assisted thrombolysis system</td>
</tr>
<tr>
<td>Ekzem</td>
<td>Eczema</td>
</tr>
<tr>
<td>Elastische Kompressionsstrümpfe</td>
<td>Elastic compression stockings</td>
</tr>
<tr>
<td>Elastischer Kompressionsverband</td>
<td>Elastic compression bandages</td>
</tr>
<tr>
<td>Embolektomie</td>
<td>Embolectomy</td>
</tr>
<tr>
<td>Embolie</td>
<td>Emboli / Embolism</td>
</tr>
<tr>
<td>Embolisation</td>
<td>Embolization</td>
</tr>
<tr>
<td>Embolisation der Gonadenvenen</td>
<td>Gonadal vein embolization</td>
</tr>
<tr>
<td>Embolisation der Vena ovarica</td>
<td>Ovarian vein embolization</td>
</tr>
<tr>
<td>Embolisation mit Cyanoacrylat, siehe Embolisation mit Venenkleber</td>
<td>Cyanoacrylate embolization. See glue embolization</td>
</tr>
<tr>
<td>Embolisation mit Venenkleber oder Ablation mit Venenkleber</td>
<td>Glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Embryonale Venenentwicklung</td>
<td>Venous embryology</td>
</tr>
<tr>
<td>Endophlebektomie oder Endovenektomie</td>
<td>Endophlebectomy or endovenectomy</td>
</tr>
<tr>
<td>Endoskopische Perforansvenenosanierung, siehe Subfasziale endoskopische Perforans-Sanierung (SEPS)</td>
<td>Endoscopic perforator surgery. See subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Endothermale Behandlung</td>
<td>Endothermal treatment</td>
</tr>
<tr>
<td>Endovenös</td>
<td>Endovenous</td>
</tr>
<tr>
<td>Endovenöse Behandlung</td>
<td>Endovenous treatment</td>
</tr>
<tr>
<td>Endovenöse Dampfablation</td>
<td>Endovenous steam ablation</td>
</tr>
<tr>
<td>Endovenöse Hitzeablation</td>
<td>Endovenous thermal ablation</td>
</tr>
<tr>
<td>Endovenöse Laserablation der Venae saphenae</td>
<td>Endovenous laser ablation of saphenous veins</td>
</tr>
<tr>
<td>Endovenöse Laserbehandlung, siehe Endovenöse Laserablation der Venae saphenae</td>
<td>Endovenous laser treatment. See endovenous laser ablation of saphenous veins</td>
</tr>
<tr>
<td>Endovenöse Radiofrequenzablation</td>
<td>Endovenous radiofrequency ablation</td>
</tr>
<tr>
<td>Endovenöse Technik</td>
<td>Endovenous technique</td>
</tr>
<tr>
<td>Endovenöser, hitzeinduzierter Thrombus, siehe KABNICK-Klassifikation</td>
<td>Endovenous heat-induced thrombus. See KABNICK classification</td>
</tr>
<tr>
<td>Endovenöses Verfahren, siehe Endovenöse Technik</td>
<td>Endovenous procedure. See Endovenous technique</td>
</tr>
<tr>
<td>Engefühl</td>
<td>Tightness</td>
</tr>
<tr>
<td>Enoxaparin</td>
<td>Enoxaparin</td>
</tr>
<tr>
<td>Entferbarer Cava-Filter</td>
<td>Retrievable cava filter</td>
</tr>
<tr>
<td>Erhöhter Abflusswiderstand</td>
<td>Increased outflow resistance</td>
</tr>
<tr>
<td>Ermüdung</td>
<td>Fatigue</td>
</tr>
<tr>
<td>Erneutes Auftreten von Varizen nach Behandlung (Recurrent varices after surgery, REVAS)</td>
<td>Recurrent varices after surgery (REVAS)</td>
</tr>
<tr>
<td>Erneutes Auftreten von Varizen oder Krampfadern</td>
<td>Recurrent varice or recurrent varicose vein</td>
</tr>
<tr>
<td>Erweiterte CEAP-Klassifikation</td>
<td>Advanced clinical, etiological, anatomical, and pathophysiological (CEAP) classification</td>
</tr>
</tbody>
</table>
TERMS IN OTHER LANGUAGES - GERMAN

**GE**

- Escape point
- Ethanolamin-Oleate
- Europäische Gesellschaft für Gefäßchirurgie
- Europäisches Venenforum
- Externe Bandage der der Vena poplitea
- Externe Venenbandage/Cuff
- Externe/extraluminale Valvuloplastie
- Extraluminale Valvuloplastie (Ummantelung der Vene)
- Exzentrische Kompression
- Fakto XIII
- Faktor V Leiden-Mutation, heterozygot, homozygot
- Faser, siehe Laserfasern
- Fasziektomie bei Venenerkrankungen
- Fasziotomie bei Venenerkrankungen
- Femero-femorale Transposition der Vena saphena
- Femero-kavaler/Ilio-kavaler Bypass
- Femero-popliteale tiefe Venenthrombose, siehe Tiefe Beinvenenthrombose
- Femero-poplitealer oder femoro-cruraler Bypass
- Femoro-femoraler Cross-over-Bypass
- Femurkompression
- Fibrin
- Fibrinolyse
- Fibrinolytische Behandlung
- Filterentfernung
- Flavonoid
- Flugreisebedingte venöse Thrombembolie
- Flüssigkeitsverödung
- Fondaparinux
- Fortsetzung der Vena cava inferior in die V. azygos
- Frei flottierende Thrombi/flottierender Thrombuskopf
- Fußmuskelpumpe
- Fußvolumetrie
- G2-Filter, siehe GREENFIELD™-Filter und GUNTHER™-Tulip-Filter
- Gadolinium-basierte Venographie
- Gammaschenbereich
- Gammabenzopyron, siehe Flavonoid
- Gefäßmissbildung
- Gefühl von Schwellungen
- Gemischter Ulcus cruris (venös und arteriell bedingt)
- Geneigter IVC-Filter
- Gerät zur elektrischen Wadenmuskulilstimulation
- Gerät zur neuromuskulären elektrischen Stimulation
- Gewebeinhibitoren von Metallproteinasen
- Gewebeplasminogen-Aktivator, TPA (engl. Tissue plasminogen activator)
- Gewichtsverlagerungen
- GIACOMINI-Vene (Vena femoropoplitea)

**EN**

- Escape point
- Ethanolamine oleate
- European Society for Vascular Surgery
- European Venous Forum
- Popliteal vein external banding
- External venous banding/cuff
- External/extraluminal valvuloplasty
- Prosthetic sleeve valvuloplasty
- Eccentric compression
- Factor VIII
- Factor V Leiden mutation (heterozygous, homozygous)
- Fiber. See laser fibers
- Fasciectomy in venous disease
- Fasciotomy in venous disease
- Femorofemoral saphenous vein transposition
- Femoriliacaval bypass
- Femoropopliteal deep vein thrombosis. See also deep vein thrombosis
- Femoropopliteal and femorocrural saphenous vein bypass
- Cross-pubic prosthetic bypass
- Thigh compression
- Fibrin
- Fibrinolysis
- Fibrinolytic therapy
- Filter retrieval
- Flavonoids
- Air travel-related venous thromboembolism
- Liquid sclerotherapy
- Fondaparinux
- Azygos continuation of the inferior vena cava
- Free-floating thrombus
- Foot muscle pump
- Foot volumetry
- G2 filter. See also GREENFIELD™ filter and GUNTHER™ tulip filter
- Gadolinium-based venography
- Gaiter zone
- Gamma benzopyrone. See flavonoids
- Capillary malformation
- Feeling of swelling
- Mixed arterial and venous ulcer
- Tilted inferior vena cava filter
- Electrical calf muscle stimulation device
- Neuromuscular electric stimulator in chronic venous insufficiency
- Tissue inhibitors of metalloproteinases (TIMPs)
- Tissue plasminogen activator
- Weight transfer maneuvers
- GIACOMINI vein
<table>
<thead>
<tr>
<th>GE</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>GIANTURCO-Stent</td>
<td>GIANTRUCO stent</td>
</tr>
<tr>
<td>GINSBERG-Skala</td>
<td>GINSBERG scale</td>
</tr>
<tr>
<td>Glatte Ligatur (&quot;Flush Ligation&quot;)</td>
<td>Flush ligation</td>
</tr>
<tr>
<td>Gleichzeitige tiefe und oberflächliche Thrombose (bei</td>
<td>Concomitant superficial and deep venous thrombosis</td>
</tr>
<tr>
<td>Thrombose im oberflächlichen Venensystem)</td>
<td></td>
</tr>
<tr>
<td>Glycerin</td>
<td>Glycerin</td>
</tr>
<tr>
<td>Gonadenvenen (Venae testiculares/ovaricae)</td>
<td>Gonadal veins</td>
</tr>
<tr>
<td>Graduelle elastische Kompression</td>
<td>Graduated elastic compression</td>
</tr>
<tr>
<td>GREENFIELD™-Filter</td>
<td>GREENFIELD™ filter. See also G2 filter and GUNTHER™ tulip filter</td>
</tr>
<tr>
<td>GREENFIELD™-Titan-Filter</td>
<td>Titanium GREENFIELD™ filter</td>
</tr>
<tr>
<td>GULLMO-Syndrom</td>
<td>GULLMO’s syndrome. See strain obstruction syndrome</td>
</tr>
<tr>
<td>GUNTHER™-Tulip-Filter</td>
<td>GUNTHER™ tulip filter. See also GREENFIELD™ filter and G2 filter</td>
</tr>
<tr>
<td>HACH-Klassifikation</td>
<td>HACH classification</td>
</tr>
<tr>
<td>Hämangioendotheliom</td>
<td>Hemangioendothelioma</td>
</tr>
<tr>
<td>Hämangiom</td>
<td>Hemangioma</td>
</tr>
<tr>
<td>Hamburg-Klassifikation</td>
<td>Hamburg classification</td>
</tr>
<tr>
<td>Hämoglobin-spezifische Laserwellenlängen</td>
<td>Hemoglobin-specific laser wavelengths</td>
</tr>
<tr>
<td>Handgeführter Doppler, siehe auch “Continuous Wave”-Doppler</td>
<td>Hand-held Doppler. See also continuous-wave Doppler</td>
</tr>
<tr>
<td>Hauthyperpigmentierung</td>
<td>Skin hyperpigmentation</td>
</tr>
<tr>
<td>Hautnekrose nach Verödung</td>
<td>Cutaneous necrosis after sclerotherapy</td>
</tr>
<tr>
<td>Heftpflaster, Wundschnellverband</td>
<td>Adhesive bandage</td>
</tr>
<tr>
<td>Heparin</td>
<td>Heparin</td>
</tr>
<tr>
<td>Herman-Klassifikation, siehe Kistner-Klassifikation</td>
<td>Herman’s classification. See Kistner’s classification</td>
</tr>
<tr>
<td>Hirudin</td>
<td>Hirudin</td>
</tr>
<tr>
<td>HIT, Heparin-induzierte Thrombozyopenie</td>
<td>Heparin-induced thrombocytopenia</td>
</tr>
<tr>
<td>Hitzegefühl oder Brennen</td>
<td>Heat or burning sensation</td>
</tr>
<tr>
<td>Hitzeinduzierte Thrombose, siehe Endovenösor,</td>
<td>Heat-induced thrombosis. See endovenous heat-induced thrombus</td>
</tr>
<tr>
<td>hitzeinduzierter Thrombus</td>
<td>High ligation</td>
</tr>
<tr>
<td>Hohe Ligatur</td>
<td>High ligation and division</td>
</tr>
<tr>
<td>Hohe Ligatur und Aufteilung</td>
<td>High ligation and stripping</td>
</tr>
<tr>
<td>Hohe Ligatur und Stripping</td>
<td>Caval vein. See vena cava</td>
</tr>
<tr>
<td>Hohlvene, siehe Vena cava</td>
<td>HOMANS sign</td>
</tr>
<tr>
<td>HOMBURG varicose vein severity score</td>
<td>Homburg varicose vein severity score</td>
</tr>
<tr>
<td>Hydrostatischer Druck</td>
<td>Hydrostatic pressure</td>
</tr>
<tr>
<td>Hyperbare Sauerstoffbehandlung</td>
<td>Hyperbaric oxygen treatment (or therapy) of venous ulcers</td>
</tr>
<tr>
<td>Impedanz-Plethysmographie</td>
<td>Impedance plethysmography</td>
</tr>
<tr>
<td>Indirekte Perforansvene</td>
<td>Indirect perforating vein</td>
</tr>
<tr>
<td>Infrapatellare Perforansvene</td>
<td>Infrapatellar perforator vein</td>
</tr>
<tr>
<td>Inkompetente Waden-Perforansvene</td>
<td>Incompetent calf perforator</td>
</tr>
<tr>
<td>Insuffiziente Vene</td>
<td>Incompetent vein</td>
</tr>
<tr>
<td>Insuffizienz der V. saphena</td>
<td>Saphenous insufficiency</td>
</tr>
<tr>
<td>Intensiv gepulstes Licht</td>
<td>Intense pulsed light</td>
</tr>
<tr>
<td>Intermittierende pneumatische Kompression</td>
<td>Intermittent pneumatic compression</td>
</tr>
<tr>
<td>Internationaler Verband für Phlebologie</td>
<td>International Union of Phlebology</td>
</tr>
<tr>
<td>Interne Valvuloplastie</td>
<td>Internal valvuloplasty</td>
</tr>
<tr>
<td>Interventionelle Radiologie (in der Phlebologie)</td>
<td>Interventional radiology (in phlebology)</td>
</tr>
</tbody>
</table>
Terms in Other Languages - German

**GE**

- Intraarterielle Injektion des sklerotisierenden Mittels
- Intramuskulärer Druck
- Intraossäre venöse Malformationen
- Intraossäres Hämagiom
- Intravaskulärer Ultraschall (IVUS) in der Phlebologie
- Investigating venous disease evaluation and standardization of testing (INVEST)
- Ischiasvene
- Jucken
- KABNICK-Klassifikation, siehe Endovenöser, hitzeinduzierter Thrombus
- KASABACH-MERRIT Syndrom
- Kathetergesteuerte Thrombolyse
- Kavernöses Angiom
- Kipptisch
- KISTNER-Klassifikation
- Klappe, siehe Venenklappe
- Klappenfunktion
- Klappenhörnchen (Cornua)
- Klappensinus
- Kompression der linken Nierenvene
- Kompression der Vena iliaca

**EN**

- Intra-arterial injection of sclerosant
- Intramuscular pressure
- Intraossaeous venous malformation
- Intramuscular hematoma
- Intravascular ultrasound in phlebology
- Investigating venous disease evaluation and standardization of testing
- Sciatic vein
- Itching
- KABNICK classification. See also endovenous heat-induced thrombus
- KASABACH-MERRIT syndrome
- Catheter-directed thrombolysis
- Cavernous angiom
- Tilt table
- KISTNER’s classification
- Valve. See venous valve
- Valvular function
- Valve cornua
- Valvular incompetence
- Valve commissure
- Valve opening
- Valve surgery
- Valve reconstruction
- TRIPATHI trap door valve repair
- Valve repair. See valve reconstruction
- Valve closure
- Valve closure time
- Valve cuspid or cusp
- Valve sinus
- Valve transplantation
- Valve agger. See valvular agger
- International Society for the Study of Vascular Anomalies (classification of vascular anomaly). See also Hamburg classification
- CEAP clinical classes. See clinical classes of the CEAP
- Clinical classes of the CEAP
- Clinical scoring system, clinical severity score
- Clinical, Etiological, Anatomical, Physiopathological (CEAP) classification
- Antwerp clinical score for pulmonary embolism
- KLIPPEL-TRENAUNAY syndrome
- Popliteal fossa perforating vein or popliteal fossa perforator
- Ankle brachial index or ankle-brachial pressure index
- Ankle flare. See corona phlebectatica paraplantaris
- Collateral vein
- Compartment syndrome in venous disease
- Left renal vein compression. See nutcracker syndrome
- Iliac vein compression
Kompressionsdruck
Kompressionsgerät
Kompressionstrümpfe
Kompressionstherapie
Kompressionstherapie bei Ulcus cruris venosum
Kompressionsverband
Konservative Behandlung von Venenerkrankungen
Kontrastverstärkte MR-Venographie
Körpermasseindex, Body-Mass-Index
Krämpfe
Kraniale Verlängerung der Vena saphena parva
Kribeln
Kryo-konservierte Venenklappen
Kryo-Striping
KTP-Laser
Künstliche Venenklappe
Kurzzugbinde, siehe Nichtelastischer Verband
Langstreckenflug, siehe Flugreisebedingte venöse Thrombembolie
Laserablation, siehe Endovenöse Laserablation der Venae saphenae
Laser-Doppler-Flussmessung
Laserfasern
Lasergenerator
Laterale Gastroknemius-Perforansvene (posteriorer Unterschenkel)
Laterale Gastroknemius-Perforansvenen
Laterales Venensystem, siehe ALBANESE-Venensystem
Lebensqualität bei Venenerkrankungen
Leiomyosarkom
Leitlinien der Europäischen Gesellschaft für Gefäßchirurgie für chronische Venenerkrankungen
LEJARS-Sohle
Lepirudin
Leukozytenaktivierung
Ligatur der COCKETT-Perforansvenen
Linienzeichen (Alignment sign)
Lipödem
Lipodermatosklerose (LDS)
Loge der V. saphena ("saphenous compartment")
Lungenembolie / pulmonale Thromboembolie
Lymphatische Missbildung
LysUS-Infusionskathetersystem (EKOS)
Maden-Therapie nach Maggot (Maggot Debridement Therapy)
MAFFUCCI-Syndrom
Magnetresonanzvenographie (MRV)
Malleolare Rötung, siehe Knöchelrötung, siehe Corona phlebectatica paraplantaris
MARJOLIN-Ulkus
MARTORELL-Ulkus
Mastzellen bei chronischen Venenerkrankungen

Compression pressure
Compression device
Compression hosiery
Compression therapy
Compression therapy for venous ulcers
Compression bandages
Conservative treatment in venous disease
Contrast-enhanced magnetic resonance venography
Body mass index
Cramp
Cranial extension of the small saphenous vein
Tingling
Cryopreserved venous valves
Cryostripping
KTP laser
Artificial venous valve
Short-stretch bandage. See inelastic bandage
Long-haul flight. See air travel-related venous thromboembolism
Laser ablation. See endovenous laser ablation of saphenous veins
Laser doppler flowmetry
Laser fibers
Laser generator
Posterior leg lateral gastrocnemius perforator vein
Lateral gastrocnemius perforator vein
Lateral venous system. See ALBANESE venous system
Quality of life in venous disease
Leiomyosarcoma
European Society for Vascular Surgery guidelines for chronic venous disease
LEJARS’ sole
Lepirudin
Leukocyte activation
COCKETT’s perforator vein ligation
Alignment sign
Lipedema
Lipodermatosclerosis
Saphenous compartment. See Egyptian eye
Pulmonary embolism or pulmonary thromboembolism
Lymphatic malformation
Lysus infusion catheter system (EKOS)
Maggot treatment (maggot debridement therapy)
MAFFUCCI syndrome
Magnetic resonance venography
Malleolar flare. See corona phlebectatica paraplantaris
MARJOLIN’s ulcer
MARTORELL’s ulcer
Mast cells in chronic venous disease
<table>
<thead>
<tr>
<th>GE</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matrix-Metalloproteasen (MMP)</td>
<td>Matrix metalloproteinases</td>
</tr>
<tr>
<td>Matting</td>
<td>Matting</td>
</tr>
<tr>
<td>Maximale Refluxgeschwindigkeit oder maximale Rückstromgeschwindigkeit</td>
<td>Peak reflux velocity</td>
</tr>
<tr>
<td>MAY-HUSNI-Bypass, siehe Sapheno-poplitealer Bypass</td>
<td>MAY-HUSNI bypass. See Saphenopopliteal bypass</td>
</tr>
<tr>
<td>MAY-THURNER-Syndrom</td>
<td>MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Mechanisch-chemische Ablation (MOCA)</td>
<td>Mechanicochemical ablation</td>
</tr>
<tr>
<td>Mechanische Thrombektomie</td>
<td>Mechanical thrombectomy</td>
</tr>
<tr>
<td>Mechanische Thrombektomie in Kombination mit Stenting</td>
<td>Hybrid operative thrombectomy</td>
</tr>
<tr>
<td>Mediale Gastroknemius-Perforansvene</td>
<td>Medial gastrocnemius perforator veins</td>
</tr>
<tr>
<td>Mediale Gastroknemius-Perforansvene (posteriorer Unterschenkel)</td>
<td>Posterior leg medial gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Medizinische Kompressionsstrümpfe</td>
<td>Medical compression stockings</td>
</tr>
<tr>
<td>Mehrschichtige Kompressionsbandagen</td>
<td>Multilayered compression bandages</td>
</tr>
<tr>
<td>“Melktest” zur Überprüfung der Klappenkompetenz</td>
<td>Milking test</td>
</tr>
<tr>
<td>Mesenteriale Venenthrombose</td>
<td>Mesenteric vein thrombosis</td>
</tr>
<tr>
<td>Messung der venösen Hämodynamik</td>
<td>Venous hemodynamic measurement</td>
</tr>
<tr>
<td>Mickey-Maus-Zeichen</td>
<td>Mickey Mouse sign</td>
</tr>
<tr>
<td>Mikronisierte gereinigte Flavanoid-Fraktion</td>
<td>Micronized purified flavonoid fraction (MPFF)</td>
</tr>
<tr>
<td>Mikrophlebektomie</td>
<td>Microphlebectomy. See ambulatory stab avulsion or MULLER's phlebectomy</td>
</tr>
<tr>
<td>Mikroschaumverödung, siehe Schaumverödung</td>
<td>Microfoam sclerotherapy. See foam sclerotherapy</td>
</tr>
<tr>
<td>Miniphlebektomie (&quot;Häkeltechnik&quot;)</td>
<td>Stab avulsion or stab phlebectomy</td>
</tr>
<tr>
<td>Miniphlebektomie (Häkelmethode)</td>
<td>Hook phlebectomy</td>
</tr>
<tr>
<td>Mit Zinkpaste imprägnierte Binde</td>
<td>Zinc paste impregnated stockinette</td>
</tr>
<tr>
<td>MOBIN-UDDIN-Schirm</td>
<td>MOBIN-UDDIN umbrella</td>
</tr>
<tr>
<td>MONDOR-Krankheit</td>
<td>MONDOR’s disease</td>
</tr>
<tr>
<td>Muskelkrämpfe, siehe Krämpfe</td>
<td>Muscle cramp. See cramp</td>
</tr>
<tr>
<td>Muskelvenen</td>
<td>Muscular veins</td>
</tr>
<tr>
<td>Nächtliche Krämpfe, siehe Krämpfe</td>
<td>Night cramp. See Cramp</td>
</tr>
<tr>
<td>National Institute for health and Care Excellence (NICE), siehe NICE-Leitlinien für die Varizenbehandlung</td>
<td>National Institute for health and Care Excellence (NICE). See NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Natriummorrhuat</td>
<td>Sodium morrhuate</td>
</tr>
<tr>
<td>Natriumtetradecylsulfat</td>
<td>ND-YAG laser (neodymium-doped yttrium aluminum garnet)</td>
</tr>
<tr>
<td>Nd-YAG Laser (Neodym-dotierter Yttrium-Aluminium-Granat-Laser)</td>
<td>Neovalve (autogenous)</td>
</tr>
<tr>
<td>Neoklappe (autogen)</td>
<td>Neovascularization</td>
</tr>
<tr>
<td>Neovaskularisation</td>
<td>Nerve damage after stripping</td>
</tr>
<tr>
<td>Nervenschädigung nach Stripping</td>
<td>Neosaphenofemoral junction</td>
</tr>
<tr>
<td>Neue saphenofemorale Einmündung</td>
<td>NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>NICE-Leitlinien für die Varizenbehandlung</td>
<td>Inelastic bandage</td>
</tr>
<tr>
<td>Nichtelastischer Verband</td>
<td>Nonthermal vein ablation</td>
</tr>
<tr>
<td>Nicht-thermische Venenablation</td>
<td>Nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Nicht-thrombotische Läsion der Vena iliaca</td>
<td>Nonthrombotic vein primary obstruction. See nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Nicht-thrombotischer primärer Venenverschluss, siehe</td>
<td>Low molecular-weight heparin</td>
</tr>
<tr>
<td>Nicht-thrombotische Läsion der Vena iliaca</td>
<td>Nitinol stent</td>
</tr>
<tr>
<td>Niedermolekulares Heparin</td>
<td>North American subfascial endoscopic perforator surgery (SEPS) study</td>
</tr>
<tr>
<td>Nitinol-Stent</td>
<td>Nutcracker syndrome</td>
</tr>
<tr>
<td>North American SEPS Studie</td>
<td></td>
</tr>
</tbody>
</table>
GE

Oasis®-Katheter
Überarmdruck/Knöcheldruck-Quotient
Oberflächliche akzessorische Vene der Vena saphena magna
Oberflächliche akzessorische Vene der Vena saphena parva
Oberflächliche Fingervenen (dorsal und plantar)
Oberflächliche Mittelfüßvenen (dorsal und plantar)
Oberflächliche Thrombophlebitis, siehe Oberflächliche venöse Thrombophlebitis
Oberflächliche Veneninsuffizienz
Oberflächliche Venenthrombose, siehe Oberflächliche venöse Thrombophlebitis
Oberflächliche venöse Thrombophlebitis (SVT)
Oberflächliche Zehenvenen (dorsal und plantar)
Oberflächlicher Venenbogen der Hand
Oberflächlicher venöser Rückfluss oder venöse Inkompetenz
Obstruktion der Vena iliaca
Obstruktion der Vena iliaca/Vena cava
Obstruktionssyndrom
Ödem, siehe venöses Ödem (Phlebödem)
OESCH-Strippe, siehe Pin-Stripper
Offene chirurgische Rekonstruktion bei nicht maligner Okklusion der Vena cava
Offene Operation einer Perforatorvene
Offene Venenoperation
Offenes Bein
Oklklusion der Vena iliaca
Oklklusion der Vena iliaca/Vena cava
Oklklusionsplethysmographie
Operation an den tiefen Venen
Operation nach LINTON
Operative Reparatur einer tiefen Venenklappeninsuffizienz
Operative Venenthrombektomie
OptEase®-Filter
Orale Vitamin-K-Antagonisten
Osmotisches Verdünnungsmittel in der Sklerotherapie
PAGET-von-SCHRÖTTER-Syndrom
PALMA-Operation, siehe Femero-femorale Transposition der Vena saphena
Parametropathia spastica-Syndrom
Parana-Manöver
Parietaltheorie zur Entstehung von Krampfadern
PARKES-WEBER-Syndrom
PAVČNIK-Klappe
Pentoxifillin
Perforansvene im mittleren Gesäß
Perforansvenenablation
Perforansveneninsuffizienz

EN

- Oasis® catheter
- Arm/foot pressure differential
- Superficial accessory of the great saphenous vein
- Superficial accessory of the small saphenous vein
- Superficial digital veins (dorsal and plantar) of the upper limb
- Superficial metatarsal veins (dorsal and plantar)
- Superficial thrombophlebitis. See superficial venous thrombophlebitis
- Superficial venous insufficiency
- Superficial vein thrombosis
- Superficial venous thrombophlebitis. See superficial vein thrombosis
- Superficial digital veins (dorsal and plantar) of the lower limb
- Superficial palmar venous arch
- Superficial venous reflux or incompetence
- Iliac vein obstruction
- Iliac vein occlusion
- Strain obstruction syndrome
- Edema. See venous edema
- OESCH stripper. See PIN stripper
- Open surgical reconstructions for nonmalignant occlusion of the vena cava
- Perforator vein open surgery or perforator open surgery
- Venous open surgery
- Leg ulcer. See venous leg ulcer
- Iliac vein occlusion
- Iliac vein occlusion
- Occlusion plethysmography
- Deep venous surgery
- LINTON‘s operation. See also Subfascial endoscopic perforator surgery
- Surgical repair of deep venous valve incompetence
- Surgical venous thrombectomy
- OptEase® filter
- Oral vitamin K antagonists
- Osmotic sclerosing agent in sclerotherapy
- PAGET-von SCHRÖTTER syndrome
- PALMA operation. See femorofemoral saphenous vein transposition
- Pelvic congestion syndrome
- Paraná maneuver
- Parietal theory of varicose vein pathogenesis
- PARKES WEBER syndrome
- PAVČNIK valve
- Pentoxifylline
- Midgluteal perforator vein
- Perforator vein ablation or perforator ablation
- Perforator vein incompetence
<table>
<thead>
<tr>
<th>GE</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perforanvenenligatur</td>
<td>Perforator vein ligation or perforator ligation</td>
</tr>
<tr>
<td>Perforate INvaginate (PIN) Stripper, siehe PIN-Stripper</td>
<td>Perforate INvaginate (PIN) stripper. See PIN stripper</td>
</tr>
<tr>
<td>Perforate INvaginate (PIN) Stripping, siehe PIN-Strippering</td>
<td>Perforate INvaginate (PIN) stripping. See PIN stripping</td>
</tr>
<tr>
<td>Perfusionsszintigraphie</td>
<td>Perfusion scintigraphy</td>
</tr>
<tr>
<td>Perineale Varizen</td>
<td>Perineal varicosities</td>
</tr>
<tr>
<td>Perkutane Ablation der Perforansvenen</td>
<td>Percutaneous ablation of perforating veins</td>
</tr>
<tr>
<td>Perkutane Ballonangioplastie oder perkutane Venoplastie</td>
<td>Percutaneous balloon angioplasty or percutaneous venoplasty</td>
</tr>
<tr>
<td>Perkutane Lasertherapie bei Teleangiektasie und Krampfadern</td>
<td>Percutaneous laser therapy for telangiectasia and varicose veins</td>
</tr>
<tr>
<td>Perkutane mechanische Thrombektomie</td>
<td>Percutaneous mechanical thrombectomy</td>
</tr>
<tr>
<td>Perkutane Thrombektomie mit dem Arrow-TREROTOLA™ PERTHES-Test</td>
<td>Arrow-TREROTOLA™ percutaneous thrombectomy</td>
</tr>
<tr>
<td>Pharmakomechanische Thrombolysie</td>
<td>Pharmacomechanical thrombolysis</td>
</tr>
<tr>
<td>Pharmakotherapie von Venenerkrankungen</td>
<td>Venous pharmacotherapy</td>
</tr>
<tr>
<td>Phenindion</td>
<td>Phenindione</td>
</tr>
<tr>
<td>Phenprocoumon</td>
<td>Fenprocoumon</td>
</tr>
<tr>
<td>Phlebektasie</td>
<td>Phlebectasia. See also venectasia and varice, varicose vein, and varicosity</td>
</tr>
<tr>
<td>Phlebektomie</td>
<td>Phlebectomy</td>
</tr>
<tr>
<td>Phlebektomiehaken</td>
<td>Phlebectomy hook</td>
</tr>
<tr>
<td>Phlebitis</td>
<td>Phlebitis</td>
</tr>
<tr>
<td>Phlebographie, siehe Venographie</td>
<td>Phlebography. See venography</td>
</tr>
<tr>
<td>Phlebolgie</td>
<td>Phlebolgy</td>
</tr>
<tr>
<td>Phlebotomie (Venaesectio, Phlebotomie)</td>
<td>Phlebotomy (venesection, venotomy)</td>
</tr>
<tr>
<td>Phlebotonisches Arzneimittel, siehe Venotonische Medikamente oder Venoaktive Medikamente</td>
<td>Phlebotonic drug. See venotonic drugs or venoactive drugs</td>
</tr>
<tr>
<td>Phlegmasia alba dolens oder Milchbein</td>
<td>Phlegmasia alba dolens or white leg</td>
</tr>
<tr>
<td>Phlegmasia cerulea dolens oder blau Phlebitis</td>
<td>Phlegmasia cerulea dolens or painful blue leg</td>
</tr>
<tr>
<td>Photoplethysmographie</td>
<td>Photoplethysmography</td>
</tr>
<tr>
<td>Photothermolysy</td>
<td>Photothermolysis</td>
</tr>
<tr>
<td>Pigmentation/Hyperpigmentierung</td>
<td>Pigmentation or hyperpigmentation</td>
</tr>
<tr>
<td>Pin-Stripper</td>
<td>PIN stripper</td>
</tr>
<tr>
<td>Pin-Stripping</td>
<td>PIN stripping</td>
</tr>
<tr>
<td>P-Komponente der CEAP-Klassifikation</td>
<td>P component of the CEAP classification</td>
</tr>
<tr>
<td>Plantare Metatarsalsalve</td>
<td>Metatarsal plantar vein</td>
</tr>
<tr>
<td>Plantares subkutanes Venengeflecht</td>
<td>Plantar venous subcutaneous network</td>
</tr>
<tr>
<td>Phlebomorphographie, siehe auch Air-Phlebomorphographie, Phlebolysographie oder Okklusionsplebomorphographie</td>
<td>Plethysmography. See also air phlebomorphography, photoplethysmography and occlusion plethysmography</td>
</tr>
<tr>
<td>Plexus pampiniformis</td>
<td>Pampiniform plexus</td>
</tr>
<tr>
<td>Plexus venosus dorsales pedis</td>
<td>Dorsal venous network of the foot</td>
</tr>
<tr>
<td>Plexus venosus prostaticus (venöser Prostataplexus)</td>
<td>Prostatic venous plexus (male)</td>
</tr>
<tr>
<td>Plexus venosus uteri (Frau)</td>
<td>Uterine venous plexus (female)</td>
</tr>
<tr>
<td>Plexus venosus vaginalis (Frau)</td>
<td>Vaginal venous plexus (female)</td>
</tr>
<tr>
<td>Plexus vesico-prostaticus</td>
<td>Pudendal (vesicoprostatic) plexus (male)</td>
</tr>
<tr>
<td>Pochen</td>
<td>Throbbing</td>
</tr>
<tr>
<td>Polidocanol</td>
<td>Polidocanol</td>
</tr>
<tr>
<td>Polytetrafluoroethylen-Patch für die Neovaskularisation</td>
<td>Polytetrafluoroethylene patch for containing neovascularization</td>
</tr>
<tr>
<td>Portland-Klappe</td>
<td>Portland valve or PAVCNIK valve</td>
</tr>
<tr>
<td>Portweinfleck</td>
<td>Port-wine stain</td>
</tr>
<tr>
<td>GE</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Positionsabhängige Durchmesseränderung (Postural diameter change, PDC)</td>
<td>Postural diameter change</td>
</tr>
<tr>
<td>Posteriore tibiale Perforansvenen</td>
<td>Posterior tibial perforator veins</td>
</tr>
<tr>
<td>Posterolaterale Perforansvene (posteriorer Unterschenkel)</td>
<td>Posterior thigh perforator vein posterolateral</td>
</tr>
<tr>
<td>Posteromediale Perforansvene (posterier Unterschenkel)</td>
<td>Posterior thigh perforator vein posteromedial</td>
</tr>
<tr>
<td>Postthrombotische Varize</td>
<td>Postthrombotic varicose vein</td>
</tr>
<tr>
<td>Postthrombotisches Syndrom (PTS) oder postthrombotische Krankheit</td>
<td>Postthrombotic syndrome or postthrombotic disease</td>
</tr>
<tr>
<td>Posturaler Vasokonstriktionsreflex, siehe Venoarterioliäre Reflex</td>
<td>Postural vasoconstriction reflex. See venoarterial reflex</td>
</tr>
<tr>
<td>Power Pulse AngioJet™, siehe AngioJet™</td>
<td>Power pulse AngioJet™. See also AngioJet™</td>
</tr>
<tr>
<td>Powered Phlebektomie</td>
<td>Powered phlebectomy</td>
</tr>
<tr>
<td>Präterminale Klappe am sapheno-femoralen Übergang</td>
<td>Saphenofemoral junction preterminal valve</td>
</tr>
<tr>
<td>Präterminale Klappe am sapheno-poplitealen Übergang</td>
<td>Saphenopopliteal junction preterminal valve</td>
</tr>
<tr>
<td>PREPIC 2-Studie</td>
<td>PREPIC 2 study. See PREPIC study</td>
</tr>
<tr>
<td>PREPIC-Studie</td>
<td>PREPIC study</td>
</tr>
<tr>
<td>PrESence of Varices After Interventional Treatment (PREVAIT)</td>
<td>PRÉsence of Varices After Interventional Treatment (PREVAIT)</td>
</tr>
<tr>
<td>Primäre Veneninsuffizienz</td>
<td>Primary venous incompetence</td>
</tr>
<tr>
<td>Prophylaktischer Cava-Filter</td>
<td>Prophylactic caval filter</td>
</tr>
<tr>
<td>Prophylaxe von Venenthrombosen</td>
<td>Venous thromboprophylaxis</td>
</tr>
<tr>
<td>Prostacyclin</td>
<td>Prostacyclin</td>
</tr>
<tr>
<td>Protein C Mangel</td>
<td>Protein C deficiency</td>
</tr>
<tr>
<td>Protein S-Mangel</td>
<td>Protein S deficiency</td>
</tr>
<tr>
<td>Proximale Thrombose</td>
<td>Proximal thrombosis</td>
</tr>
<tr>
<td>Proximale Verlängerung der Vena saphena parva</td>
<td>Thigh extension of the small saphenous vein</td>
</tr>
<tr>
<td>Pruritis</td>
<td>Pruritis. See itching</td>
</tr>
<tr>
<td>PSATAKIS-Verfahren mit Silastic-Schlinge</td>
<td>PSATAKIS silastic sling procedure</td>
</tr>
<tr>
<td>Pubische Perforansvenen</td>
<td>Pudendal perforator veins</td>
</tr>
<tr>
<td>Pudenda Varizen</td>
<td>Pudendal varicose veins</td>
</tr>
<tr>
<td>“Pulsed-Spray-Thrombolyse”-Technik</td>
<td>Pulse-spray technique in thrombolysis. See also AngioJet™</td>
</tr>
<tr>
<td>Pulswiederholungsfrequenz</td>
<td>Pulse repetition frequency</td>
</tr>
<tr>
<td>Pumpfunktion der Wadenvenen</td>
<td>Venous calf pump function</td>
</tr>
<tr>
<td>Radiofrequenzablation</td>
<td>Radiofrequency ablation</td>
</tr>
<tr>
<td>Radiofreqenzgenerator</td>
<td>Radiofrequency generator</td>
</tr>
<tr>
<td>Radiofrequenzinduzierte Thermotherapie (RFITT)</td>
<td>Radiofrequency-induced thermotherapy</td>
</tr>
<tr>
<td>Raju-Valvuloplastie</td>
<td>Raju’s valvuloplasty</td>
</tr>
<tr>
<td>Ratschläge zur Lebensweise bei chronischen Venenstörungen</td>
<td>Lifestyle advice for chronic venous disorders</td>
</tr>
<tr>
<td>Recovery-Nitinolfilter</td>
<td>Recovery nitinol filter</td>
</tr>
<tr>
<td>Refluxive Klappen, siehe Klappeninsuffizienz</td>
<td>Refluxive valve. See valvular incompetence</td>
</tr>
<tr>
<td>Refluxquantifizierung</td>
<td>Reflux quantification</td>
</tr>
<tr>
<td>Reinigendes Verödungsmittel in der Sklerotherapie</td>
<td>Detergent sclerosing agent for sclerotherapy</td>
</tr>
<tr>
<td>Rekombinanter gewebespezifischer Plasminogenaktivator (rtPA)</td>
<td>Recombinant tissue plasminogen activator</td>
</tr>
<tr>
<td>Rekonstitution der Klappenfunktion nach MALETI</td>
<td>MALETI neovalve construction</td>
</tr>
<tr>
<td>Rekonstruktion der suprarenalen Vena cava inferior</td>
<td>Suprarenal inferior vena cava reconstruction</td>
</tr>
<tr>
<td>Rekonstruktive Chirurgie der tiefen Beinvene</td>
<td>Deep vein reconstructive surgery</td>
</tr>
<tr>
<td>Rekonstruktive Venenchirurgie</td>
<td>Venous reconstructive surgery</td>
</tr>
<tr>
<td>Rekurrente tiefe Venenchirurgie</td>
<td>Recurrent deep venous thrombosis</td>
</tr>
</tbody>
</table>
Remodellierung der Venenwand nach tiefer Venenthrombose
Resektion der ersten Rippe
Restvarizen
Restvolumenfraktion
Retikuläre Varizen
Reviparin
Rezirkulationsindex
Rinde der französischen maritimen Kiefer
Risikofaktoren für chronische Venenerkrankungen, siehe Risikofaktoren für Krampfadern oder für chronische Veneninsuffizienz (C3-C6)
Risikofaktoren für chronische Veneninsuffizienz (C3-C6)
Risikofaktoren für das erneute Auftreten einer Venenthrombose
Risikofaktoren für das postthrombotische Syndrom
Risikofaktoren für Krampfadern
Risikofaktoren für PREVAIT (PREsence of Varices After Interventional Treatment)
Risikofaktoren für tiefe Venenthrombose
Risikofaktoren für Venenthrombosen
Rivaroxaban
Rokitansky-Stenose
Rosskastanienextrakt oder Wurzelextrakt
Rückstrom durch die Beckenvene
Rückstrom durch die Vena ovarica oder Insuffizienz der Vena ovarica
Rückstrom über die assoziierten tiefen und oberflächlichen Venen
Rückstrom über die Uretervenen
Rückstrom über die V. saphena
Sakraler Plexus venosus rectalis externus
Sakraler Plexus venosus rectalis internus
Saphena-Auge, siehe Ägyptisches Auge
Sapheno-femoraler Übergang
Sapheno-poplitealer Bypass
Sapheno-poplitealer Übergang
Sauerstoff, hyperbare Behandlung bei Venengeschwüren
Schaumverödung, siehe Verödung (Sklerotherapie)
Schmerz
Schmerz-Score
Schwellungsgefühl
Schwere Beine, siehe Schweregefühl
Schweregefühl (in den Beinen)
Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)
Segel, siehe Klappensegel
Segmentaler Reflux

Vein wall remodeling
First rib resection
Residual reflux
Residual varicose vein or residual varice
Residual volume fraction
Reticular vein
Reviparin (clivarine)
Recirculation index
French maritime pine bark
Risk factors for chronic venous disease. See risk factors for varicose veins and for chronic venous insufficiency (C3-C6)
Risk factors for chronic venous insufficiency (C3-C6)
Risk factors for deep venous thrombosis recurrence
Risk factors for postthrombotic syndrome
Risk factors for varicose veins
Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)
Risk factors for deep venous thrombosis
Venous thrombosis risk factors. See risk factors for deep venous thrombosis
Rivaroxaban
Rokitansky stenosis
Horse chestnut seed or root extract
Pelvic vein reflux
Ovarian vein reflux or ovarian vein incompetence
Associated deep and superficial venous reflux
Ureteric vein reflux
Saphenous reflux
Sacral venous external rectal plexus
Sacral venous internal rectal plexus
Saphenous eye. See Egyptian eye
Saphenofermal junction
Saphenopopliteal bypass
Saphenopopliteal junction
Oxygen, hyperbaric treatment of venous ulcers
Foam sclerotherapy. See also sclerotherapy
Pain. See aching
Aching
Pain score
Impression of swelling. See feeling of swelling
Heavy leg. See heaviness
Heaviness
Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)
Valve leaflet. See valve cusp or cusp
Segmental reflux
TERMS IN OTHER LANGUAGES - GERMAN

**EN**

- Anterior accessory of the great saphenous vein. See anterior accessory saphenous vein
- Secondary patency
- Secondary venous incompetence
- Self-expanding stent
- Selective ablation of varices under local anesthesia
- SEPS. See subfascial endoscopic perforator surgery

- Sequential pneumatic compression
- SERVELLE-MARTORELL syndrome
- Venous stenting
- Sclerosant agent
- Ultrasonography
- SOTTIURAI’s valvuloplasty
- Spiral computed tomography angiography for pulmonary embolism
- Coiling for deep venous reflux

- Coiling of ovarian or pelvic veins. See also pelvic vein embolization
- Specific quality of life outcome response-venous

- Static stiffness index
- Stasis dermatitis
- Ankle stiffness
- Iliac vein stenting
- Streptokinase
- Saphenous stripping
- Strip test for valve competence. See milking test

- STURGE-WEBER syndrome
- Compression stockings. See compression hosiery
- Subdermal varices. See telangiectasia
- Subfascial endoscopic perforator surgery
- Suprapatellar perforator vein
- Suprarenal or adrenal veins
- Suprarenal cava filter
- Symptomatic varicose veins
- Telangiectasia
- Telangiectatic matting
- Temporary arteriovenous fistula
- Saphenofemoral junction terminal valve
- Saphenopopliteal junction terminal valve
- Terminal valve. See saphenofemoral junction terminal valve and Saphenopopliteal junction terminal valve

- TESSARI technique
- Compression adherence
- Venous thermal ablation
- Thoracic outlet syndrome
- Thrombolysis. See Venous thrombolytic treatment
- Venous thrombolytic treatment

**GE**

Seitenast der Vena saphena magna, siehe Vena saphena accessoria anterior

Sekundäre Durchgängigkeit

Sekundäre Veneninsuffizienz

Selbst-expandierender Stent

Selektive Ablation von Varizen unter Lokalanästhesie

SEPS, siehe Subfaziale endoskopische Perforans-Sanierung (SEPS)

Sequentielle pneumatische Kompression

SERVELLE-MARTORELL-Syndrom

Setzen von Venenstents

Sklerotisierendes Mittel

Sonographie

SOTTIURAI-Valvuloplastie

Spiral-CT bei Lungenembolie

Spiralembolisation (Coiling) bei Rückstrom über die tiefen Venen

Spiralembolisation (Coiling) der Eierstock- oder Beckenvenen(n), siehe Beckenvenenembolisation

SQOR-V-Fragebogen (Specific quality of life outcome response-venous)

Static Stiffness Index (SSI)

Stauungsdermatitis

Steifheit im Knöchelgelenk

Stenting der Vena iliaca

Streptokinase

Stripping der V. saphena

Strip-Test zur Überprüfung der Klappenkompetenz, siehe “Melktest”

STURGE-WEBER Syndrom

Stützstrümpfe, siehe Kompressionsstrümpfe

Subdermale Varizen, siehe Teleangiektasie

Subfasiale endoskopische Perforans-Sanierung (SEPS)

Suprapatellare Perforans-Vene

Suprenäle Venen oder Nebennierenvenen

Suprarenaler Cava-Filter

Symptomatische Varizen

Teleangiektasie

Teleangiektatisches Matting

Temporäre arteriovenöse Fistel

Terminale Klappe am sapheno-femoralen Übergang

Terminale Klappe am sapheno-poplitealen Übergang

Terminale Klappe, siehe Terminale Klappe am sapheno-femoralen Übergang und Terminale Klappe am sapheno-poplitealen Übergang

TESSARI-Technik

Therapietreue mit Kompressionstherapie

Thermische venenablation

Thoracic-Outlet-Syndrom

Thrombolyse, siehe Thrombolytische Venenbehandlung

Thrombolytische Venenbehandlung
<table>
<thead>
<tr>
<th>GE</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thrombophilie</td>
<td>Thrombophilia</td>
</tr>
<tr>
<td>Thrombophlebitis</td>
<td>Thrombophlebitis</td>
</tr>
<tr>
<td>Thrombose in der Vena axillaris/Vena subclavia oder Axillo-subclavian vein thrombosis also called PAGET-von SCHRÖTTER-Syndrome</td>
<td>Inferior vena cava thrombosis</td>
</tr>
<tr>
<td>Thrombose in der Vena cava inferior</td>
<td>Deep venous thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Thrombose venös tief, siehe Beinvenenthrombose</td>
<td>Deep vein thrombosis</td>
</tr>
<tr>
<td>Tiefe Beinvenenthrombose</td>
<td>Deep veins of the clitoris or deep dorsal veins of the clitoris (female)</td>
</tr>
<tr>
<td>Tiefe Citorisvenen (Vena dorsalis profunda citloridis)</td>
<td>Deep digital veins (plantar and dorsal)</td>
</tr>
<tr>
<td>Tiefe Fingervenen: plantar und dorsal</td>
<td>Iliofemoral deep venous thrombosis</td>
</tr>
<tr>
<td>Tiefe iliofemorale Venenthrombose</td>
<td>Deep metatarsal veins (plantar and dorsal)</td>
</tr>
<tr>
<td>Tiefe Mittelfußvenen (plantar und dorsal)</td>
<td>Deep veins of the penis (male)</td>
</tr>
<tr>
<td>Tiefe Penisvenen</td>
<td>Deep venous incompetence</td>
</tr>
<tr>
<td>Tiefe Veneninsuffizienz</td>
<td>Deep venous obstruction</td>
</tr>
<tr>
<td>Tiefe Venenobstruktion</td>
<td>Upper extremity deep vein thrombosis</td>
</tr>
<tr>
<td>Tiefe Venenthrombose der oberen Extremität</td>
<td>Deep palmar venous arch</td>
</tr>
<tr>
<td>Tiefer palmarer Venenbogen</td>
<td>Deep venous reflux</td>
</tr>
<tr>
<td>Tiefer Venenreflux, Rückstrom durch die tiefen Venen</td>
<td>Tinzaparin</td>
</tr>
<tr>
<td>Tinzaparin</td>
<td>Tourniquet effect</td>
</tr>
<tr>
<td>Tourniquet-Effekt</td>
<td>Trabeculated vein</td>
</tr>
<tr>
<td>Trabekuläre Vene</td>
<td>Axillary vein transfer or transplantation</td>
</tr>
<tr>
<td>Transfer oder Transplantation der Vena axillaris</td>
<td>Transilluminated powered phlebektomie</td>
</tr>
<tr>
<td>Transilluminierte Powered Phlebektomie</td>
<td>Transcommissural valvuloplasty</td>
</tr>
<tr>
<td>Transkommisssurale Valvuloplastie</td>
<td>Transmural valvuloplasty</td>
</tr>
<tr>
<td>Transmurale Valvuloplastie</td>
<td>Cross-pubic collateral veins</td>
</tr>
<tr>
<td>Transpubische Kollateralvenen</td>
<td>TrapEase® vena cava filter</td>
</tr>
<tr>
<td>Trapease®-Cava-Filter</td>
<td>Grape seed extract</td>
</tr>
<tr>
<td>Traubenkernextrakt</td>
<td>Trellis thrombectomy catheter</td>
</tr>
<tr>
<td>Trellis-Thrombektomiekatheter</td>
<td>TRENDELENBURG position</td>
</tr>
<tr>
<td>TRENDELENBURG-Lagerung</td>
<td>TRENDELENBURG test</td>
</tr>
<tr>
<td>TRENDELENBURG-Test</td>
<td>Trivex. See transilluminated powered phlebektomy</td>
</tr>
<tr>
<td>Trivex, siehe Transilluminierte Powered Phlebektomie</td>
<td>Trophic disorders. See venous skin changes</td>
</tr>
<tr>
<td>Trophische Störungen, siehe venös bedingte Hautveränderungen</td>
<td>Trophic changes. See venous skin changes</td>
</tr>
<tr>
<td>Trophische Veränderungen, siehe venös bedingte Hautveränderungen</td>
<td>Truncral malformation</td>
</tr>
<tr>
<td>Trunkuläre Malformation</td>
<td>Truncral venous ablation</td>
</tr>
<tr>
<td>Trunkuläre Venenablation</td>
<td>Tumescent anaesthesia</td>
</tr>
<tr>
<td>Tumeszenzanaesthesie</td>
<td>Tumescent solution</td>
</tr>
<tr>
<td>Tumeszenzlösung</td>
<td>Superimposed leggings</td>
</tr>
<tr>
<td>Übereinander angelegte Stümpfe</td>
<td>Ultrasound</td>
</tr>
<tr>
<td>Ultraschall</td>
<td>Ultrasound-guided puncture, cannulation</td>
</tr>
<tr>
<td>Ultraschallgeführte Punktion/Kanülierung</td>
<td>Ultrasound-guided foam sclerotherapy</td>
</tr>
<tr>
<td>Ultraschallkontrollierte Schaumverdünnung</td>
<td>Ultrasound-guided sclerotherapy</td>
</tr>
<tr>
<td>Ultraschallkontrollierte Sklerotherapie</td>
<td>Ultrasound mapping</td>
</tr>
<tr>
<td>Ultraschall-Mapping</td>
<td>Ultrasound monitoring</td>
</tr>
<tr>
<td>Ultraschallüberwachung</td>
<td>Unfractionated heparin</td>
</tr>
<tr>
<td>Unfraktioniertes Heparin</td>
<td>Restless legs</td>
</tr>
<tr>
<td>Unruhige Beine</td>
<td>Lower gluteal vein</td>
</tr>
<tr>
<td>Untere Glutealvene, siehe Venae gluteae inferiores</td>
<td>Urokinase</td>
</tr>
<tr>
<td>Urokinase</td>
<td></td>
</tr>
</tbody>
</table>
TERMS IN OTHER LANGUAGES - GERMAN

**TERMS IN OTHER LANGUAGES - GERMAN**

- **GE**
  - Valsalva-Manöver, Valsalva-Versuch
  - Valvulärer Rückfluss
  - Valvuloplastie nach KISTNER
  - Valvuloplastie
  - Varikographie
  - Variköses Ekzem (Eczema varicosum, Stauungsekzem, Stauungsdermatitis)
  - Varikosität, siehe Varizen, Krampfadern, Varikosität
  - Varikozele
  - Varizen des Beckens
  - Varizen im runden Mutterband (Ligamentum teres uteri)
  - Varizen- oder Krampfaderablation
  - Varizen, Krampfadern, Varikosität
  - Varizengeflecht in der Kniekehle
  - Varizenpathogenese
  - Vena axillaris (Achselvene)
  - Vena basilica (Basilarvene)
  - Vena basilica accessoria
  - Vena basilica medialis
  - Vena brachialis lateralis
  - Vena brachiocephalica
  - Vena bulbi penis (Mann)
  - Vena bulbi vestibuli
  - Vena cava
  - Vena cava inferior (untere Hohlvene)
  - Vena cava superior
  - Vena cephalica
  - Vena cephalica accessoria
  - Vena cephalica medialis
  - Vena circumflexa femoris anterior
  - Vena circumflexa femoris lateralis
  - Vena circumflexa femoris medialis
  - Vena circumflexa femoris posterior
  - Vena circumflexa ilium profunda
  - Vena circumflexa ilium superficialis
  - Vena dorsalis profunda clitoridis
  - Vena dorsalis profunda penis
  - Vena dorsalis superficialis clitoridis oder penis
  - Vena epigastrica inferior (untere Bauchwandvene)
  - Vena epigastrica superficialis (oberflächliche Bauchwandvene)
  - Vena femoralis (Oberschenkelvene)
  - Vena femoralis profunda
  - Vena femoralis communis
  - Vena gastrocnemica lateralis
  - Vena iliaca communis (gemeinsame Hüftvene)
  - Vena iliaca externa (äußere Hüftvene)
  - Vena iliolumbals
  - Vena iliolumbra (Vena hypogastrica, innere Hüftvene)
  - Vena intergemeillaris
  - Vena jugularis interna (innere Jugularvene)

**EN**

- Valsalva maneuver
- Valvular reflux
- KISTNER’s valvuloplasty
- Valvuloplasty
- Varicography
- Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)
- Varicosity. See varice, varicose vein, varicosity
- Varicocele
- Pelvic varices
- Round ligament varices
- Varices or varicose vein ablation. See vein ablation
- Varice, varicose vein, varicosity
- Popliteal fossa varicose network
- Varices pathogenesis
- Axillary vein
- Basilic vein
- Accessory basilic vein
- Medial basilic vein
- Lateral brachial vein
- Brachiocephalic vein
- Vein of the bulb of the penis (male)
- Vein of the bulb of the vestibule (female)
- Vena cava
- Inferior vena cava
- Superior vena cava
- Cephalic vein
- Accessory cephalic vein
- Medial cephalic vein
- Anterior thigh circumflex vein
- Lateral circumflex femoral vein
- Medial circumflex femoral vein
- Posterior thigh circumflex vein
- Deep circumflex iliac vein
- Superficial circumflex iliac vein
- Deep dorsal vein of clitoris (female)
- Deep dorsal vein of penis (male)
- Superficial dorsal vein of the clitoris or penis
- Inferior epigastric vein
- Superficial epigastric vein
- Femoral vein
- Profunda femoral vein
- Common femoral vein
- Lateral gastrocnemius veins
- Common iliac vein
- External iliac vein
- Iliolumbar vein
- Internal iliac vein (hypogastric)
- Intergemellar vein or intergastrocnemial vein
- Internal jugular vein
GER

Vena marginalis medialis pedis
Vena marginalis pedis lateralis (üblicherweise ersetzt durch einen Plexus)
Vena mediana antebrachii
Vena mediana antebrachii (mittlere Unterarmvene)
Vena mediana cephalica
Vena mediana cubiti
Vena mediatia cubiti (mittlere Ellenbeugenvene)
Vena mesenterica inferior (untere Mesenterialvene)
Vena mesenterica superior (obere Mesenterialvene)
Vena ovarica (Eierstockvene)
Vena pedis (Fußvene)
Vena perforans (Perforansvene)
Vena perforans cruris lateralis
Vena perforans femoris lateralis (Leistenbereich)
Vena perforans femoris medialis (Schenkelkanal)
Vena perforans genus lateralis
Vena perforans pedis dorsalis
Vena perforans tarsalis medialis
Vena perforantis (Perforansvene)
Vena plantaris medialis
Vena poplitea (Kniekehlenvene)
Vena profunda femoris (tiefe Oberschenkelvene)
Vena profunda, tiefe Beinvene
Vena pubica
Vena pudenda externa (äußere Schamvene)
Vena pudenda externa superficialis
Vena pudenda interna (innere Schambeinvene)
Vena radialis
Vena rectalis superior (obere Rektumvene)
Vena renalis (Nierenvene)
Vena sacralis mediana
Vena saphea accessoria posterior
Vena saphena accessoria anterior
Vena saphena magna
Vena saphena parva

Vena subclavia
Vena superficialis
Vena-cava-inferior-Filter
Vena-cava-superior-Syndrom
Venae brachialis (Oberarmvenen)
Venae bulbi penis
Venae fibularis oder peronae
Venae gastrocnemicae
Venae gastrocnemii medialis
Venae gluteae inferiores
Venae gluteae superiores
Venae interossae anteriores

EN

Medial marginal vein of the foot
Lateral marginal vein of the foot
Median antebrachial vein
Median vein of the forearm
Median cephalic vein
Median cubital vein
Median vein of the elbow
Inferior mesenteric vein
Superior mesenteric vein
Ovarian vein
Pedal vein
Perforator vein
Lateral leg perforator vein
Lateral thigh perforator vein
Medial thigh inguinal perforator vein
Medial thigh perforator vein of the femoral canal
Lateral knee perforator vein
Dorsal foot perforator (perforating) vein
Medial ankle perforator vein. See posterior tibial perforator veins
Communicating veins
Medial plantar veins
Popliteal vein
Deep femoral vein
Deep vein
Pubic vein
External pudendal vein
Superficial external pudendal vein
Internal pudendal vein
Radial vein
Superior rectal vein
Renal vein
Median sacral vein
Posterior accessory saphenous vein
Anterior accessory saphenous vein
Great saphenous vein
Small saphenous vein. See also Cranial extension of the small saphenous vein
Subclavian vein
Superficial vein
 Inferior vena cava filter
Superior vena cava syndrome
Brachial veins
Urethral bulb veins (male)
Fibular or peroneal veins
Gastrocnemius veins
Medial gastrocnemius veins
Inferior gluteal veins
Superior gluteal veins
Anterior interosseous veins
<table>
<thead>
<tr>
<th>GE</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Venae intersaphenae</td>
<td><strong>Intersaphenous vein(s)</strong></td>
</tr>
<tr>
<td>Venae labiales posteriores (hintere Schamlippenvenen) (Frau)</td>
<td><strong>Posterior labial veins (female)</strong></td>
</tr>
<tr>
<td>Venae labialis anteriores (vordere Schamlippenvenen)</td>
<td><strong>Anterior labial veins</strong></td>
</tr>
<tr>
<td>Venae lumbales (Lumbalvenen)</td>
<td><strong>Lumbar veins</strong></td>
</tr>
<tr>
<td>Venae obturatoriae (Obturatorvenen)</td>
<td><strong>Obturator veins</strong></td>
</tr>
<tr>
<td>Venae perforantes cruris anterior</td>
<td><strong>Anterior leg perforator veins</strong></td>
</tr>
<tr>
<td>Venae perforantes cruris mediales: Vena tibialis posterior</td>
<td><strong>Medial leg perforator veins</strong></td>
</tr>
<tr>
<td>(früher COCKETT-Perforansvene)</td>
<td><strong>Medial leg posterior tibial perforator vein</strong> (formerly COCKETT perforator vein)</td>
</tr>
<tr>
<td>Venae perforantes femoris anteriores</td>
<td><strong>Anterior thigh perforator veins</strong></td>
</tr>
<tr>
<td>Venae perforantes gluteal superiores</td>
<td><strong>Superior gluteal perforator vein</strong></td>
</tr>
<tr>
<td>Venae perforantes pedis laterales</td>
<td><strong>Lateral foot perforator veins</strong></td>
</tr>
<tr>
<td>Venae perforantes pedis mediales</td>
<td><strong>Medial foot perforator veins</strong></td>
</tr>
<tr>
<td>Venae perforantes tarsalis laterales</td>
<td><strong>Lateral ankle perforator veins</strong></td>
</tr>
<tr>
<td>Venae perinealis superficialis</td>
<td><strong>Superficial perineal veins</strong></td>
</tr>
<tr>
<td>Venae rectales inferiores (untere Rektumvenen)</td>
<td><strong>Inferior rectal veins</strong></td>
</tr>
<tr>
<td>Venae rectales mediae (mittlere Rektumvenen)</td>
<td><strong>Middle rectal veins</strong></td>
</tr>
<tr>
<td>Venae sacrales laterales (seitliche Kreuzbeinvenen)</td>
<td><strong>Lateral sacral veins</strong></td>
</tr>
<tr>
<td>Venae saphenae</td>
<td><strong>Saphenous veins</strong></td>
</tr>
<tr>
<td>Venae scrotales anteriores (vordere Skrotalvenen)</td>
<td><strong>Anterior scrotal veins</strong></td>
</tr>
<tr>
<td>Venae scrotales posteriores (hintere Skrotalvenen) (Mann)</td>
<td><strong>Posterior scrotal veins (male)</strong></td>
</tr>
<tr>
<td>Venae testicales (Hodvenen)</td>
<td><strong>Testicular veins</strong></td>
</tr>
<tr>
<td>Venae tibiales anteriores (vordere Schienbeinvenen)</td>
<td><strong>Anterior tibial veins</strong></td>
</tr>
<tr>
<td>Venae tibiales posteriores (hintere Schienbeinvenen)</td>
<td><strong>Posterior tibial veins</strong></td>
</tr>
<tr>
<td>Venae ulnares</td>
<td><strong>Ulnar veins</strong></td>
</tr>
<tr>
<td>Venae uterinae (Uterusvenen) (Frau)</td>
<td><strong>Uterine veins (female)</strong></td>
</tr>
<tr>
<td>Venae vaginalis (Frau)</td>
<td><strong>Vaginal veins (female)</strong></td>
</tr>
<tr>
<td>Vene</td>
<td><strong>Vein</strong></td>
</tr>
<tr>
<td>Venektasie, siehe Phlebektasie, oder Varizen,</td>
<td><strong>Venectasia. See also phlebectasia or varice, varicose vein, varicosity</strong></td>
</tr>
<tr>
<td>Krampfadern, Varikosität</td>
<td><strong>Vein ablation / Venous ablation</strong></td>
</tr>
<tr>
<td>Venenablation</td>
<td><strong>Vein atresia</strong></td>
</tr>
<tr>
<td>Venenatresie</td>
<td><strong>Venous bypass</strong></td>
</tr>
<tr>
<td>Venenbypass</td>
<td><strong>Venous compliance</strong></td>
</tr>
<tr>
<td>Venencompliance</td>
<td><strong>Venous pressure</strong></td>
</tr>
<tr>
<td>Venendruck</td>
<td><strong>Venous echogenicity</strong></td>
</tr>
<tr>
<td>Venenechogenizität</td>
<td><strong>Venous disease</strong></td>
</tr>
<tr>
<td>Venenerkrankung, Venenisuffizien</td>
<td><strong>Venous filling time (VFT)</strong></td>
</tr>
<tr>
<td>Venenfüllzeit</td>
<td><strong>Venous function</strong></td>
</tr>
<tr>
<td>Venenfüllungszeiten, Veneninsuffizien</td>
<td><strong>Groin varicose network. See also neovascularization</strong></td>
</tr>
<tr>
<td>Venenentwicklung, Veneninsuffizien</td>
<td><strong>Venous incompetence</strong></td>
</tr>
<tr>
<td>Venenklappenprothese</td>
<td><strong>Venous valve</strong></td>
</tr>
<tr>
<td>Venenkappe</td>
<td><strong>Prosthetic venous valve</strong></td>
</tr>
<tr>
<td>Venenklopfenprothese</td>
<td><strong>Vein compression. See venous compression</strong></td>
</tr>
<tr>
<td>Venenkompaktion, siehe venöse Kompression</td>
<td><strong>Venous compressibility</strong></td>
</tr>
<tr>
<td>Venenkompresionierung</td>
<td><strong>Venous ligation</strong></td>
</tr>
<tr>
<td>Venenlumen</td>
<td><strong>Venous lumen</strong></td>
</tr>
<tr>
<td>Venenmedikamente</td>
<td><strong>Venous drugs</strong></td>
</tr>
<tr>
<td>Venennahrt</td>
<td><strong>Venesuture</strong></td>
</tr>
<tr>
<td>Venenobstruktion</td>
<td><strong>Venous obstruction</strong></td>
</tr>
<tr>
<td>Venenokklusion, siehe Venenverschluss</td>
<td><strong>Vein occlusion. See venous occlusion</strong></td>
</tr>
<tr>
<td>German</td>
<td>English</td>
</tr>
<tr>
<td>--------</td>
<td>---------</td>
</tr>
<tr>
<td>Venenoperation</td>
<td>Venous surgery</td>
</tr>
<tr>
<td>Venenphysiologie</td>
<td>Venous physiology</td>
</tr>
<tr>
<td>Venenplethysmographie</td>
<td>Venous plethysmography</td>
</tr>
<tr>
<td>Venenpumpenfunktion</td>
<td>Venous pump function</td>
</tr>
<tr>
<td>Venenpunktur</td>
<td>Venepuncture or venipuncture</td>
</tr>
<tr>
<td>Venensegmenttransfer, siehe Klappentransplantation</td>
<td>Venous segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Venensegmenttransplantation oder Venensegmenttransfer, siehe Klappentransplantation</td>
<td>Vein segment transplantation or vein segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Venenstenose</td>
<td>Venous stenosis</td>
</tr>
<tr>
<td>Venenstörungen</td>
<td>Venous disorders</td>
</tr>
<tr>
<td>Venenstripping</td>
<td>Venous stripping</td>
</tr>
<tr>
<td>Venensystem</td>
<td>Venous system</td>
</tr>
<tr>
<td>Venenthrombektomie</td>
<td>Venous thrombectomy</td>
</tr>
<tr>
<td>Venenthrombenbildung</td>
<td>Venous thrombus formation</td>
</tr>
<tr>
<td>Venenthrombose</td>
<td>Venous thrombosis</td>
</tr>
<tr>
<td>Venenthrombus</td>
<td>Venous thrombus. See also Venous thrombosis</td>
</tr>
<tr>
<td>Venentransposition nach KISTNER</td>
<td>KISTNER’s vein transposition</td>
</tr>
<tr>
<td>Venentransposition, siehe Venentransposition nach KISTNER</td>
<td>Vein transposition. See KISTNER’s vein transposition</td>
</tr>
<tr>
<td>Venenverödung</td>
<td>Venous obliteration</td>
</tr>
<tr>
<td>Venenverschluss</td>
<td>Venous occlusion</td>
</tr>
<tr>
<td>Venoarterieller Flow-Index</td>
<td>Venoarterial flow index</td>
</tr>
<tr>
<td>Venoarterioläre Reaktion</td>
<td>Venoarteriolar response</td>
</tr>
<tr>
<td>Venoarterioläre Reflex (posturaler Vasokonstriktionsreflex)</td>
<td>Venoarteriolar reflex (postural vasokonstriction reflex)</td>
</tr>
<tr>
<td>Venographie, siehe auch Aszendierende Venographie/Phlebographie und Deszendierende Venographie/Phlebographie</td>
<td>Venography. See also Ascending phlebography/venography and Descending phlebography, venography</td>
</tr>
<tr>
<td>Venokonstriktion</td>
<td>Venoconstriction</td>
</tr>
<tr>
<td>Venoplastie</td>
<td>Venoplasty</td>
</tr>
<tr>
<td>Venöse bedingte Hautveränderungen</td>
<td>Venous skin changes</td>
</tr>
<tr>
<td>Venöse Ballonangioplastie</td>
<td>Venous balloon angioplasty</td>
</tr>
<tr>
<td>Venöse Hämodynamik</td>
<td>Venous hemodynamics</td>
</tr>
<tr>
<td>Venöse Hypertonie</td>
<td>Venous hypertension. See also ambulatory venous hypertension</td>
</tr>
<tr>
<td>Venöse Hypoplasie</td>
<td>Venous hypoplasia</td>
</tr>
<tr>
<td>Venöse Kapazität</td>
<td>Venous capacitance</td>
</tr>
<tr>
<td>Venöse Kompressio</td>
<td>Venous compression</td>
</tr>
<tr>
<td>Venöse Malformationen an den Seitenästen</td>
<td>Extratruncular venous malformation</td>
</tr>
<tr>
<td>Venöse Missbildung</td>
<td>Venous malformation</td>
</tr>
<tr>
<td>Venöse Mitralklappe</td>
<td>Venous bicuspid valve</td>
</tr>
<tr>
<td>venöse Obstruktion, siehe Venenobstruktion</td>
<td>Vein obstruction. See venous obstruction</td>
</tr>
<tr>
<td>Venöse Symptome</td>
<td>Venous symptoms</td>
</tr>
<tr>
<td>Venöse Thromboembolie</td>
<td>Venous thromboembolism</td>
</tr>
<tr>
<td>Venöse Wiederauffüllzeit, siehe Wiederauffüllzeit</td>
<td>Venous refill time. See refilling time</td>
</tr>
<tr>
<td>Venöser “Blow down”, siehe Venöser Reflux</td>
<td>Venous blow down. See venous reflux</td>
</tr>
<tr>
<td>Venöser Abflusswiderstand</td>
<td>Venous outflow resistance</td>
</tr>
<tr>
<td>Venöser Blow out</td>
<td>Venous blow out</td>
</tr>
<tr>
<td>Venöser Drainageindex (VDI)</td>
<td>Venous drainage index</td>
</tr>
<tr>
<td>Venöser Füllungsindex (VFI)</td>
<td>Venous filling index (VFI)</td>
</tr>
<tr>
<td>Venöser Privatkreislauf in den unteren Gliedmaßen</td>
<td>Private venous circulation in the lower limb</td>
</tr>
<tr>
<td>Venöser Reflux oder venöser Rückstrom</td>
<td>Venous reflux</td>
</tr>
<tr>
<td>Venöser Rückstrom, siehe Venöser Reflux</td>
<td>Venous back flow. See venous reflux</td>
</tr>
<tr>
<td>GE</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td>Venöser Ulcus cruris</td>
<td>Venous leg ulcer</td>
</tr>
<tr>
<td>Venöses Aneurysma</td>
<td>Venous aneurysm</td>
</tr>
<tr>
<td>Venöses bioprosthetisches Ventil</td>
<td>Venous bioprosthetic valve</td>
</tr>
<tr>
<td>Venöses Oedem (Phlebödem)</td>
<td>Venous edema (phlebedema)</td>
</tr>
<tr>
<td>Venöses Stauungsgangrän</td>
<td>Venous gangrene</td>
</tr>
<tr>
<td>Venöses Thoracic-outlet-Syndrom, siehe PAGET-von-SCHRÖTTER-Syndrom</td>
<td>Venous thoracic outlet syndrome. See also PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Venotonische Medikamente, siehe Venoaktive Medikamente</td>
<td>Venotonic drugs. See venoactive drugs</td>
</tr>
<tr>
<td>Venous Clinical Severity Score (VCSS)</td>
<td>Venous clinical severity score (VCSS)</td>
</tr>
<tr>
<td>Venous Disability Score (VDS)</td>
<td>Venous disability score</td>
</tr>
<tr>
<td>Venous insufficiency epidemiological and economic studies (VEINES)</td>
<td>Venous insufficiency epidemiological and economic studies (VEINES)</td>
</tr>
<tr>
<td>Venous Segmental Disease Score</td>
<td>Venous segmental disease score</td>
</tr>
<tr>
<td>Venous severity scoring</td>
<td>Venous severity scoring</td>
</tr>
<tr>
<td>Ventilation/Perfusions-Szintigraphie</td>
<td>Ventilation-perfusion scintigraphy</td>
</tr>
<tr>
<td>VENTURI-Effekt</td>
<td>VENTURI effect</td>
</tr>
<tr>
<td>Veränderungen der Venenhämodynamik bei Venenerkrankungen</td>
<td>Venous hemodynamic changes in venous disease</td>
</tr>
<tr>
<td>Verband</td>
<td>Bandage. See also compression bandages</td>
</tr>
<tr>
<td>Verödung (Sklerotherapie)</td>
<td>Sclerotherapy</td>
</tr>
<tr>
<td>Verödungsgerät, siehe Powered Phlebektomie</td>
<td>Phlebectomy power device. See powered phlebectomy</td>
</tr>
<tr>
<td>Verödungsschaum oder Sklerotisierungsschaum</td>
<td>Sclerosing foam</td>
</tr>
<tr>
<td>VILLALTA-Score</td>
<td>VILLALTA score</td>
</tr>
<tr>
<td>VIRCHOW-Trias</td>
<td>VIRCHOW’s triad</td>
</tr>
<tr>
<td>Vitamin-K-Antagonist</td>
<td>Vitamin K antagonist</td>
</tr>
<tr>
<td>VLU-QoL-Fragebogen (Venous leg ulcer quality of life questionnaire)</td>
<td>Venous leg ulcer quality of life questionnaire</td>
</tr>
<tr>
<td>Vogelnestfilter (“Bird’s Nest Filter”)</td>
<td>Bird’s nest filter</td>
</tr>
<tr>
<td>Vorbeugung/Prophylaxe einer tiefen Beinvenenthrombose</td>
<td>Deep vein thrombosis prevention/prophylaxis</td>
</tr>
<tr>
<td>Wadenmuskelpumpe oder Wadenpumpe</td>
<td>Calf muscle pump or calf pump</td>
</tr>
<tr>
<td>Wadenpumpenleistung</td>
<td>Calf pump output</td>
</tr>
<tr>
<td>Wadenvenenthrombose</td>
<td>Calf vein thrombosis, deep vein thrombosis isolated in the calf</td>
</tr>
<tr>
<td>Wallstent™</td>
<td>Wallstent™</td>
</tr>
<tr>
<td>Warfarin</td>
<td>Warfarin</td>
</tr>
<tr>
<td>Warren-Operation, siehe Femero-poplitealer oder femorocruraler Bypass</td>
<td>Warren operation. See femoropopliteal or femorocrural saphenous vein bypass</td>
</tr>
<tr>
<td>Wasserspezifische Laserwellenlängen</td>
<td>Water-specific laser wavelengths</td>
</tr>
<tr>
<td>Waterfall-Drainage</td>
<td>Waterfall drainage</td>
</tr>
<tr>
<td>Wells-Score</td>
<td>Wells score</td>
</tr>
<tr>
<td>Widmer-Klassifikation</td>
<td>Widmer’s classification</td>
</tr>
<tr>
<td>Wiederauffüllzeit</td>
<td>Refilling time</td>
</tr>
<tr>
<td>Xenograft-Klappe</td>
<td>Xenograft valve</td>
</tr>
<tr>
<td>Ximelagatran</td>
<td>Ximelagatran</td>
</tr>
<tr>
<td>X-Sizer™ helikaler Thrombektomiekatheter</td>
<td>X-sizer™ helical thrombektomy catheter</td>
</tr>
<tr>
<td>X-Vene</td>
<td>X-vein</td>
</tr>
<tr>
<td>Yag-Laser, siehe Nd-YAG-Laser</td>
<td>YAG laser. See ND-YAG LASER</td>
</tr>
<tr>
<td>Zehenspitzentest</td>
<td>Tiptoe maneuver</td>
</tr>
<tr>
<td>Zinkleimverband (&quot;Unna Boot&quot;)</td>
<td>UNNA boot</td>
</tr>
<tr>
<td>Z-Stent™</td>
<td>Z-stent™</td>
</tr>
</tbody>
</table>
IT

Ablazione a radiofrequenza
Ablazione chimica
Ablazione con stiletto o flebectomia con stiletto
Ablazione con vapore
Ablazione del tronco venoso
Ablazione della vena
Ablazione delle varici o delle vene varicose
Ablazione delle vene perforanti o ablação delle perforanti
Ablazione endovenosa con radiofrequenza
Ablazione endovenosa con vapore
Ablazione laser endovenosa delle vene safene
Ablazione laser Vedere ablação laser endovenosa delle vene safene
Ablazione meccano-chimica
Ablazione non termica delle vene
Ablazione percutanea delle vene perforanti
Ablazione selettiva di varici in anestesia locale
Ablazione termica endovenosa
Ablazione termica venosa
Ablazione venosa
Acenocumarolo
Aderenza alla compressione
Agente chimico irritante (agente sclerosante) in scleroterapia
Agente detergente sclerosante in scleroterapia
Agente osmotic sclerosante in scleroterapia
Agente sclerosante
Agenti antitrombotici
AKónya Eliminator – catetere per trombectomia
Alfa-benzopirone
Alterazioni cutanee venose
Alterazioni dell’emodinamica venosa nella malattia venosa
Alterazioni trofiche Vedere alterazioni cutanee venose
American Venous Forum (AVF)
Anastomosi chirurgica tra vena grande safena e vena femorale (Flush ligation)
Anestesia per il trattamento interventistico delle vene varicose
Anestesia tumescente
Aneurisma della vena poplitea
Aneurisma Vedere aneurisma venoso
Aneurisma venoso
Angiografia con tomografia computerizzata spirale per embolia polmonare
AngioJet™
Angioma
Angioma cavernoso
Angioplastica percutanea con palloncino o venoplastica percutanea
Angioplastica venosa con palloncino
Antagonista della vitamina K

EN

Radiofrequency ablation
Chemical ablation
Stab avulsion or stab phlebectomy
Steam ablation
Truncal venous ablation
Vein ablation
Varices or varicose vein ablation. See vein ablation
Perforator vein ablation or perforator ablation
Endovenous radiofrequency ablation
Endovenous steam ablation
Endovenous laser ablation of saphenous veins
Laser ablation. See endovenous laser ablation of saphenous veins
Mechanochemical ablation
Nonthermal vein ablation
Percutaneous ablation of perforating veins
Selective ablation of varices under local anesthesia
Endovenous thermal ablation
Venous thermal ablation
Venous ablation
Acenocoumarol
Compression adherence
Chemical irritant (sclerosing agent) in sclerotherapy
Detergent sclerosing agent for sclerotherapy
Osmotic sclerosing agent in sclerotherapy
Sclerosant agent
Antithrombotic agents
AKόnya Eliminator – thrombectomy catheter
Alpha benzopirone
Venous skin changes
Venous hemodynamic changes in venous disease
Trophic changes. See venous skin changes
American Venous Forum (AVF)
Flush ligation
Anesthesia for interventional treatment of varicose veins
Tumescent anaesthesia
Popliteal vein aneurysm
Aneurysm. See venous aneurysm
Venous aneurysm
Spiral computed tomography angiography for pulmonary embolism
AngioJet™
Angioma
Cavernous angioma
Percutaneous balloon angioplasty or percutaneous venoplasty
Venous balloon angioplasty
Vitamin K antagonist
<table>
<thead>
<tr>
<th>IT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antagonisti orali della vitamina K</td>
<td>Oral vitamin K antagonists</td>
</tr>
<tr>
<td>Antitrombina (antitrombina III)</td>
<td>Antithrombin (antithrombin III)</td>
</tr>
<tr>
<td>Antocianine Vedere anche Bioflavonoidi</td>
<td>Anthocyanins. See also bioflavonoids</td>
</tr>
<tr>
<td>Apertura della valvola</td>
<td>Valve opening</td>
</tr>
<tr>
<td>Apixaban</td>
<td>Apixaban</td>
</tr>
<tr>
<td>Arco venoso dorsale del piede</td>
<td>Dorsal venous arch of the foot</td>
</tr>
<tr>
<td>Arco venoso palmare profondo</td>
<td>Deep palmar venous arch</td>
</tr>
<tr>
<td>Arco venoso palmare superficiale</td>
<td>Superficial palmar venous arch</td>
</tr>
<tr>
<td>Argatroban</td>
<td>Argatroban</td>
</tr>
<tr>
<td>Atresia venosa</td>
<td>Vein atresia</td>
</tr>
<tr>
<td>Atrofia bianca</td>
<td>White atrophy. See atrophie blanche</td>
</tr>
<tr>
<td>Attivatore tissutale del plasminogeno</td>
<td>Tissue plasminogen activator</td>
</tr>
<tr>
<td>Attivatore tissutale del plasminogeno ricombinante</td>
<td>Recombinant tissue plasminogen activator</td>
</tr>
<tr>
<td>Attivazione leucocitaria</td>
<td>Leukocyte activation</td>
</tr>
<tr>
<td>Aumento della resistenza al flusso in uscita</td>
<td>Increased outflow resistance</td>
</tr>
<tr>
<td>Autotrasporto di una valvola competente nella vena poplitea</td>
<td>Autotransplantation of a competent valve into the popliteal vein. See valve transplantation</td>
</tr>
<tr>
<td>Bandaging/cuff venoso esterno</td>
<td>External venous banding/cuff</td>
</tr>
<tr>
<td>Bendaggi compressivi</td>
<td>Compression bandages</td>
</tr>
<tr>
<td>Bendaggi compressivi elastici</td>
<td>Elastic compression bandages</td>
</tr>
<tr>
<td>Bendaggi compressivi multistrato</td>
<td>Multilayered compression bandages</td>
</tr>
<tr>
<td>Bandaggio a corta estensibilità Vedere bendaggio anelastico</td>
<td>Short-stretch bandage. See inelastic bandage</td>
</tr>
<tr>
<td>Bandaggio adesivo</td>
<td>Adhesive bandage</td>
</tr>
<tr>
<td>Bandaggio anelastico</td>
<td>Inelastic bandage</td>
</tr>
<tr>
<td>Bandaggio UNNA Boot</td>
<td>UNNA boot</td>
</tr>
<tr>
<td>Bandaggio Vedere anche bendaggi compressivi</td>
<td>Bandage. See also compression bandages</td>
</tr>
<tr>
<td>Bioflavonoidi</td>
<td>Bioflavonoids</td>
</tr>
<tr>
<td>Bivalirudina</td>
<td>Bivalirudin</td>
</tr>
<tr>
<td>Bypass crossover</td>
<td>Crossover bypass</td>
</tr>
<tr>
<td>Bypass di MAY-HUSNI Vedere bypass safeno-popliteo</td>
<td>MAY-HUSNI bypass. See Saphenopopliteal bypass</td>
</tr>
<tr>
<td>Bypass femoro-ilio-cavale</td>
<td>Femorilio caval bypass</td>
</tr>
<tr>
<td>Bypass protesico transpubico</td>
<td>Cross-pubic prosthetic bypass</td>
</tr>
<tr>
<td>Bypass safeno-popliteo</td>
<td>Saphenopopliteal bypass</td>
</tr>
<tr>
<td>Bypass venoso</td>
<td>Venous bypass</td>
</tr>
<tr>
<td>Bypass venoso femoro-popliteo e femoro-crurale</td>
<td>Femoropopliteal and femorocrural saphenous vein bypass</td>
</tr>
<tr>
<td>Bypass venoso giugulare-ascellare</td>
<td>Jugular axillary vein bypass</td>
</tr>
<tr>
<td>Calza elastica a compressione graduata</td>
<td>Graduated elastic compression</td>
</tr>
<tr>
<td>Calze antitrombo</td>
<td>Antithrombotic stockings</td>
</tr>
<tr>
<td>Calze compressive</td>
<td>Compression hosiery / Compression stockings</td>
</tr>
<tr>
<td>Calze compressive elastiche</td>
<td>Elastic compression stockings</td>
</tr>
<tr>
<td>Calze compressive medicali</td>
<td>Medical compression stockings</td>
</tr>
<tr>
<td>Cancrera venosa</td>
<td>Venous gangrene</td>
</tr>
<tr>
<td>Capacitanza venosa</td>
<td>Venous capacitance</td>
</tr>
<tr>
<td>Catetere (per radiofrequenza) ClosureFAST™</td>
<td>ClosureFAST™ catheter</td>
</tr>
<tr>
<td>Catetere Oasis®</td>
<td>Oasis® catheter</td>
</tr>
<tr>
<td>Catetere per trombectomia elicoidal X-sizer™</td>
<td>X-sizer™ helical thrombectomy catheter</td>
</tr>
<tr>
<td>Catetere Trellis per trombectomia</td>
<td>Trellis thrombectomy catheter</td>
</tr>
<tr>
<td>Chirurgia a cielo aperto delle vene perforanti o chirurgia a cielo aperto delle perforanti</td>
<td>Perforator vein open surgery or perforator open surgery</td>
</tr>
<tr>
<td><strong>IT</strong></td>
<td><strong>EN</strong></td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Chirurgia delle vene</td>
<td>Venous surgery</td>
</tr>
<tr>
<td>Chirurgia delle vene profonde</td>
<td>Deep venous surgery</td>
</tr>
<tr>
<td>Chirurgia endoscopica delle perforanti Vedere chirurgia endoscopica</td>
<td>Endoscopic perforator surgery. See subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>sottofasciale delle perforanti</td>
<td>Subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Chirurgia endoscopica sotto fasciale delle perforanti</td>
<td>Deep vein reconstructive surgery</td>
</tr>
<tr>
<td>Chirurgia ricostruttiva delle vene profonde</td>
<td>Valve surgery</td>
</tr>
<tr>
<td>Chirurgia valvolare</td>
<td>Venous open surgery</td>
</tr>
<tr>
<td>Chirurgia venosa a cielo aperto</td>
<td>Valve closure</td>
</tr>
<tr>
<td>Chiusura della valvola</td>
<td>Private venous circulation in the lower limb</td>
</tr>
<tr>
<td>Circolazione venosa privata dell’arto inferiore</td>
<td>ClariVein**</td>
</tr>
<tr>
<td>ClariVein®</td>
<td>Clinical classes of the CEAP / CEAP clinical classes</td>
</tr>
<tr>
<td>Classi cliniche CEAP</td>
<td>Basic CEAP classification</td>
</tr>
<tr>
<td>Classificazione CEAP base</td>
<td>Clinical, Etiological, Anatomical, Physiopathological (CEAP) classification</td>
</tr>
<tr>
<td>Classificazione clinica, eziologica, anatomica e fisiopatologica (CEAP)</td>
<td>Advanced clinical, etiological, anatomical, and pathophysiological (CEAP) classification</td>
</tr>
<tr>
<td>Classificazione clinica, eziologica, anatomica e fisiopatologica (CEAP) avanzata</td>
<td>Hamburg classification</td>
</tr>
<tr>
<td>Classificazione di Amburgo</td>
<td>Herman’s classification. See KISTNER’s classification</td>
</tr>
<tr>
<td>Classificazione di Herman Vedere classificazione di KISTNER</td>
<td>KABNICK classification. See also endovenous heat-induced thrombus</td>
</tr>
<tr>
<td>Classificazione di KABNICK Vedere anche trombosi endovenosa indotta da</td>
<td>KISTNER’s classification</td>
</tr>
<tr>
<td>calore</td>
<td>Widmer’s classification</td>
</tr>
<tr>
<td>Classificazione di KABNICK</td>
<td>HACH classification</td>
</tr>
<tr>
<td>Classificazione di Widmer</td>
<td>Venous claudication</td>
</tr>
<tr>
<td>Classificazione HACH</td>
<td>ADAMS-DEWEESE clip or filter</td>
</tr>
<tr>
<td>Claudicazione venosa</td>
<td>Coiling for deep venous reflux</td>
</tr>
<tr>
<td>Clip o filtro di ADAMS-DE WEESE</td>
<td>Valve commissure</td>
</tr>
<tr>
<td>Coiling delle vene ovariche o delle vene pelviche Vedere embolizzazione delle vene pelviche</td>
<td>Saphenous compartment. See egyptian eye</td>
</tr>
<tr>
<td>Coiling per reflusso venoso profondo</td>
<td>Compression compliance</td>
</tr>
<tr>
<td>Commissura della valvola</td>
<td>Venous compliance</td>
</tr>
<tr>
<td>Compartimento safenico Vedere occhio egizio</td>
<td>A component of the CEAP classification</td>
</tr>
<tr>
<td>Compliance alla compressione</td>
<td>C component of the CEAP classification</td>
</tr>
<tr>
<td>Compliance venosa</td>
<td>E component of the CEAP classification</td>
</tr>
<tr>
<td>Componente A della classificazione CEAP</td>
<td>P component of the CEAP classification</td>
</tr>
<tr>
<td>Componente C della classificazione CEAP</td>
<td>Thigh compression</td>
</tr>
<tr>
<td>Componente E della classificazione CEAP</td>
<td>Iliac vein compression</td>
</tr>
<tr>
<td>Componente P della classificazione CEAP</td>
<td>Left renal vein compression. See nutcracker syndrome</td>
</tr>
<tr>
<td>Compressione della coscia</td>
<td>Eccentric compression</td>
</tr>
<tr>
<td>Compressione della vena iliaca</td>
<td>Intermittent pneumatic compression</td>
</tr>
<tr>
<td>Compressione della vena renale sinistra Vedere sindrome dello schiaccianoci</td>
<td>Sequential pneumatic compression</td>
</tr>
<tr>
<td>Compressione della vena cava inferiore</td>
<td>Venous compression / Vein compression</td>
</tr>
<tr>
<td>Congestione delle vene pelviche Vedere sindrome da congestione pelvica</td>
<td>Venous compressibility</td>
</tr>
<tr>
<td>Consigli sullo stile di vita per i disturbi venosi cronici</td>
<td>Congestion in the pelvic veins. See pelvic congestion syndrome</td>
</tr>
<tr>
<td>Continuazione nella vena azygos della vena cava inferiore</td>
<td>Lifestyle advice for chronic venous disorders</td>
</tr>
<tr>
<td>Corni della valvola</td>
<td>Aszygos continuation of the inferior vena cava</td>
</tr>
<tr>
<td></td>
<td>Valve cornua</td>
</tr>
</tbody>
</table>
Corona flebectasia paraplantare
Corona flebectasia Vedere corona flebectasia paraplantare
Corteccia di pino marittimo francese
Costruzione di neoovalvola secondo MALETI
Crampo
Crampo muscolare Vedere crampo
Crampo notturno Vedere crampo
Crio-striping
Crossectomia
Cumarina
Cuspide o cuspide della valvola
Dabigatran (dabigatran etexilato)
Dalteparina (dalteparina sodica)
Danaparoid (danaparoid sodico)
Danno nervoso post-striping
D-dimero
Decomposizione del trombo venoso
Deficit di proteina C
Deficit di proteina S
Dermatite (dermatite da stasi, eczema varicoso)
Dermatite da stasi
Differenziale pressorio braccio/piede
Diosmina
Dispositivi per indossare e togliere (per le calze)
Dispositivo di compressione
Dispositivo di elettrostimolazione del muscolo del polpaccio
Dispositivo per flebectomia motorizzata Vedere flebectomia motorizzata
Disturbi trofici Vedere alterazioni cutanea venose
Disturbi venosi
Disturbi venosi cronici
Dolore
Doppler portatile Vedere anche Eco-doppler ad onda continua
Drenaggio sequenziale
Eco-doppler
Eco-doppler ad onda continua (CWD)
Ecogenicità venosa
Ecografia
Ecografia intravascolare in flebologia
Ecoscleroterapia Vedere scleroterapia ecoguidata
Eczema
Eczema varicoso (eczema gravitazionale, dermatite da stasi)
Edema Vedere edema venoso
Edema venoso (flebedema)
Edoxaban
Effetto di laccio emostatico

Corona phlebectatica paraplantaris
Corona phlebectatica. See corona phlebectatica paraplantaris
French maritime pine bark
MALETI neovalve construction
Cramp
Muscle cramp. See cramp
Night cramp. See cramp
Cryostripping
Crossectomy
Coumarin
Valve cuspid or cusp
Dabigatran (dabigatran etexilate)
Dalteparin (dalteparin sodium)
Danaparoid (danaparoid sodium)
Nerve damage after stripping
D-dimer
Venous thrombus resolution
Protein C deficiency
Protein S deficiency
Dermatitis (venous dermatitis, venous eczema)
Stasis dermatitis
Arm/foot pressure differential
Diosmin
Donning and doffing devices (for stockings)
Compression device
Electrical calf muscle stimulation device
Phlebectomy power device. See powered phlebectomy
Trophic disorders. See venous skin changes
Venous disorders
Chronic venous disorders
Aching / Pain
Hand-held Doppler. See also continuous-wave Doppler
Waterfall drainage
Duplex sonography / Doppler ultrasound. See duplex ultrasonography
Continuous-wave Doppler
Venous echogenicity
Ultrasoundography / Ultrasound
Intravascular ultrasound in phlebology
Echosclerotherapy. See ultrasound-guided sclerotherapy
Eczema
Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)
Edema. See venous edema
Venous edema (flebedema)
Edoxaban
Tourniquet effect
<table>
<thead>
<tr>
<th>IT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effetto VENTURI</td>
<td>VENTURI effect</td>
</tr>
<tr>
<td>Elettrostimolatore neuromuscolare nell’insufficienza venosa cronca</td>
<td>Neuromuscular electric stimulator in chronic venous insufficiency</td>
</tr>
<tr>
<td>Emangiendotelioma</td>
<td>Hemangiendotelioma</td>
</tr>
<tr>
<td>Emangioma</td>
<td>Hemangioma</td>
</tr>
<tr>
<td>Emangioma intraosseo</td>
<td>Intraosseous hemangioma</td>
</tr>
<tr>
<td>Embolectomia</td>
<td>Embole</td>
</tr>
<tr>
<td>Emboli</td>
<td>Embolism</td>
</tr>
<tr>
<td>Embolia</td>
<td>Pulmonary embolism or pulmonary thromboembolism</td>
</tr>
<tr>
<td>Embolia polmonare e infarto polmonare / Tromboembolia del polmone</td>
<td>Embolization</td>
</tr>
<tr>
<td>Embolizzazione</td>
<td>Adhesive embolization. See glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Embolizzazione con adesivo Vedere embolizzazione con colla chirurgica o ablaione con colla/adesivo chirurgico</td>
<td>Cyanoacrylate embolization. See glue embolization</td>
</tr>
<tr>
<td>Embolizzazione con cianoacrilato Vedere embolizzazione con colla chirurgica</td>
<td>Glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Embolizzazione con colla chirurgica o ablaione con colla/adesivo chirurgico</td>
<td>Gonadal vein embolization</td>
</tr>
<tr>
<td>Embolizzazione della vena gonadica</td>
<td>Ovarian vein embolization</td>
</tr>
<tr>
<td>Embolizzazione della vena ovarica</td>
<td>Pelvic vein embolization</td>
</tr>
<tr>
<td>Embolizzazione delle vene pelviche</td>
<td>Venous embryology</td>
</tr>
<tr>
<td>Embriologia venosa</td>
<td>Valve agger. See valvular agger</td>
</tr>
<tr>
<td>Eminenza della valvola Vedere eminenza valvolare</td>
<td>Valvular agger</td>
</tr>
<tr>
<td>Eminenza valolare</td>
<td>Venous hemodynamics</td>
</tr>
<tr>
<td>Emodinamica venosa</td>
<td>Endophlebectomy or endovenectomy</td>
</tr>
<tr>
<td>Endoflebectomia o endovenectomia</td>
<td>Endovenous</td>
</tr>
<tr>
<td>Endovenoso</td>
<td>Enoxaparin</td>
</tr>
<tr>
<td>Enoxaparina</td>
<td>Heparin</td>
</tr>
<tr>
<td>Eparina</td>
<td>Low molecular-weight heparin</td>
</tr>
<tr>
<td>Eparina a basso peso molecolare</td>
<td>Unfractionated heparin</td>
</tr>
<tr>
<td>Eparina non frazionata</td>
<td>Aescin. See horse chestnut seed or root extract</td>
</tr>
<tr>
<td>Escina Vedere estratto di semi o radici di ippocastano</td>
<td>Cranial extension of the small saphenous vein</td>
</tr>
<tr>
<td>Estensione craniale della vena piccola safena</td>
<td>Thigh extension of the small saphenous vein</td>
</tr>
<tr>
<td>Estensione sulla coscia della vena piccola safena</td>
<td>Horse chestnut seed or root extract</td>
</tr>
<tr>
<td>Estratto di semi o radice di ippocastano</td>
<td>Grape seed extract</td>
</tr>
<tr>
<td>Estratto di vinacciolo</td>
<td>Ethanolamine oleate</td>
</tr>
<tr>
<td>Etanolammina oleato</td>
<td>European Society for Vascular Surgery</td>
</tr>
<tr>
<td>European Society for Vascular Surgery</td>
<td>European Venous Forum</td>
</tr>
<tr>
<td>Farmaci per le vene</td>
<td>Venous drugs</td>
</tr>
<tr>
<td>Farmaci vasoattivi</td>
<td>Venoactive drugs</td>
</tr>
<tr>
<td>Farmaci venotonici Vedere farmaci vasoattivi</td>
<td>Venotonic drugs. See venoactive drugs</td>
</tr>
<tr>
<td>Farmaco flebotonico Vedere farmaci venotonici o farmaci vasoattivi</td>
<td>Phlebotonic drug. See venotonic drugs or venoactive drugs</td>
</tr>
<tr>
<td>Farmacoterapia venosa</td>
<td>Venous pharmacotherapy</td>
</tr>
<tr>
<td>Fascectomia nella malattia venosa</td>
<td>Fasciectomy in venous disease</td>
</tr>
<tr>
<td>Fasciatura esterna della vena poplita</td>
<td>Popliteal vein external banding</td>
</tr>
<tr>
<td>Fasciotomia nella malattia venosa</td>
<td>Fasciectomy in venous disease</td>
</tr>
<tr>
<td>Fattore VIII</td>
<td>Factor VIII</td>
</tr>
<tr>
<td>Fattori di rischio di trombosi venosa Vedere fatti di rischio della trombosi venosa profonda</td>
<td>Venous thrombosis risk factors. See risk factors for deep venous thrombosis</td>
</tr>
</tbody>
</table>
Fattori di rischio per insufficienza venosa cronica ($C_3-C_6$)
Fattori di rischio per la recidiva di trombosi venosa profonda
Fattori di rischio per le vene varicose Vedere fattori di rischio per le vene varicose e per insufficienza venosa cronica ($C_3-C_6$)
Fattori di rischio per PREVAIT (presenza di varici dopo trattamento interventistico)
Fattori di rischio per sindrome post-trombotica
Fattori di rischio per trombosi venosa profonda
Fenindione
Fenprocoumon
Fibra radiale a doppio anello
Fibra Vedere fibre laser
Fibra laser
Fibrina
Fibrinolisi
Filtro cavali
Filtro a nido di rondine
Filtro Amplatz per vena cava inferiore
Filtro cavale
Filtro cavale profilattico
Filtro cavale recuperabile
Filtro cavale sovrarenale
Filtro del tulipano di GÜNTER™ Vedere anche filtro GREENFIELD™ e filtro G2
Filtro di recupero in nitinol
Filtro G2 Vedere anche Filtro GREENFIELD™ e Filtro del tulipano di GÜNTER™
Filtro GREENFIELD™ in titanio
Filtro GREENFIELD™ Vedere anche Filtro G2 e Filtro del tulipano di GÜNTER™
Filtro inclinato nella vena cava inferiore
Filtro OptEase®
Filtro vena cava TrapEase®
Fisiologia venosa
Fistola arterovenosa
Fistola arterovenosa temporanea
Flare della caviglia Vedere corona flebectasia paraplantare
Flare malleolare Vedere corona flebectasia paraplantare
Flavonoidi
Flebectasia Vedere anche venectasia e varice, vena varicosà, varicosità
Flebectoma
Flebectoma ambulatoriale
Flebectoma con uncinetto
Flebectoma di MULLER
Flebectoma motorizzata
Flebectoma motorizzata transilluminata
Flebite
Fattori di rischio per la recidiva di trombosi venosa profonda
Fattori di rischio per le vene varicose Vedere fattori di rischio per le vene varicose e per insufficienza venosa cronica ($C_3-C_6$)
Fattori di rischio per PREVAIT (presenza di varici dopo trattamento interventistico)
Fattori di rischio per sindrome post-trombotica
Fattori di rischio per trombosi venosa profonda
Fenindione
Fenprocoumon
Fibra radiale a doppio anello
Fibra Vedere fibre laser
Fibra laser
Fibrina
Fibrinolisi
Filtro cavali
Filtro a nido di rondine
Filtro Amplatz per vena cava inferiore
Filtro cavale
Filtro cavale profilattico
Filtro cavale recuperabile
Filtro cavale sovrarenale
Filtro del tulipano di GÜNTER™ Vedere anche filtro GREENFIELD™ e filtro G2
Filtro di recupero in nitinol
Filtro G2 Vedere anche Filtro GREENFIELD™ e Filtro del tulipano di GÜNTER™
Filtro GREENFIELD™ in titanio
Filtro GREENFIELD™ Vedere anche Filtro G2 e Filtro del tulipano di GÜNTER™
Filtro inclinato nella vena cava inferiore
Filtro OptEase®
Filtro vena cava TrapEase®
Fisiologia venosa
Fistola arterovenosa
Fistola arterovenosa temporanea
Flare della caviglia Vedere corona flebectasia paraplantare
Flare malleolare Vedere corona flebectasia paraplantare
Flavonoidi
Flebectasia Vedere anche venectasia e varice, vena varicosà, varicosità
Flebectoma
Flebectoma ambulatoriale
Flebectoma con uncinetto
Flebectoma di MULLER
Flebectoma motorizzata
Flebectoma motorizzata transilluminata
Flebite

Risk factors for chronic venous insufficiency ($C_3-C_6$)
Risk factors for deep venous thrombosis recurrence
Risk factors for varicose veins
Risk factors for chronic venous disease. See risk factors for varicose veins and for chronic venous insufficiency ($C_3-C_6$)
Risk factors for PREVAIT (PREsence of Varices After Intervventional Treatment)
Risk factors for postthrombotic syndrome
Risk factors for deep venous thrombosis
Phenindione
Fenprocoumon
Double ring radial fiber
Fiber. See laser fibers
Fibrin
Fibrinolysis
Caval filters
Bird’s nest filter
Amplatz inferior vena cava filter
Inferior vena cava filter
Prophylactic caval filter
Retrievable caval filter
Suprarenal caval filter
GUNTER™ tulip filter. See also GREENFIELD™ filter and G2 filter
Recovery nitinol filter
G2 filter. See also GREENFIELD™ filter and GUNTER™ tulip filter
Titanium GREENFIELD™ filter
GREENFIELD™ filter. See also G2 filter and GUNTER™ tulip filter
Tilted inferior vena cava filter
OptEase® filter
TrapEase® vena cava filter
Venous physiology
Arteriovenous fistula
Temporary arteriovenous fistula
Ankle flare. See corona phlebectatica paraplantaris
Malleolar flare. See corona phlebectatica paraplantaris
Flavonoids
Phlebectasia. See also venectasia and varice, varicose vein, and varicosity
Phlebectomy
Ambulatory phlebectomy. See ambulatory stab avulsion
Hook phlebectomy
MULLER’s ambulatory phlebectomy
Powered phlebectomy
Transilluminated powered phlebectomy
Phlebitis
<table>
<thead>
<tr>
<th>IT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flebografia a sottrazione digitale</td>
<td>Digital subtraction phlebography</td>
</tr>
<tr>
<td>Flebografia Vedere venografa</td>
<td>Phlebography. See venography</td>
</tr>
<tr>
<td>Flebografia/venografa ascendente</td>
<td>Ascending phlebography/venography</td>
</tr>
<tr>
<td>Flebografia/venografa discendente</td>
<td>Descending phlebography/venography</td>
</tr>
<tr>
<td>Flebologia</td>
<td>Phlebology</td>
</tr>
<tr>
<td>Flebotomia (venesection, Venotomia)</td>
<td>Phlebotomy (venesection, venotomy)</td>
</tr>
<tr>
<td>Flegmasia alba dolens o gamba bianca</td>
<td>Phlegmasia alba dolens or white leg</td>
</tr>
<tr>
<td>Flegmasia cerulea dolens</td>
<td>Phlegmasia cerulea dolens or painful blue leg</td>
</tr>
<tr>
<td>Flussimetria laser-doppler</td>
<td>Laser doppler flowmetry</td>
</tr>
<tr>
<td>Flusso venoso</td>
<td>Venous flow</td>
</tr>
<tr>
<td>Foglietto valvolare Vedere cuspide o cuspide della valvola</td>
<td>Valve leaflet. See valve cusp or cusp</td>
</tr>
<tr>
<td>Fondaparinux</td>
<td>Fondaparinux</td>
</tr>
<tr>
<td>Formazione di trombo venoso</td>
<td>Venous thrombus formation</td>
</tr>
<tr>
<td>Fotopletismografia</td>
<td>Photoplethysmography</td>
</tr>
<tr>
<td>Fototermolisi</td>
<td>Photothermolysis</td>
</tr>
<tr>
<td>Frazione del flusso in uscita</td>
<td>Outflow fraction</td>
</tr>
<tr>
<td>Frazione di eiezione Vedere anche Volume di eiezione</td>
<td>Ejection fraction. See also ejection volume</td>
</tr>
<tr>
<td>Frazione di volume residuo</td>
<td>Residual volume fraction</td>
</tr>
<tr>
<td>Frazione flavonoica purificata micronizzata (FFPM)</td>
<td>Micronized purified flavonoid fraction (MPFF)</td>
</tr>
<tr>
<td>Frequenza di ripetizione degli impulsi</td>
<td>Pulse repetition frequency</td>
</tr>
<tr>
<td>Funzionalità della pompa venosa</td>
<td>Venous pump function</td>
</tr>
<tr>
<td>Funzionalità della pompa venosa del polpaccio</td>
<td>Venous calf pump function</td>
</tr>
<tr>
<td>Funzionalità valvolare</td>
<td>Valvular function</td>
</tr>
<tr>
<td>Funzionalità venosa</td>
<td>Venous function</td>
</tr>
<tr>
<td>Gamba pesante Vedere pesanteanza</td>
<td>Heavy leg. See heaviness</td>
</tr>
<tr>
<td>Gambali sovrapposti</td>
<td>Superimposed leggings</td>
</tr>
<tr>
<td>Gambe senza riposo</td>
<td>Restless legs</td>
</tr>
<tr>
<td>Gamma-benzopirone Vedere flavonoidi</td>
<td>Gamma benzopyrone. See flavonoids</td>
</tr>
<tr>
<td>Generatore di radiofrequenza</td>
<td>Radiofrequency generator</td>
</tr>
<tr>
<td>Generatore laser</td>
<td>Laser generator</td>
</tr>
<tr>
<td>Giunzione neosafeno-femorale</td>
<td>Neosaphenofemoral junction</td>
</tr>
<tr>
<td>Giunzione safeno-femorale</td>
<td>Saphenofemoral junction</td>
</tr>
<tr>
<td>Giunzione safeno-poplitea</td>
<td>Saphenopopliteal junction</td>
</tr>
<tr>
<td>Glicerina</td>
<td>Glycerin</td>
</tr>
<tr>
<td>Glicerina cromata</td>
<td>Chromated glycerin</td>
</tr>
<tr>
<td>Gonfiore delle gambe da condizione professionale</td>
<td>Occupational leg swelling</td>
</tr>
<tr>
<td>Impressione di gonfiore Vedere sensazione di gonfiore</td>
<td>Impression of swelling. See feeling of swelling</td>
</tr>
<tr>
<td>Incompetenza della vena perforante</td>
<td>Perforator vein incompetence</td>
</tr>
<tr>
<td>Incompetenza valvolare</td>
<td>Valvular incompetence</td>
</tr>
<tr>
<td>Incompetenza venosa</td>
<td>Venous incompetence</td>
</tr>
<tr>
<td>Incompetenza venosa primaria</td>
<td>Primary venous incompetence</td>
</tr>
<tr>
<td>Incompetenza venosa profonda</td>
<td>Deep venous incompetence</td>
</tr>
<tr>
<td>Incompetenza venosa secondaria</td>
<td>Secondary venous incompetence</td>
</tr>
<tr>
<td>Indagini sulla valutazione delle malattie venose e la</td>
<td>Investigating venous disease evaluation and standardization of</td>
</tr>
<tr>
<td>standardizzazione dei test</td>
<td>testing</td>
</tr>
<tr>
<td>Indice di drenaggio venoso</td>
<td>Venous drainage index</td>
</tr>
<tr>
<td>Indice di flusso venoarterioso</td>
<td>Venoarterial flow index</td>
</tr>
<tr>
<td>Indice di massa corporea</td>
<td>Body mass index</td>
</tr>
<tr>
<td>Indice di ricircolazione</td>
<td>Recirculation index</td>
</tr>
<tr>
<td>Indice di riempimento venoso</td>
<td>Venous filling index (VFI)</td>
</tr>
<tr>
<td>Indice di rigidità dinamica</td>
<td>Dynamic stiffness index</td>
</tr>
</tbody>
</table>
IT
Indice di rigidità statica
Indice pressorio caviglia/braccio
Inibitori tissutali delle metalloproteinasi (TIMP)
Iniezione intra-arteriosa di sclerosante
Iniezione intra-arteriosa durante scleroterapia
Insufficienza safenica
Insufficienza venosa cronica
Insufficienza venosa cronica cerebrospinale
Insufficienza venosa superficiale
International Society for the Study of Vascular Anomalies (classificazione delle anomalie vascolari) Vedere anche classificazione di Amburgo
International Union of Phlebology
Intervento chirurgico di ricostruzione venosa
Intrappolamento della vena poplitea
Ipertensione venosa deambulatoria
Ipertensione venosa delle vene perforanti o legatura delle perforanti
Ipoplasia venosa
Irrudina
Laser a diodo
Laser ad alessandrite a impulso lungo
Laser KTP
Laser ND-YAG (cristallo di ittrio e alluminio drogato al neodimio)
Laser YAG Vedere laser ND-YAG
Legatura alta
Legatura alta e divisione
Legatura alta e stripping
Legatura della vena perforante di COCKETT’s
Legatura delle vene perforanti o legatura delle perforanti
Legatura venosa
Leiomiosarcoma
Leprirudina
Lesione non trombotica della vena iliaca
Linee guida della European Society for Vascular Surgery per le flebopatie croniche
Linee guida dell’American Venous Forum / Society for Vascular Surgery
Linee guida NICE per il trattamento delle vene varicose
Lipedema
Lipodermatosclerosi
Luce pulsata intensa
Lume venoso
Lunghezze d’onda del laser specifiche per l’emoglobina
Lunghezze d’onda laser specifiche per acqua
Macchia color vino porto
Malattia di BEHÇET
Malattia di BUERGER

EN
Static stiffness index
Ankle brachial index or ankle-brachial pressure index
Tissue inhibitors of metalloproteinases (TIMPs)
Intra-arterial injection of sclerosant
Arterial injection during sclerotherpay
Saphenous insufficiency
Chronic venous insufficiency
Chronic cerebrospinal venous insufficiency
Superficial venous insufficiency
International Society for the Study of Vascular Anomalies (classification of vascular anomaly). See also Hamburg classification
International Union of Phlebology
Venous reconstructive surgery
Popliteal vein entrapment
Skin hyperpigmentation
Ambulatory venous hypertension
Venous hypertension. See also ambulatory venous hypertension
Venous hypoplasia
Hirudin
Diode laser
Alexandrite long-pulse laser / Long-pulse Alexandrite laser
KTP laser
ND-YAG laser (neodymium-doped yttrium aluminum garnet)
YAG laser. See ND-YAG laser
High ligation
High ligation and division
High ligation and stripping
COCKETT’s perforator vein ligation
Perforator vein ligation or perforator ligation
Venous ligation
Leiomyosarcoma
Leprirudin
Nonthrombotic iliac vein lesion
European Society for Vascular Surgery guidelines for chronic venous disease
American Venous Forum / Society for Vascular Surgery guidelines
NICE guidelines for varicose vein treatment
Lipedema
Lipodermatosclerosis
Intense pulsed light
Venous lumen
Hemoglobin-specific laser wavelengths
Water-specific laser wavelengths
Port-wine stain
BEHÇET’s disease
BUERGER’s disease
IT

Malattia di MONDOR
Malattia venosa
di MONDOR
Malattia venosa cronica
Malformazione arterovenosa
di MONDOR
Malformazione capillare
di MONDOR
Malformazione linfatica
di MONDOR
Malformazione tronculare
di MONDOR
Malformazione vascolare congenita
di MONDOR
Malformazione venosa
di MONDOR
Malformazione venosa extratrunculare
di MONDOR
Malformazione venosa intraossea
di MONDOR
Manovra di Paranà
di MONDOR
Manovra di trasferimento del peso
di MONDOR
Manovra di Valsalva
di MONDOR
Manovra in punta di piedi
di MONDOR
Mappatura ecografica
di MONDOR
Mastociti nella malattia venosa cronica
di MONDOR
Matting
di MONDOR
Matting teleanectasico
di MONDOR
Metalloproteinasi di matrice
di MONDOR
Microflebectomia Vedere flebectomia ambulatoriale o
di MONDOR
Flebectomia di MULLER
di MONDOR
Milking Test
di MONDOR
Misurazione emodinamica venosa
di MONDOR
Monitoraggio ecografico
di MONDOR
Mutazione di Leiden del fattore V, eterozigote, omozigote
di MONDOR
National Institute for health and Care Excellence (NICE)
Vedere linee guida NICE per il trattamento delle vene
di MONDOR
varicose
Necrosi cutanea dopo scleroterapia
di MONDOR
Neovalvola (autologa)
di MONDOR
Neovascolarizzazione
di MONDOR
Obliterazione venosa
di MONDOR
Occlusione della vena ileo-cavale
di MONDOR
Occlusione della vena iliaca
di MONDOR
Occlusione venosa
di MONDOR
Ombrello di MOBIN-UDDIN
di MONDOR
Operazione di LINTON Vedere anche chirurgia endoscopica
di MONDOR
sottofasciale delle perforanti
Operazione di Warren Vedere bypass femoro-popliteo o
di MONDOR
femoro-crurale della safena
Operazione PALMA Vedere trasposizione femoro-femorale
di MONDOR
vena safena
Ossigenoterapia iperbarica nelle ulceri varicose
di MONDOR
Ostruzione del flusso in uscita
di MONDOR
Ostruzione della vena ileo-cavale
di MONDOR
Ostruzione della vena iliaca
di MONDOR
Ostruzione venosa
di MONDOR

EN

MONDOR’s disease
Venous disease
Chronic venous disease
Arteriovenous malformation
Capillary malformation
Lymphatic malformation
Truncular malformation
Congenital vascular malformation
Venous malformation
Extratruncular venous malformation
Intraosseous venous malformation
Paranà maneuver
Weight transfer maneuvers
Valsalva maneuver
Tiptoe maneuver
Ultrasound mapping
Mast cells in chronic venous disease
Matting
Telangiectatic matting
Matrix metalloproteinases
Microphlebectomy. See ambulatory stab avulsion or
MULLER’s phlebectomy
Milking test
Venous hemodynamic measurement
Ultrasound monitoring
Factor V Leiden mutation (heterozygous, homozygous)
National Institute for health and Care Excellence (NICE).
See NICE guidelines for varicose vein
treatment
Cutaneous necrosis after sclerotherapy
Neovalve (autogenous)
Neovascularization
Venous obliteration
Egyptian eye
Saphenous eye. See egyptian eye
Iliac vein occlusion
Iliac vein occlusion
Vein occlusion. See venous occlusion
MOBIN-UDDIN umbrella
LINTON’s operation. See also subfascial endoscopic
perforator surgery
Warren operation. See femoropopliteal or
femorocrural saphenous vein bypass
PALMA operation. See femorofemoral saphenous vein
transposition
Oxygen, hyperbaric treatment of venous ulcers
Outflow obstruction
Iliocaval vein obstruction
Iliac vein obstruction
Vein obstruction. See venous obstruction
IT

Ostruzione venosa primaria non trombotica Vedere lesione non trombotica della vena iliaca

Ostruzione venosa profonda

Output della pompa del polpaccio

Parte posterolaterale della vena perforante posteriore della coscia

Parte posteromediale della vena perforante posteriore della coscia

Patch in politetrafluoroetilene per contenere la neovascolarizzazione

Patogenesi delle varici

Paziente C-os

Pentossifillina

Pervietà secondaria

Pesantezza

Piattaforma basculante

Picco di velocità del reflusso

Pigmentazione/Iperpigmentazione

Pin-stripper

Pin-stripping

Plesso pampiniforme

Plesso pudendo (vesico-prostatico) (nell’uomo)

Plesso venoso della prostata (nell’uomo)

Plesso venoso rettale esterno sacrale

Plesso venoso rettale interno sacrale

Plesso venoso uterino (nella donna)

Plesso venoso vaginale (nella donna)

Pletismografia ad impedenza

Pletismografia ad occlusione

Pletismografia con estensimetro

Pletismografia dinamica ad aria

Pletismografia venosa

Pletismografia Vedere anche pletismografia dinamica ad aria, fotopletismografia e pletismografia ad occlusione

Polidocanolo

Pompa muscolare del piede

Pompa muscolare del polpaccio o pompa del polpaccio

Posizione di TRENDELENBURG

Power Pulse AngioJet™ Vedere anche AngioJet™

Presenza di varici dopo trattamento interventistico (PREVAIT)

Pressione di compressione

Pressione di compressione attiva

Pressione di interfaccia

Pressione idrostatica

Pressione intramuscolare

Pressione venosa

Pressione venosa deambulatoria

Pressione venosa dinamica

Prevenzione/profilassi della trombosi venosa profonda

Procedura endovenosa Vedere tecnica endovenosa

Procedura PSATAKIS con sling silastico

EN

Nonthrombotic vein primary obstruction. See nonthrombotic iliac vein lesion

Deep venous obstruction

Calf pump output

Posterior thigh perforator vein posterolateral

Posterior thigh perforator vein posteromedial

Polytetrafluoroethylene patch for containing neovascularization

Varices pathogenesis

C-os patient

Pentoxifylline

Secondary patency

Heaviness

Tilt table

Peak reflux velocity

Pigmentation or hyperpigmentation

PIN stripper

PIN stripping

Pampiniform plexus

Pudendal (vesico-prostatic) plexus (male)

Prostatic venous plexus (male)

Sacral venous external rectal plexus

Sacral venous internal rectal plexus

Uterine venous plexus (female)

Vaginal venous plexus (female)

Impedance plethysmography

Occlusion plethysmography

Strain-gauge plethysmography

Air Plethysmography

Venous plethysmography

Plethysmography. See also air plethysmography, photoplethysmography and occlusion plethysmography

Polidocanol

Foot muscle pump

Calf muscle pump or calf pump

TRENDELENBURG position

Power pulse Angiojet™. See also AngioJet™

PRÉsence of Varices After Interventional Treatment (PREVAIT)

Compression pressure

Working compression pressure

Interface pressure

Hydrostatic pressure

Intramuscular pressure

Venous pressure

Ambulatory venous pressure

Dynamic venous pressure

Deep vein thrombosis prevention/prophylaxis

Endovenous procedure. See endovenous technique

PSATAKIS silastic sling procedure
<table>
<thead>
<tr>
<th>IT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prostaciclina</td>
<td>Prostacyclin</td>
</tr>
<tr>
<td>Prurigine</td>
<td>Pruritis. See itching</td>
</tr>
<tr>
<td>Pulsante</td>
<td>Throbbing</td>
</tr>
<tr>
<td>Punteggio Aberdeen sulla gravità delle vene varicose</td>
<td>Aberdeen Varicose Vein Severity Score</td>
</tr>
<tr>
<td>Punteggio anatomico Vedere punteggio della malattia venosa segmentaria</td>
<td>Anatomic score. See venous segmental disease score</td>
</tr>
<tr>
<td>Punteggio clinico di Anversa per l’embolia polmonare</td>
<td>Antwerp clinical score for pulmonary embolism</td>
</tr>
<tr>
<td>Punteggio del dolore</td>
<td>Pain score</td>
</tr>
<tr>
<td>Punteggio della gravità clinica venosa</td>
<td>Venous clinical severity score (VCSS)</td>
</tr>
<tr>
<td>Punteggio della gravità venosa</td>
<td>Venous severity scoring</td>
</tr>
<tr>
<td>Punteggio della malattia venosa segmentale</td>
<td>Venous segmental disease score</td>
</tr>
<tr>
<td>Punteggio di CAPRINI</td>
<td>CAPRINI score</td>
</tr>
<tr>
<td>Punteggio di disabilità venosa</td>
<td>Venous disability score</td>
</tr>
<tr>
<td>Punteggio di Homburg della gravità delle vene varicose</td>
<td>Homburg varicose vein severity score</td>
</tr>
<tr>
<td>Punteggio di Wells</td>
<td>Wells score</td>
</tr>
<tr>
<td>Punteggio VILLALTA</td>
<td>VILLALTA score</td>
</tr>
<tr>
<td>Punto di fuga</td>
<td>Escape point</td>
</tr>
<tr>
<td>Puntura, cannulazione ecoguidata</td>
<td>Ultrasound-guided puncture, cannulation</td>
</tr>
<tr>
<td>Qualità della vita nella malattia venosa</td>
<td>Quality of life in venous disease</td>
</tr>
<tr>
<td>Quantificazione del reflusso</td>
<td>Reflux quantification</td>
</tr>
<tr>
<td>Questionario Aberdeen sulle vene varicose</td>
<td>Aberdeen Varicose Vein Questionnaire</td>
</tr>
<tr>
<td>Questionario di Charing Cross sulle ulcere venose</td>
<td>Charing Cross Venous Ulcer Questionnaire</td>
</tr>
<tr>
<td>Questionario sulla qualità della vita in presenza di ulcere varicose della gamba</td>
<td>Venous leg ulcer quality of life questionnaire</td>
</tr>
<tr>
<td>Radiologia interventistica (in flebologia)</td>
<td>Interventional radiology (in phlebology)</td>
</tr>
<tr>
<td>Recupero del filtro</td>
<td>Filter retrieval</td>
</tr>
<tr>
<td>Reflusso della vena ureterica</td>
<td>Ureteric vein reflux</td>
</tr>
<tr>
<td>Reflusso assiale</td>
<td>Axial reflux</td>
</tr>
<tr>
<td>Reflusso della vena ovarica o incompetenza della vena ovarica</td>
<td>Ovarian vein reflux or ovarian vein incompetence</td>
</tr>
<tr>
<td>Reflusso delle vene pelviche</td>
<td>Pelvic vein reflux</td>
</tr>
<tr>
<td>Reflusso o incompetenza venosa superficiale</td>
<td>Superficial venous reflux or incompetence</td>
</tr>
<tr>
<td>Reflusso residuo</td>
<td>Residual reflux</td>
</tr>
<tr>
<td>Reflusso safenico</td>
<td>Saphenous reflux</td>
</tr>
<tr>
<td>Reflusso segmentario</td>
<td>Segmental reflux</td>
</tr>
<tr>
<td>Reflusso valvolare</td>
<td>Valvular reflux</td>
</tr>
<tr>
<td>Reflusso venoso</td>
<td>Venous blow down/ Venous blow out. See venous reflux</td>
</tr>
<tr>
<td>Reflusso venoso profondo</td>
<td>Deep venous reflux</td>
</tr>
<tr>
<td>Reflusso venoso profondo e reflusso venoso superficiale associati</td>
<td>Associated deep and superficial venous reflux</td>
</tr>
<tr>
<td>Resezione della prima costa</td>
<td>First rib resection</td>
</tr>
<tr>
<td>Resistenza del flusso venoso in uscita</td>
<td>Venous outflow resistance</td>
</tr>
<tr>
<td>Rete di vene varicose inguinale Vedere anche neovascularizzazione</td>
<td>Groin varicose network. See also neovascularization</td>
</tr>
<tr>
<td>Rete varicosa della cavità poplitea</td>
<td>Popliteal fossa varicose network</td>
</tr>
<tr>
<td>Rete venosa dorsale del piede</td>
<td>Dorsal venous network of the foot</td>
</tr>
<tr>
<td>Rete venosa plantare sottocutanea</td>
<td>Plantar venous subcutaneous network</td>
</tr>
<tr>
<td>Reviparina (clivarina)</td>
<td>Reviparin (clivarine)</td>
</tr>
<tr>
<td>Ricircolo nella safena</td>
<td>Saphenous recirculation</td>
</tr>
<tr>
<td>Ricostruzione della vena cava inferiore sovrarenale</td>
<td>Suprarenal inferior vena cava reconstruction</td>
</tr>
<tr>
<td>Ricostruzione valvolare</td>
<td>Valve reconstruction</td>
</tr>
</tbody>
</table>
TERMS IN OTHER LANGUAGES - ITALIAN

**IT**

- Ricostruzioni chirurgiche aperte per occlusione non maligna della vena cava
- Riflesso di vasocostrizione posturale Vedere riflesso veno-arterioso
- Riflesso veno-arterioso (riflesso di vasocostrizione posturale)
- Riflusso venoso Vedere reflusso venoso
- Rigidità
- Rigidità della caviglia
- Rimodellamento della parete venosa
- Riparazione chirurgica dell’incompetenza valvolare venosa profonda
- Riparazione della valvola TRIPATHI a botola
- Riparazione valvolare Vedere ricostruzione valvolare
- Risposta specifica sugli esiti della qualità della vita- condizioni venose
- Risposta veno-arteriolare
- Rivaroxaban
- Scala GINSBERG
- Schiuma sclerosante biomatrice
- Schiuma/mousse sclerosante
- Scintigrafia perfusionale
- Scintigrafia ventilatoria e perfusionale
- Scleroterapia
- Scleroterapia con liquidi
- Scleroterapia con microfoam Vedere scleroterapia con schiuma
- Scleroterapia con schiuma ecoguidata
- Scleroterapia con schiuma Vedere anche scleroterapia
- Scleroterapia ecoguidata
- Scleroterapia in anestesia locale tumescente di vene reticolari e teleangectasia (START)
- Segno di allineamento
- Segno di HOMANS
- Segno di Topolino
- Seno valvolare
- Sensazione di calore o di bruciore
- Sensazione di gonfiore
- Sensazione di prurito
- SEPS Vedere chirurgia endoscopica sottofasciale delle perforanti
- Sindrome compartimentale nella malattia venosa
- Sindrome da antifosfolipidi
- Sindrome da congestione pelvica
- Sindrome della classe economica Vedere tromboembolia venosa collegata a viaggi in aereo
- Sindrome della vena cava superiore
- Sindrome dello sbocco toracico
- Sindrome dello schiaccianoci
- Sindrome di ACHENBACH
- Sindrome di BUDD-CHIARI
- Sindrome di COCKETT Vedere sindrome di MAY-THURNER

**EN**

- Open surgical reconstructions for nonmalignant occlusion of the vena cava
- Postural vasoconstriction reflex. See vеноarterial reflex
- Venoarterial reflex (postural vasoconstriction reflex)
- Venous back flow. See venous reflux
- Tightness
- Ankle stiffness
- Vein wall remodeling
- Surgical repair of deep venous valve incompetence
- TRIPATHI trap door valve repair
- Valve repair. See valve reconstruction
- Specific quality of life outcome response-venous
- Venoarteriolar response
- Rivaroxaban
- GINSBERG scale
- Biomatrix sclerofoam
- Sclerosing foam
- Perfusion scintigraphy
- Ventilation-perfusion scintigraphy
- Sclerotherapy
- Liquid sclerotherapy
- Microfoam sclerotherapy. See foam sclerotherapy
- Ultrasound-guided foam sclerotherapy
- Foam sclerotherapy. See also sclerotherapy
- Ultrasound-guided sclerotherapy
- Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)
- Alignment sign
- HOMANS sign
- Mickey Mouse sign
- Valve sinus
- Heat or burning sensation
- Feeling of swelling
- Itching
- SEPS. See subfascial endoscopic perforator surgery
- Compartment syndrome in venous disease
- Antiphospholipid syndrome
- Pelvic congestion syndrome
- Economy class syndrome. See air travel-related venous thromboembolism
- Superior vena cava syndrome
- Thoracic outlet syndrome
- Nutcracker syndrome
- ACHENBACH’s syndrome
- BUDD-CHIARI syndrome
- COCKETT syndrome. See also MAY-THURNER syndrome
Sindrome di GULLMO Vedere sindrome ostruttiva da sforzo
Sindrome di KASABACH-MERRITT
Sindrome di KLIPPEL-TRENAUNAY
Sindrome di MAFFUCCI
Sindrome di MAY-THURNER
Sindrome di PAGET-Von SCHRÖTTER
Sindrome di PARKES-WEBER
Sindrome di SERVELLE-MARTORELL
Sindrome di STURGE-WEBER
Sindrome ostruttiva da sforzo
Sindrome post-trombotica o malattia post-trombotica
Sindrome venosa dello sbocco toracico Vedere anche sindrome di PAGET-Von SCHRÖTTER
Sintomi a carico delle gambe Vedere sintomi venosi
Sintomi venosi
Sistema a doppia siringa
Sistema delle vene azigos
Sistema di cateteri per infusione Lysus (EKOS)
Sistema EKOS™ per trombolisi eco-assistita
Sistema per punteggio clinico, punteggio di gravità clinica
Sistema venoso
sistema venoso di ALBANESE
Sistema venoso laterale Vedere sistema venoso di ALBANESE
Sistemi per trombectomia rotazionale Cleaner
Sodio morruato
Sodio tetradecilsolfato
Soletta di LEJARS
Soluzione tumescente
Stanchezza
Stenosi di Rokitansky
Stenosi venosa
Stent autoespandibile
Stent con palloncino gonfiabile
Stent GIANTURCO
Stent in nitinol
Stenting della vena iliaca
Stenting venoso
Stockinette impregnata con pasta allo zinco
Streptochinasi
Strip Test per la competenza valvolare Vedere milking Test
Stripper OESCH Vedere pin-striped
Stripper Perforate INvaginate (PIN) Vedere pin-striped
Stripping Perforate INvaginate (PIN) Vedere pin-stripping
Stripping venoso
Strutture valvolari di EISEMANN e MALETTE Vedere valvola venosa autologa
Studi epidemiologici ed economici sull’insufficienza venosa (VEINES)
Studio PREPIC

EN

GULLMO’s syndrome. See strain obstruction syndrome
KASABACH-MERRIT syndrome
KLIPPEL-TRENAUNAY syndrome
MAFFUCCI syndrome
MAY-THURNER syndrome
PAGET-von SCHRÖTTER syndrome
PARKES WEBER syndrome
SERVELLE-MARTORELL syndrome
STURGE-WEBER syndrome
Strain obstruction syndrome
Postthrombotic syndrome or postthrombotic disease
Venous thoracic outlet syndrome. See also PAGET-von SCHRÖTTER syndrome
Leg symptoms. See venous symptoms
Venous symptoms
Double syringe system
Azigos system
Lysus infusion catheter system (EKOS)
EKOS™ ultrasound-assisted thrombolysis system
Clinical scoring system, clinical severity score
Venous system
ALBANESE venous system
Lateral venous system. See ALBANESE venous system
Cleaner rotational thrombectomy systems
Sodium morrhuate
Sodium tetradecyl sulfate
LEJARS’ sole
Tumescent solution
Fatigue
Rokitansky stenosis
Venous stenosis
Self-expanding stent
Balloon-expanding stent
GIANTURCO stent
Nitinol stent
Iliac vein stenting
Venous stenting
Zinc paste impregnated stockinette
Streptokinase
Strip test for valve competence. See milking test
OESCH stripper. See PIN stripper
Perforate INvaginate (PIN) stripper. See PIN stripper
Perforate INvaginate (PIN) stripping. See PIN stripping
Saphenous stripping
Venous stripping
EISEMANN and MALETTE valve-like structures. See autologous vein valve
Venous insufficiency epidemiological and economic studies (VEINES)
PREPIC study
TERMS IN OTHER LANGUAGES - ITALIAN

IT

Studio PREPIC 2 Vedere studio PREPIC
Studio sulla chirurgia endoscopica subfasciale delle perforanti (SEPS) - Nord America
Studio venoso Edinburgh
Sutura venosa
Tecnica dell’Air-block
Tecnica endovenosa
Tecnica pulse-spray in trombolisi Vedere anche AngioJet™
Tecnica TESSARI
Telangiectasia
Tempo di chiusura della valvola
Tempo di riempimento
Tempo di riempimento venoso Vedere tempo di riempimento
Teoria ascendente delle vene varicose
Teoria discendente nella patogenesi delle vene varicose
Teoria parietale della patogenesi delle vene varicose
Terapia anticoagulante orale
Terapia compressiva
Terapia compressiva per ulcere varicose
Terapia fibrinolitica
Terapia laser percutanea per teleangectasia e vene varicose
Termoterapia indotta da radiofrequenza
Test di PERTHES
Test di TRENDELENBURG
Tinzaparina
Tomografia computerizzata nella malattia venosa
Trapianto di segmento venoso o trasferimento di segmento venoso Vedere trapianto valvolare
Trapianto valvolare
Trasferimento di segmento venoso Vedere trapianto valvolare
Trasferimento o trapianto della vena ascellare
Trasposizione femoro-femorale della vena safena
Trasposizione venosa di KISTNER
Trasposizione venosa Vedere trasposizione venosa di KISTNER
Trattamento (o terapia) all’ossigeno iperbarico delle ulcere venose
Trattamento con larve (terapia di sbriaglio con larve)
Trattamento conservativo emodinamico ambulatoriale delle vene varicose
Trattamento conservativo nella malattia venosa
Trattamento endotermeco
Trattamento endovenoso
Trattamento laser endovenoso Vedere ablazione laser endovenosa delle vene safene
Trattamento tromboliitico venoso
Triade di VIRCHOW
TriVex Vedere flebectomia motorizzata transilluminata
Trombectomia meccanica
Trombectomia meccanica percutanea

EN

PREPIC 2 study. See PREPIC study
North American subfascial endoscopic perforator surgery (SEPS) study
Edinburgh vein study
Venesuture
Air-block technique
Endovenous technique
Pulse-spray technique in thrombolysis. See also AngioJet™
TESSARI technique
Telangiectasia
Valve closure time
Refilling time
Venous refill time. See refilling time
Ascending theory for varicose veins
Descending theory in the pathogenesis of varicose veins
Parietal theory of varicose vein pathogenesis
Oral anticoagulant therapy
Compression therapy
Compression therapy for venous ulcers
Fibrinolytic therapy
Percutaneous laser therapy for telangiectasia and varicose veins
Radiofrequency-induced thermotherapy
PERTHES test
TRENDELENBURG test
Tinzaparin
Computed tomography in venous disease
Vein segment transplantation or vein segment transfer. See valve transplantation
Valve transplantation
Venous segment transfer. See valve transplantation
Axillary vein transfer or transplantation
Femorofemoral saphenous vein transposition
KISTNER’S vein transposition
Vein transposition. See KISTNER’s vein transposition
Hyperbaric oxygen treatment (or therapy) of venous ulcers
Maggot treatment (maggot debridement therapy)
Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire
Conservative treatment in venous disease
Endovenous treatment
Endovenous laser treatment. See endovenous laser ablation of saphenous veins
Venous thrombolytic treatment
VIRCHOW’s triad
Trivex. See transilluminated powered phlebectomy
Mechanical thrombectomy
Percutaneous mechanical thrombectomy
Trombectomia operatoria ibrida
Trombectomia percutanea con dispositivo Arrow-TREROTOLATM
Trombectomia venosa
Trombectomia venosa chirurgica
Trombo endovenoso indotto da calore Vedere classificazione di KABNICK
Trombo libero
Trombo venoso Vedere anche trombosi venosa
Trombocitopenia indotta da eparina
Tromboemboolia venosa
Tromboemboolia venosa collegata a viaggi in aereo
Trombofilia
Tromboflebite
Tromboflebite superficiale Vedere tromboflebite venosa superficiale
Tromboflebite venosa superficiale Vedere trombosi venosa superficiale
Trombolisi catetere-diretta
Trombolisi farmacomecanica
Trombolisi Vedere trattamento trombolitico venoso
Tromboprofilassi venosa
Tromboi collegata all’uso di contraccettivi orali
Trombosi da sforzo Vedere sindrome di PAGET-Von SCHRÖTTER
Trombosi della vena cava inferiore
Trombosi della vena mesenterica
Trombosi indotta da calore Vedere trombo endovenoso indoto da calore
Trombosi prossimale
Trombosi venosa
Trombosi venosa del polpaccio, trombosi venosa profonda isolata nel polpaccio
Trombosi venosa profonda
Trombosi venosa profonda acuta Vedere trombosi venosa profonda
Trombosi venosa profonda dell’estremità superiore
Trombosi venosa profonda e trombosi venosa superficiale concomitanti
Trombosi venosa profonda femoro-poplitea Vedere anche trombosi venosa profonda
Trombosi venosa profonda ilio-femorale
Trombosi venosa profonda ricorrente
Trombosi venosa suddclavio-ascellare o Sindrome di PAGET-Von SCHRÖTTER
Trombosi venosa superficiale
Ulcera della gamba Vedere ulcera varicosa della gamba
Ulcera di MARJOLIN
Ulcera di MARTORELL
Ulcera mista venosa/arteriosa
Ulcera varicosa attiva Vedere ulcera varicosas della gamba
Ulcera varicosas della gamba

EN

- Hybrid operative thrombectomy
- Arrow-TREROTOLATM percutaneous thrombectomy
- Venous thrombectomy
- Surgical venous thrombectomy
- Endovenous heat-induced thrombus. See KABNICK classification
- Free-floating thrombus
- Venous thrombus. See also venous thrombosis
- Heparin-induced thrombocytopenia
- Venous thromboembolism
- Air travel-related venous thromboembolism
- Thrombophilia
- Thrombophlebitis
- Superficial thrombophlebitis. See superficial venous thrombophlebitis
- Superficial venous thrombophlebitis. See superficial vein thrombosis
- Catheter-directed thrombolysis
- Pharmacomechanical thrombolysis
- Thrombolysis. See venous thrombolytic treatment
- Venous thrombophylaxis
- Oral contraceptive-related thrombosis
- Effort thrombosis. See PAGET-von SCHRÖTTER syndrome
- Inferior vena cava thrombosis
- Mesenteric vein thrombosis
- Heat-induced thrombosis. See endovenous heat-induced thrombus
- Proximal thrombosis
- Venous thrombosis
- Calf vein thrombosis, deep vein thrombosis isolated in the calf
- Deep venous thrombosis. See deep vein thrombosis
- Acute deep vein thrombosis. See deep vein thrombosis
- Upper extremity deep vein thrombosis
- Concomitant superficial and deep venous thrombosis
- Femoropopliteal deep vein thrombosis. See also deep vein thrombosis
- Iliofemoral deep venous thrombosis
- Recurrent deep venous thrombosis
- Axillo-subclavian vein thrombosis also called PAGET-von SCHRÖTTER syndrome
- Superficial vein thrombosis
- Leg ulcer. See venous leg ulcer
- MARJOLIN’s ulcer
- MARTORELL’s ulcer
- Mixed arterial and venous ulcer
- Active venous ulcer. See venous leg ulcer
- Venous leg ulcer
<table>
<thead>
<tr>
<th>IT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uncinetto per flebectomia</td>
<td>Phlebectomy hook</td>
</tr>
<tr>
<td>Urochinasi</td>
<td>Urokinase</td>
</tr>
<tr>
<td>Valvola bicuspide venosa</td>
<td>Venous bicuspid valve</td>
</tr>
<tr>
<td>Valvola bioprotesica venosa</td>
<td>Venous bioprothetic valve</td>
</tr>
<tr>
<td>Valvola di PAVCNIK</td>
<td>PAVCNIK valve</td>
</tr>
<tr>
<td>Valvola di Portland o valvola di PAVCNIK</td>
<td>Portland valve or PAVCNIK valve</td>
</tr>
<tr>
<td>Valvola per alloinnesto</td>
<td>Allograft valve</td>
</tr>
<tr>
<td>Valvola per xenotripsiante</td>
<td>Xenograft valve</td>
</tr>
<tr>
<td>Valvola preterminale della giunzione safeno-femorale</td>
<td>Saphenofemoral junction preterminal valve</td>
</tr>
<tr>
<td>Valvola preterminale della giunzione safeno-poplitea</td>
<td>Saphenopopliteal junction preterminal valve</td>
</tr>
<tr>
<td>Valvola reflussiva Vedere incompetenza valvolare</td>
<td>Refluxive valve. See valvular incompetence</td>
</tr>
<tr>
<td>Valvola terminale della giunzione safeno-femorale</td>
<td>Saphenofemoral junction terminal valve</td>
</tr>
<tr>
<td>Valvola terminale della giunzione safeno-poplitea</td>
<td>Saphenopopliteal junction terminal valve</td>
</tr>
<tr>
<td>Valvola terminale Vedere valvola terminale della giunzione</td>
<td>Terminal valve. See saphenofemoral junction</td>
</tr>
<tr>
<td>Valvola terminale della giunzione safeno-femorale e valvola</td>
<td>terminal valve and saphenopopliteal junction</td>
</tr>
<tr>
<td>Valvola venosa</td>
<td>Venous valve</td>
</tr>
<tr>
<td>Valvola venosa artificiale</td>
<td>Artificial venous valve</td>
</tr>
<tr>
<td>Valvola venosa autologa</td>
<td>Autologous vein valve</td>
</tr>
<tr>
<td>Valvola venosa protesica</td>
<td>Prosthetic venous valve</td>
</tr>
<tr>
<td>Valvole Vedere valvola venosa</td>
<td>Valve. See venous valve</td>
</tr>
<tr>
<td>Valvoloplastica</td>
<td>Cryopreserved venous valves</td>
</tr>
<tr>
<td>Valvoloplastica con manicotto protesico</td>
<td>Valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica di KISTNER</td>
<td>Prosthetic sleeve valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica di Raju</td>
<td>KISTNER’s valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica di SOTTIURAI</td>
<td>Raju’s valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica esterna/extraluminale</td>
<td>SOTTIURAI’s valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica interna</td>
<td>External / extraluminal valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica transcommissurale</td>
<td>Internal valvuloplasty</td>
</tr>
<tr>
<td>Valvoloplastica transmurale</td>
<td>Transcommissural valvuloplasty</td>
</tr>
<tr>
<td>Variazione posturale del diametro</td>
<td>Transmural valvuloplasty</td>
</tr>
<tr>
<td>Varice ricorrente o vena varicoso ricorrente</td>
<td>Postural diameter change</td>
</tr>
<tr>
<td>Varice, vena varicoso, varicosità</td>
<td>Recurrent varice or recurrent varicose vein</td>
</tr>
<tr>
<td>Varici del legamento rotondo</td>
<td>Varice, varicose vein, varicosity</td>
</tr>
<tr>
<td>Varici pelviche</td>
<td>Round ligament varices</td>
</tr>
<tr>
<td>Varici perineali</td>
<td>Pelvic varices</td>
</tr>
<tr>
<td>Varici pudende</td>
<td>Perineal varicosities</td>
</tr>
<tr>
<td>Varici ricorrenti dopo intervento chirurgico (REVAS)</td>
<td>Pudendal varicose veins</td>
</tr>
<tr>
<td>Varici subdermiche Vedere teleanectasia</td>
<td>Recurrent varices after surgery (REVAS)</td>
</tr>
<tr>
<td>Varicocele</td>
<td>Subdermal varices. See telangiectasia</td>
</tr>
<tr>
<td>Varicografia</td>
<td>Varicocele</td>
</tr>
<tr>
<td>Varicosità pelvica Vedere varici pelviche</td>
<td>Varicography</td>
</tr>
<tr>
<td>Varicosità Vedere varice, vena varicosa, varicosità</td>
<td>Pelvic varicosity. See pelvic varices</td>
</tr>
<tr>
<td>Vellichio</td>
<td>Varicosity. See varice, varicose vein, varicosity</td>
</tr>
<tr>
<td>Vena</td>
<td>Tingling</td>
</tr>
<tr>
<td>Vena accessoria anteriore della vena grande safena</td>
<td>Vein</td>
</tr>
<tr>
<td>Vedere vena safena accessoria anteriore (VSAA)</td>
<td>Anterior accessory of the great saphenous</td>
</tr>
<tr>
<td>Vena accessoria superficiale della vena grande safena</td>
<td>vein. See anterior accessory saphenous vein</td>
</tr>
<tr>
<td>Vena accessoria superficiale della vena piccola safena</td>
<td>Superficial accessory of the great saphenous</td>
</tr>
<tr>
<td>Vena anastomotica di GIACOMINI</td>
<td>vein</td>
</tr>
<tr>
<td></td>
<td>Superficial accessory of the small saphenous</td>
</tr>
<tr>
<td></td>
<td>vein</td>
</tr>
<tr>
<td></td>
<td>GIACOMINI vein</td>
</tr>
<tr>
<td>IT</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>------------------------------------------------------------------</td>
</tr>
<tr>
<td>Vena antibrachiale mediana</td>
<td>Median antebrachial vein</td>
</tr>
<tr>
<td>Vena aracniforme Vedere teleangectasia</td>
<td>Spider vein. See telangiectasia</td>
</tr>
<tr>
<td>Vena ascellare</td>
<td>Axillary vein</td>
</tr>
<tr>
<td>Vena assiale</td>
<td>Axial vein</td>
</tr>
<tr>
<td>Vena basilica</td>
<td>Basilic vein</td>
</tr>
<tr>
<td>Vena basilica accessoria</td>
<td>Accessory basilic vein</td>
</tr>
<tr>
<td>Vena basilica mediale</td>
<td>Medial basilic vein</td>
</tr>
<tr>
<td>Vena brachiale laterale</td>
<td>Lateral brachial vein</td>
</tr>
<tr>
<td>Vena brachiocefalica</td>
<td>Brachiocephalic vein</td>
</tr>
<tr>
<td>Vena cava</td>
<td>Caval vein. See vena cava</td>
</tr>
<tr>
<td>Vena cava inferiore</td>
<td>Inferior vena cava</td>
</tr>
<tr>
<td>Vena cava superiore</td>
<td>Superior vena cava</td>
</tr>
<tr>
<td>Vena cefalica</td>
<td>Cephalic vein</td>
</tr>
<tr>
<td>Vena cefalica accessoria</td>
<td>Accessory cephalic vein</td>
</tr>
<tr>
<td>Vena cefalica mediale</td>
<td>Medial cephalic vein</td>
</tr>
<tr>
<td>Vena cefalica mediana</td>
<td>Median cephalic vein</td>
</tr>
<tr>
<td>Vena circonflessa anteriore della coscia</td>
<td>Anterior thigh circumflex vein</td>
</tr>
<tr>
<td>Vena circonflessa iliaca profonda</td>
<td>Deep circumflex iliac vein</td>
</tr>
<tr>
<td>Vena circonflessa iliaca superficiale</td>
<td>Superficial circumflex iliac vein</td>
</tr>
<tr>
<td>Vena circonflessa posteriore della coscia</td>
<td>Posterior thigh circumflex vein</td>
</tr>
<tr>
<td>Vena collaterale</td>
<td>Collateral vein</td>
</tr>
<tr>
<td>Vena cubitale mediana</td>
<td>Median cubital vein</td>
</tr>
<tr>
<td>Vena del bulbo del pene (nell’uomo)</td>
<td>Vein of the bulb of the penis (male)</td>
</tr>
<tr>
<td>Vena del bulbo del vestibolo (nella donna)</td>
<td>Vein of the bulb of the vestibule (female)</td>
</tr>
<tr>
<td>Vena digitale dorsale della mano</td>
<td>Dorsal digital vein of the hand</td>
</tr>
<tr>
<td>Vena diversa dalla safena</td>
<td>Nonsaphenous vein</td>
</tr>
<tr>
<td>Vena dorsale profonda del clitoride (nella donna)</td>
<td>Deep dorsal vein of clitoris (female)</td>
</tr>
<tr>
<td>Vena dorsale profonda del pene (nell’uomo)</td>
<td>Deep dorsal vein of penis (male)</td>
</tr>
<tr>
<td>Vena dorsale superficiale del clitoride o del pene</td>
<td>Superficial dorsal vein of the clitoris or penis</td>
</tr>
<tr>
<td>Vena epigastrica inferiore</td>
<td>Inferior epigastric vein</td>
</tr>
<tr>
<td>Vena epigastrica superficiale</td>
<td>Superficial epigastric vein</td>
</tr>
<tr>
<td>Vena femorale</td>
<td>Femoral vein</td>
</tr>
<tr>
<td>Vena femorale circonflessa laterale</td>
<td>Lateral circumflex femoral vein</td>
</tr>
<tr>
<td>Vena femorale circonflessa mediale</td>
<td>Medial circumflex femoral vein</td>
</tr>
<tr>
<td>Vena femorale comune</td>
<td>Common femoral vein</td>
</tr>
<tr>
<td>Vena femorale profonda</td>
<td>Deep femoral vein</td>
</tr>
<tr>
<td>Vena femorale profonda</td>
<td>Profunda femoral vein</td>
</tr>
<tr>
<td>Vena filiforme Vedere teleangectasia</td>
<td>Thread vein. See telangiectasia</td>
</tr>
<tr>
<td>Vena giugulare interna</td>
<td>Internal jugular vein</td>
</tr>
<tr>
<td>Vena glutea inferiore</td>
<td>Lower gluteal vein</td>
</tr>
<tr>
<td>Vena grande safena</td>
<td>Great saphenous vein</td>
</tr>
<tr>
<td>Vena ileolombare</td>
<td>Iliolumbar vein</td>
</tr>
<tr>
<td>Vena iliaca comune</td>
<td>Common iliac vein</td>
</tr>
<tr>
<td>Vena iliaca esterna</td>
<td>External iliac vein</td>
</tr>
<tr>
<td>Vena iliaca interna (vena ipogastrica)</td>
<td>Internal iliac vein (hypogastric)</td>
</tr>
<tr>
<td>Vena incompetente</td>
<td>Incompetent vein</td>
</tr>
<tr>
<td>Vena intergemellare o vena gastrocnemial</td>
<td>Intergemellar vein or intergastrocnemial vein</td>
</tr>
<tr>
<td>Vena marginale laterale del piede</td>
<td>Lateral marginal vein of the foot</td>
</tr>
<tr>
<td>Vena marginale mediale del piede</td>
<td>Medial marginal vein of the foot</td>
</tr>
<tr>
<td>Vena mediana del gomito</td>
<td>Median vein of the elbow</td>
</tr>
<tr>
<td>IT</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Vena mediana dell'avambraccio</td>
<td>Median vein of the forearm</td>
</tr>
<tr>
<td>Vena mesenterica inferiore</td>
<td>Inferior mesenteric vein</td>
</tr>
<tr>
<td>Vena mesenterica superiore</td>
<td>Superior mesenteric vein</td>
</tr>
<tr>
<td>Vena metatarsale dorsale</td>
<td>Metatarsal dorsal vein</td>
</tr>
<tr>
<td>Vena metatarsale plantare</td>
<td>Metatarsal plantar vein</td>
</tr>
<tr>
<td>Vena ovarica</td>
<td>Ovarian vein</td>
</tr>
<tr>
<td>Vena perforante</td>
<td>Perforator vein</td>
</tr>
<tr>
<td>Vena perforante del polpaccio incompetente</td>
<td>Incompetent calf perforator</td>
</tr>
<tr>
<td>Vena perforante della cavità poplitea o perforante della cavità poplitea</td>
<td>Popliteal fossa perforating vein or popliteal fossa perforator</td>
</tr>
<tr>
<td>Vena perforante dorsale del piede</td>
<td>Dorsal foot perforator (perforating) vein</td>
</tr>
<tr>
<td>Vena perforante gastrocnemius laterale posteriore della gamba</td>
<td>Posterior leg lateral gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Vena perforante gastrocnemius mediale posteriore della gamba</td>
<td>Posterior leg medial gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Vena perforante glutea media</td>
<td>Midgluteal perforator vein</td>
</tr>
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<td>Vena perforante glutea superiore</td>
<td>Superior gluteral perforator vein</td>
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<td>Vena perforante indiretta</td>
<td>Indirect perforating vein</td>
</tr>
<tr>
<td>Vena perforante infrapatellare</td>
<td>Infrapatellar perforator vein</td>
</tr>
<tr>
<td>Vena perforante inguinale mediale della coscia</td>
<td>Medial thigh inguinal perforator vein</td>
</tr>
<tr>
<td>Vena perforante laterale del ginocchio</td>
<td>Lateral knee perforator vein</td>
</tr>
<tr>
<td>Vena perforante laterale della coscia</td>
<td>Lateral thigh perforator vein</td>
</tr>
<tr>
<td>Vena perforante laterale della gamba</td>
<td>Lateral leg perforator vein</td>
</tr>
<tr>
<td>Vena perforante mediale della cavità del canale femorale</td>
<td>Medial ankle perforator vein. See posterior tibial perforator veins</td>
</tr>
<tr>
<td>Vena perforante mediale della cavità del canale femorale</td>
<td>Medial thigh perforator vein of the femoral canal</td>
</tr>
<tr>
<td>Vena perforante pudenda</td>
<td>Pudendal perforator veins</td>
</tr>
<tr>
<td>Vena perforante suprapatellare</td>
<td>Suprapatellar perforator vein</td>
</tr>
<tr>
<td>Vena perforante tibiale posteriore mediale della gamba (in precedenza, vena perforante di COCKETT)</td>
<td>Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)</td>
</tr>
<tr>
<td>Vena piccola safena</td>
<td>Small saphenous vein. See also cranial extension of the small saphenous vein</td>
</tr>
<tr>
<td>Vena podalica</td>
<td>Pedal vein</td>
</tr>
<tr>
<td>Vena poplitea</td>
<td>Popliteal vein</td>
</tr>
<tr>
<td>Vena profonda</td>
<td>Deep vein</td>
</tr>
<tr>
<td>Vena pudenda esterna</td>
<td>External pudendal vein</td>
</tr>
<tr>
<td>Vena pudenda esterna superficiale</td>
<td>Superficial external pudendal vein</td>
</tr>
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<td>Vena pudenda interna</td>
<td>Internal pudendal vein</td>
</tr>
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<td>Vena radiale</td>
<td>Radial vein</td>
</tr>
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<td>Renal vein</td>
</tr>
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<td>Vena rettale superiore</td>
<td>Superior rectal vein</td>
</tr>
<tr>
<td>Vena sacrale mediana</td>
<td>Median sacral vein</td>
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<td>Vena safena accessoria posteriore</td>
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<td>Vena sciatica</td>
<td>Sciatic vein</td>
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<td>Vena succavia</td>
<td>Subclavian vein</td>
</tr>
<tr>
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</tr>
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<td>Vena trabecolare</td>
<td>Trabeculated vein</td>
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<td>Vena X</td>
<td>X-vein</td>
</tr>
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<td>Vene azigos</td>
<td>Azygos veins</td>
</tr>
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<td>Vene brachiali</td>
<td>Brachial veins</td>
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</tbody>
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TERMS IN OTHER LANGUAGES - ITALIAN

<table>
<thead>
<tr>
<th>IT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vene collaterali che attraversano la regione pubica</td>
<td>Cross-pubic collateral veins</td>
</tr>
<tr>
<td>Vene comunicanti</td>
<td>Communicating veins</td>
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<tr>
<td>Vene del bulbo uretrale (nell’uomo)</td>
<td>Urethral bulb veins (male)</td>
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<td>Vene digitali profonde (plantari e dorsali)</td>
<td>Deep digital veins (plantar and dorsal)</td>
</tr>
<tr>
<td>Vene digitali superficiali (dorsali e plantari) dell’arto inferiore</td>
<td>Superficial digital veins (dorsal and plantar) of the lower limb</td>
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<td>Vene digitali superficiali (dorsali e plantari) dell’arto superiore</td>
<td>Superficial digital veins (dorsal and plantar) of the upper limb</td>
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<tr>
<td>Vene fibulari o peronee</td>
<td>Fibular or peroneal veins</td>
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<tr>
<td>Vene gastrocnemie</td>
<td>Gastrocnemius veins</td>
</tr>
<tr>
<td>Vene gastrocnemie laterali</td>
<td>Lateral gastrocnemius veins</td>
</tr>
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<td>Medial gastrocnemius veins</td>
</tr>
<tr>
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</tr>
<tr>
<td>Vene glutee superiori</td>
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</tr>
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</tr>
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<td>Vene intersosseee anteriori</td>
<td>Anterior intersosseous veins</td>
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<tr>
<td>Vene intersafeniche</td>
<td>Intersaphenous vein(s)</td>
</tr>
<tr>
<td>Vene labiali anteriori</td>
<td>Anterior labial veins</td>
</tr>
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<td>Vene labiali posteriori (nella donna)</td>
<td>Posterior labial veins (female)</td>
</tr>
<tr>
<td>Vene lombari</td>
<td>Lumbar veins</td>
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<td>Deep metatarsal veins (plantar and dorsal)</td>
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<td>Obturator veins</td>
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<td>Anterior thigh perforator veins</td>
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<td>Anterior leg perforator veins</td>
</tr>
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<td>Direct perforating veins</td>
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<td>Lateral foot perforator veins</td>
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<td>Vene perforanti laterali della caviglia</td>
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</tr>
<tr>
<td>Vene perforanti mediali del piede</td>
<td>Medial foot perforator veins</td>
</tr>
<tr>
<td>Vene perforanti mediali della gamba</td>
<td>Medial leg perforator veins</td>
</tr>
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<td>Vene perforanti tibiali posteriori</td>
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<td>Vene plantari mediali</td>
<td>Medial plantar veins</td>
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<td>Vene profonde del clitoride o vena dorsale profonda del clitoride (nella donna)</td>
<td>Deep veins of the clitoris or deep dorsal veins of the clitoris (female)</td>
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<td>Vene profonde del pene (nell’uomo)</td>
<td>Deep veins of the penis (male)</td>
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<td>Pubic vein</td>
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<td>Reticular vein</td>
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<td>Saphenous veins</td>
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<td>Vene sovrapubiche</td>
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</tr>
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<td>Vene sovra renal o surrenali</td>
<td>Suprarenal or adrenal veins</td>
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<td>Vene testicolarri</td>
<td>Testicular veins</td>
</tr>
<tr>
<td><strong>IT</strong></td>
<td><strong>EN</strong></td>
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<tr>
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<tr>
<td>Vene tibiali anteriori</td>
<td>Anterior tibial veins</td>
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<td>Vene tibiali posteriori</td>
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<tr>
<td>Vene ulnari</td>
<td>Ulnar veins</td>
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<td>Vene uterine (nella donna)</td>
<td>Uterine veins (female)</td>
</tr>
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<td>Vene vaginali (nella donna)</td>
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<td>Vene varicose post-trombotiche</td>
<td>Postthrombotic varicose vein</td>
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<tr>
<td>Vene varicose residue o varici residue</td>
<td>Residual varicose vein or residual varice</td>
</tr>
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<td>Vene varicose sintomatiche</td>
<td>Symptomatic varicose veins</td>
</tr>
<tr>
<td>Venectasia Vedere flebectasia, o varice, vena varicosa, varicosità</td>
<td>Venectasia. See also phlebectasia or varice, varicose vein, varicosity</td>
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<td>Venipuntura</td>
<td>Venepuncture or venipuncture</td>
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<td>Venocostrizione</td>
<td>Venoconstriction</td>
</tr>
<tr>
<td>Venografia con gadolinio</td>
<td>Gadolinium-based venography</td>
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<td>Venografia con risonanza magnetica</td>
<td>Magnetic resonance venography</td>
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<td>Venografia con risonanza magnetica con mezzo di contrasto</td>
<td>Contrast-enhanced magnetic resonance venography</td>
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<tr>
<td>Venografia con tomografia computerizzata o tomografia computerizzata spirale</td>
<td>Computed tomography venography or spiral computed tomography venography</td>
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<td>Venografia Vedere anche flebografia/venografia ascendente e flebografia/venografia discendente</td>
<td>Venography. See also ascending phlebography/venography and descending phlebography/venography</td>
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<td>Venoplasty</td>
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<td>Venotomia (flebotomia, venisezione)</td>
<td>Venotomy (phlebotomy, venesection)</td>
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<td>Volo a lungo raggio Vedere tromboembolia venosa collegata a viaggi in aereo</td>
<td>Long-haul flight. See air travel-related venous thromboembolism</td>
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<td>Volume di eiezione</td>
<td>Ejection volume</td>
</tr>
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<td>Volume venoso attivo</td>
<td>Working venous volume</td>
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<td>Foot volumetry</td>
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<td>Gaiter zone</td>
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<td>Z-stent™</td>
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<tr>
<td>PT</td>
<td>EN</td>
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<tr>
<td>Abertura da válvula</td>
<td>Valve opening</td>
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<td>Ablação de varizes ou veia varicosa; ver ablação de veia</td>
<td>Varices or varicose vein ablation. See vein ablation</td>
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<tr>
<td>Ablação de veia</td>
<td>Vein ablation</td>
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<tr>
<td>Ablação de veia perfurante ou ablação de perfurante</td>
<td>Perforator vein ablation or perforator ablation</td>
</tr>
<tr>
<td>Ablação endovenosa por laser de veias safenas</td>
<td>Endovenous laser ablation of saphenous veins</td>
</tr>
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<td>Ablação endovenosa por radiofrequência</td>
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<td>Ablação endovenosa por vapor</td>
<td>Endovenous steam ablation</td>
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<td>Ablação endovenosa térmica</td>
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<td>Mechanochemical ablation</td>
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<td>Nonthermal vein ablation</td>
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<td>Percutaneous ablation of perforating veins</td>
</tr>
<tr>
<td>Ablação por laser; ver ablação endovenosa por laser de veias safenas</td>
<td>Laser ablation. See endovenous laser ablation of saphenous veins</td>
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<td>Ablação por radiofrequência</td>
<td>Radiofrequency ablation</td>
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<tr>
<td>Ablação por vapor</td>
<td>Steam ablation</td>
</tr>
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<td>Ablação seletiva de varizes sob anestesia local</td>
<td>Selective ablation of varices under local anesthesia</td>
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<td>Ablação térmica venosa</td>
<td>Venous thermal ablation</td>
</tr>
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<td>Ablação venosa</td>
<td>Venous ablation</td>
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<td>Ablação venosa truncal</td>
<td>Truncal venous ablation</td>
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</tr>
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<td>Adesão à compressão</td>
<td>Compression adherence</td>
</tr>
<tr>
<td>Aescina; ver semente ou extrato de raiz de castanha-da-Índia</td>
<td>Aescin. See Horse chestnut seed or root extract</td>
</tr>
<tr>
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<tr>
<td>Detergent sclerosing agent for sclerotherapy</td>
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<td>Ósmotic sclerosing agent in sclerotherapy</td>
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<td>Chemical irritant (sclerosing agent) in sclerotherapy</td>
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<td>Antithrombotic agents</td>
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<td>Postural diameter change</td>
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</tr>
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<td>Venous skin changes</td>
<td></td>
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<tr>
<td>Venous hemodynamic changes in venous disease</td>
<td>Venous skin changes</td>
</tr>
<tr>
<td>Trophic disorders. See venous skin changes</td>
<td>Anesthesia for interventional treatment of varicose veins</td>
</tr>
<tr>
<td>Anesthesia para tratamento interventivo de veias varicosas</td>
<td>Anesthesia for interventional treatment of varicose veins</td>
</tr>
<tr>
<td>Tumescent anesthesia</td>
<td>Popliteal vein aneurysm</td>
</tr>
<tr>
<td>Aneurisma da veia poplítea</td>
<td>Venous aneurysm</td>
</tr>
<tr>
<td>Aneurisma venoso</td>
<td>Aneurysm. See venous aneurysm</td>
</tr>
<tr>
<td>Aneurisma; ver aneurisma venoso</td>
<td></td>
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<tr>
<td>Angiografia por tomografia computorizada em espiral para embolia pulmonar</td>
<td>Spiral computed tomography angiography for pulmonary embolism</td>
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<td>Angiojet de impulsos motorizados; ver também AngioJet™</td>
<td>Power pulse AngioJet™. See also AngioJet™</td>
</tr>
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<td>AngioJet™</td>
</tr>
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<tr>
<td>Cavernous angioma</td>
<td></td>
</tr>
<tr>
<td>Angioplasia de balão percutânea ou venoplastia percutânea</td>
<td>Percutaneous balloon angioplasty or percutaneous venoplasty</td>
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<tr>
<td>Angioplasia venosa com balão</td>
<td>Venous balloon angioplasty</td>
</tr>
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<td>Antagonistas orais da vitamina K</td>
<td>Oral vitamin K antagonists</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
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</tr>
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<td>Antitrombina (antitrombina III)</td>
<td>Antithrombin (antithrombin III)</td>
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<td>Antocianinas; ver bioflavonoides</td>
<td>Anthocyanins. See also bioflavonoids</td>
</tr>
<tr>
<td>Aperto</td>
<td>Tightness</td>
</tr>
<tr>
<td>Apixabano</td>
<td>Apixaban</td>
</tr>
<tr>
<td>Aprisionamento da veia poplítea</td>
<td>Popliteal vein entrapment</td>
</tr>
<tr>
<td>Aranha vascular; ver telangiectasia</td>
<td>Spider vein. See telangiectasia</td>
</tr>
<tr>
<td>Arco venoso dorsal do pé</td>
<td>Dorsal venous arch of the foot</td>
</tr>
<tr>
<td>Arco venoso palmar profundo</td>
<td>Deep palmar venous arch</td>
</tr>
<tr>
<td>Arco venoso palmar superficial</td>
<td>Superficial palmar venous arch</td>
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<td>Argatroban</td>
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<td>Ativação de leucócitos</td>
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<td>Recombinant tissue plasminogen activator</td>
</tr>
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<td>Tissue plasminogen activator</td>
</tr>
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<td>Atresia de veia</td>
<td>Vein atresia</td>
</tr>
<tr>
<td>Atrofia branca; ver atrofie blanche</td>
<td>White atrophy. See atrofie blanche</td>
</tr>
<tr>
<td>Autotransplante de uma válvula competente para a veia poplítea ; ver transplante de válvula</td>
<td>Autotransplantation of a competent valve into the popliteal vein. See valve transplantation</td>
</tr>
<tr>
<td>Avulsão por incisão em ambulatório</td>
<td>Ambulatory stab avulsion</td>
</tr>
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<td>Avulsão por incisão ou flebectomia por incisão</td>
<td>Stab avulsion or stab phlebectomy</td>
</tr>
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<td>Banda externa da veia poplítea</td>
<td>Popliteal vein external banding</td>
</tr>
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<td>Banda/braçadeira venosa externa</td>
<td>External venous banding / cuff</td>
</tr>
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<td>Bivalirudin</td>
</tr>
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<td>Calf muscle pump or calf pump</td>
</tr>
<tr>
<td>Bomba muscular do pé</td>
<td>Foot muscle pump</td>
</tr>
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<td>UNNA boot</td>
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<td>Bypass cruzado</td>
<td>Crossover bypass</td>
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<tr>
<td>Bypass da veia jugular-axilar</td>
<td>Jugular axillary vein bypass</td>
</tr>
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<td>Bypass da veia safena femoropoplítea e femorocrural</td>
<td>Femoropopliteal and femorocrural saphenous vein bypass</td>
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<td>Bypass de MAY-HUSNI; ver bypass safenopoplítea</td>
<td>MAY-HUSNI bypass. See saphenopopliteal bypass</td>
</tr>
<tr>
<td>Bypass femoroliocaval</td>
<td>Femoroliocaval bypass</td>
</tr>
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</tr>
<tr>
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<td>Muscle cramp. See cramp</td>
</tr>
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<td>Night cramp. See cramp</td>
</tr>
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<td>Ventilation-perfusion scintigraphy</td>
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<td>Perforator vein open surgery or perforator open surgery</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
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<td>Valve surgery</td>
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<td>Endoscopic perforator surgery. See subfascial endoscopic perforator surgery</td>
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<td>endoscópica subfascial</td>
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<td>Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire</td>
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<td>Subfascial endoscopic perforator surgery</td>
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<td>Deep vein reconstructive surgery</td>
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<td>Cirurgia venosa</td>
<td>Venous reconstructive surgery</td>
</tr>
<tr>
<td>Cirurgia venosa profunda</td>
<td>Deep venous surgery</td>
</tr>
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<td>CEAP clinical classes. See clinical classes of the CEAP</td>
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<td>Basic CEAP classification</td>
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<td>Classificação de HERMAN; ver classificação de KISTNER</td>
<td>HERMAN’s classification. See KISTNER’s classification</td>
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<td>Classificação de KABNICK; ver também trombose endovenosa induzida</td>
<td>KABNICK classification. See also endovenous heat-induced thrombus</td>
</tr>
<tr>
<td>por calor</td>
<td>KISTNER’s classification</td>
</tr>
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<td>ADAMS-DEWEES clip or filter</td>
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<td>Clípe ou filtro ADAMS-DEWEES</td>
<td>Iliac vein stenting</td>
</tr>
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<td>Colocação de stent na veia ilíaca</td>
<td>Venous stenting</td>
</tr>
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<td>Itching</td>
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<td>Comichão</td>
<td>Valve commissure</td>
</tr>
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<td>Comissura da válvula</td>
<td>Saphenous compartment. See Egyptian eye</td>
</tr>
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<td>Compartimento da safena; ver olho egípcio</td>
<td>A component of the CEAP classification</td>
</tr>
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</tr>
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</tr>
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<td>Left renal vein compression. See nutcracker syndrome</td>
</tr>
<tr>
<td>Compressão da veia renal esquerda; ver síndrome de</td>
<td></td>
</tr>
<tr>
<td>quebra-nozes</td>
<td></td>
</tr>
<tr>
<td>Compressão de veia; ver compressão venosa</td>
<td>Vein compression. See venous compression</td>
</tr>
<tr>
<td>Compressão elástica graduada</td>
<td>Graduated elastic compression</td>
</tr>
<tr>
<td>Compressão excêntrica</td>
<td>Eccentric compression</td>
</tr>
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<td>Intermittent pneumatic compression</td>
</tr>
<tr>
<td>Compressão pneumática sequencial</td>
<td>Sequential pneumatic compression</td>
</tr>
<tr>
<td>Compressão venosa</td>
<td>Venous compression</td>
</tr>
<tr>
<td>Compressibilidade venosa</td>
<td>Venous compressibility</td>
</tr>
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<td>Comprimentos de onda de laser específicos da hemoglobina</td>
<td>Hemoglobin-specific laser wavelengths</td>
</tr>
<tr>
<td>Comprimentos de onda do laser específicos da água</td>
<td>Water-specific laser wavelengths</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------</td>
</tr>
<tr>
<td>Congestão das veias pélvicas; ver síndrome de congestão pélvica</td>
<td>Congestion in the pelvic veins. See pelvic congestion syndrome</td>
</tr>
<tr>
<td>Conselho de estilo de vida para distúrbios venosos crónicos</td>
<td>Lifestyle advice for chronic venous disorders</td>
</tr>
<tr>
<td>Construção de neoválvula MALETI</td>
<td>MALETI neovalve construction</td>
</tr>
<tr>
<td>Continuação na veia ázigos da veia cava inferior</td>
<td>Azygos continuation of the inferior vena cava</td>
</tr>
<tr>
<td>Coroa flebectásica; ver coroa flebectásica paraplantar</td>
<td>Corona phlebectatica. See corona phlebectatica paraplantaris</td>
</tr>
<tr>
<td>Crossectomia</td>
<td>Crossection</td>
</tr>
<tr>
<td>Cumarina</td>
<td>Coumarin</td>
</tr>
<tr>
<td>Cumprimento da compressão</td>
<td>Compression compliance</td>
</tr>
<tr>
<td>Cúspide da válvula</td>
<td>Valve cuspid or cusp</td>
</tr>
<tr>
<td>Dabigatran (etexilato de dabigatran)</td>
<td>Dabigatran (dabigatran etexilate)</td>
</tr>
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<td>Danaparoid (danaparoid sodium)</td>
</tr>
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<td>D-dimer</td>
</tr>
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</tr>
<tr>
<td>Deficiência de proteína S</td>
<td>Protein S deficiency</td>
</tr>
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<td>Dermatite (dermatite venosa, eczema venoso)</td>
<td>Dermatitis (venous dermatitis, venous eczema)</td>
</tr>
<tr>
<td>Dermatite de estase</td>
<td>Stasis dermatitis</td>
</tr>
<tr>
<td>Diferencial de pressão braço/pé</td>
<td>Arm/foot pressure differential</td>
</tr>
<tr>
<td>Diosmina</td>
<td>Diosmin</td>
</tr>
<tr>
<td>Diretrizes da Sociedade Europeia de Cirurgia Vascular para doença venosa crónica</td>
<td>European Society for Vascular Surgery guidelines for chronic venous disease</td>
</tr>
<tr>
<td>Diretrizes do NICE para tratamento de veias varicosas</td>
<td>NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Dispositivo de compressão</td>
<td>Compression device</td>
</tr>
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<td>Dispositivo de estimulação elétrica do músculo da barriga da perna</td>
<td>Electrical calf muscle stimulation device</td>
</tr>
<tr>
<td>Dispositivo motorizado de flebectomia; ver flebectomia motorizada</td>
<td>Phlebectomy power device. See powered phlebectomy</td>
</tr>
<tr>
<td>Dispositivos para calçar e descalçar (para meias)</td>
<td>Donning and doffing devices (for stockings)</td>
</tr>
<tr>
<td>Distúrbios venosos</td>
<td>Venous disorders</td>
</tr>
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<td>BEHÇET’s disease</td>
</tr>
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</tr>
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</tr>
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<td>Venous disease</td>
</tr>
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<td>Chronic venous disease / disorders</td>
</tr>
<tr>
<td>Doenças tróficas; ver alterações cutâneas venosas</td>
<td>Trophic changes. See venous skin changes</td>
</tr>
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<td>Doente com sintomas, mas sem sinais, de doença venosa</td>
<td>Cós patient</td>
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<tr>
<td>Doppler de onda contínua</td>
<td>Continuous-wave Doppler</td>
</tr>
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<td>Doppler portátil; ver também Doppler de onda contínua</td>
<td>Hand-held Doppler. See also continuous-wave Doppler</td>
</tr>
<tr>
<td>Dor; ver sensibilidade dolorosa</td>
<td>Pain. See aching</td>
</tr>
<tr>
<td>Drenagem em cascata</td>
<td>Waterfall drainage</td>
</tr>
<tr>
<td>EcoDoppler; ver ecografia Duplex</td>
<td>Doppler ultrasound. See duplex ultrasonography</td>
</tr>
<tr>
<td>Ecogenicidade venosa</td>
<td>Venous echogenicity</td>
</tr>
<tr>
<td>Ecografia</td>
<td>Ultrasound</td>
</tr>
<tr>
<td>Ecografia Doppler; ver ecografia Duplex</td>
<td>Duplex sonography. See duplex ultrasonography</td>
</tr>
<tr>
<td>Ecografia Duplex</td>
<td>Duplex ultrasonography</td>
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<td>Ecografia intravascular (EIV) em flebologia</td>
<td>Intravascular ultrasound in phlebology</td>
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<td>PT</td>
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<td>eczema, stasis dermatitis)</td>
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</tr>
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<td>Venous edema (phlebedema)</td>
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<td>Edema; ver edema venoso</td>
<td>Edema. See venous edema</td>
</tr>
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<td>Edoxaban</td>
</tr>
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<td>Efeito garrote</td>
<td>Tourniquet effect</td>
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<td>Efeito VENTURI</td>
<td>VENTURI effect</td>
</tr>
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<td>AKónya Eliminator - thrombectomy catheter</td>
</tr>
<tr>
<td>Embolectomia</td>
<td>Embolectomy</td>
</tr>
<tr>
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<td>Embolism</td>
</tr>
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<td>Embolia pulmonar ou trombembolismo pulmonar</td>
<td>Pulmonary embolism or pulmonary thromboembolism</td>
</tr>
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<td>Embolização</td>
<td>Embolization</td>
</tr>
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<td>Embolização adesiva; ver embolização com cola e/ou ablação com cola/adesivo</td>
<td>Adhesive embolization. See glue embolization or glue/adhesive ablation</td>
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<td>Embolização com cianoacrilato; ver embolização com cola</td>
<td>Cyanoacrylate embolization. See glue embolization</td>
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<td>Pelvic vein embolization</td>
</tr>
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<td>Embolização das veias ovárias ou pélvicas; ver embolização da veia pélvica</td>
<td>Coiling of ovarian or pelvic veins. See also pelvic vein embolization</td>
</tr>
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<td>Venous embryology</td>
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<td>Valve closure</td>
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<td>Endovenous</td>
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<td>GINSBERG scale</td>
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<td>Biomatrix sclerofoam</td>
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<td>Sclerotherapy</td>
</tr>
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<td>Ultrasound-guided foam sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia com espuma; ver escleroterapia</td>
<td>Foam sclerotherapy. See also sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia com microespuma; ver escleroterapia com espuma</td>
<td>Microfoam sclerotherapy. See foam sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia ecoguiada (UGS)</td>
<td>Ultrasound-guided sclerotherapy</td>
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<td>Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)</td>
</tr>
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<td>Liquid sclerotherapy</td>
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<td>Echosclerotherapy. See ultrasound-guided sclerotherapy</td>
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<td>Espessamento da válvula; ver espessamento valvular</td>
<td>Valve agger. See valvular agger</td>
</tr>
<tr>
<td>Espessamento valvular</td>
<td>Valvular agger</td>
</tr>
<tr>
<td>Espuma esclerosante</td>
<td>Sclerosing foam</td>
</tr>
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<td>ROKITANSKY stenosis</td>
</tr>
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<td>Venous stenosis</td>
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<td>Neuromuscular electric stimulator in chronic venous insufficiency</td>
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<td>Estreptoquinase</td>
<td>Streptokinase</td>
</tr>
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<td>Valve cornua</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
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<td>Estruturas semelhantes a válvula de EISEMANN E MALETTE; ver válvula de veia autóloga</td>
<td><strong>EISEMANN and MALETTE valve-like structures. See autologous vein valve</strong></td>
</tr>
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<td>Estudo de cirurgia endoscópica subfascial de veias perfurantes (SEPS) nos EUA</td>
<td><strong>North American subfascial endoscopic perforator surgery (SEPS) study</strong></td>
</tr>
<tr>
<td>Estudo de veias de Edimburgo</td>
<td><strong>Edinburgh vein study</strong></td>
</tr>
<tr>
<td>Estudo PREPIC</td>
<td><strong>PREPIC study</strong></td>
</tr>
<tr>
<td>Estudo PREPIC 2; ver estudo PREPIC</td>
<td><strong>PREPIC 2 study. See PREPIC study</strong></td>
</tr>
<tr>
<td>Estudos epidemiológicos e económicos da insuficiência venosa (VEINES)</td>
<td><strong>Venous insufficiency epidemiological and economic studies (VEINES)</strong></td>
</tr>
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<td>Extensão cranial da veia safena pequena</td>
<td><strong>Cranial extension of the small saphenous vein</strong></td>
</tr>
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<td>Extensão da coxa da veia safena pequena</td>
<td><strong>Thigh extension of the small saphenous vein</strong></td>
</tr>
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<td>Extrato de sementes de uva</td>
<td><strong>Grape seed extract</strong></td>
</tr>
<tr>
<td>Fadiga</td>
<td><strong>Fatigue</strong></td>
</tr>
<tr>
<td>Fármaco flebotônico; ver fármacos venotônicos ou venoativos</td>
<td><strong>Phlebotonic drug. See venotonic drugs or venoactive drugs</strong></td>
</tr>
<tr>
<td>Fármacos venoativos</td>
<td><strong>Venoactive drugs</strong></td>
</tr>
<tr>
<td>Fármacos venosos</td>
<td><strong>Venous drugs</strong></td>
</tr>
<tr>
<td>Fármacos venotônicos; ver fármacos venoativos</td>
<td><strong>Venotonic drugs. See venoactive drugs</strong></td>
</tr>
<tr>
<td>Farmacoterapia venosa</td>
<td><strong>Venous pharmacotherapy</strong></td>
</tr>
<tr>
<td>Fasciectomy na doença venosa</td>
<td><strong>Fasciectomy in venous disease</strong></td>
</tr>
<tr>
<td>Fasciotomia na doença venosa</td>
<td><strong>Fasciotomia in venous disease</strong></td>
</tr>
<tr>
<td>Fator VIII</td>
<td><strong>Factor VIII</strong></td>
</tr>
<tr>
<td>Fatores de risco para doença venosa crónica; ver fatores de risco para veias varicosas e para insuficiência venosa crónica (C₃-C₆)</td>
<td><strong>Risk factors for chronic venous disease. See risk factors for varicose veins and for chronic venous insufficiency (C₃-C₆)</strong></td>
</tr>
<tr>
<td>Fatores de risco para insuficiência venosa crónica (C₃-C₆)</td>
<td><strong>Risk factors for chronic venous insufficiency (C₃-C₆)</strong></td>
</tr>
<tr>
<td>Fatores de risco para PREVAIT (PREsence of Varices After Interventional Treatment)</td>
<td><strong>Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)</strong></td>
</tr>
<tr>
<td>Fatores de risco para recorrência de trombose venosa profunda</td>
<td><strong>Risk factors for deep venous thrombosis recurrence</strong></td>
</tr>
<tr>
<td>Fatores de risco para síndrome póstrombótico</td>
<td><strong>Risk factors for postthrombotic syndrome</strong></td>
</tr>
<tr>
<td>Fatores de risco para trombose venosa profunda</td>
<td><strong>Risk factors for deep venous thrombosis</strong></td>
</tr>
<tr>
<td>Fatores de risco para veias varicosas</td>
<td><strong>Risk factors for varicose veins</strong></td>
</tr>
<tr>
<td>Fenindiona</td>
<td><strong>Phenindione</strong></td>
</tr>
<tr>
<td>Fenprocoumon</td>
<td><strong>Fenprocoumon</strong></td>
</tr>
<tr>
<td>Fibra radial de duplo anel</td>
<td><strong>Double ring radial fiber</strong></td>
</tr>
<tr>
<td>Fibra; ver fibras de laser</td>
<td><strong>Fiber. See laser fibers</strong></td>
</tr>
<tr>
<td>Fibras de laser</td>
<td><strong>Laser fibers</strong></td>
</tr>
<tr>
<td>Fibrina</td>
<td><strong>Fibrin</strong></td>
</tr>
<tr>
<td>Fibrinolise</td>
<td><strong>Fibrinolysis</strong></td>
</tr>
<tr>
<td>Filtro da veia cava TrapEase®</td>
<td><strong>TrapEase™ vena cava filter</strong></td>
</tr>
<tr>
<td>Filtro Amplatz da veia cava inferior</td>
<td><strong>Amplatz inferior vena cava filter</strong></td>
</tr>
<tr>
<td>Filtro cava recuperável</td>
<td><strong>Retrievable cava filter</strong></td>
</tr>
<tr>
<td>Filtro caval profilático</td>
<td><strong>Prophylactic caval filter</strong></td>
</tr>
<tr>
<td>Filtro da veia cava inferior</td>
<td><strong>Inferior vena cava filter</strong></td>
</tr>
<tr>
<td>Filtro da veia cava inferior inclinado</td>
<td><strong>Tilted inferior vena cava filter</strong></td>
</tr>
<tr>
<td>Filtro da veia cava suprarrenal</td>
<td><strong>Suprarenal caval filter</strong></td>
</tr>
<tr>
<td>Filtro de nitinol de recuperação</td>
<td><strong>Recovery nitinol filter</strong></td>
</tr>
<tr>
<td>Filtro em guarda-chuva MOBIN-UDDIN</td>
<td><strong>MOBIN-UDDIN umbrella</strong></td>
</tr>
<tr>
<td>Filtro em ninho de pássaro</td>
<td><strong>Bird’s nest filter</strong></td>
</tr>
<tr>
<td>Filtro em tulipa GUNHER™; ver também filtro GREENFIELD™ e filtro G2</td>
<td><strong>GUNHER™ tulip filter. See also GREENFIELD™ filter and G2 filter</strong></td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Filtro G2; ver Filtro GREENFIELD™ e filtro em tulipa GUNTHER™</td>
<td>G2 filter. See also GREENFIELD™ filter and GUNTHER™ tulip filter</td>
</tr>
<tr>
<td>Filtro GREENFIELD™ em titânio</td>
<td>Titanium GREENFIELD™ filter</td>
</tr>
<tr>
<td>Filtro GREENFIELD™; ver também filtro G2 e filtro em tulipa GUNTHER™</td>
<td>GREENFIELD™ filter. See also G2 filter and GUNTHER™ tulip filter</td>
</tr>
<tr>
<td>Filtro OptEase®</td>
<td>OptEase® filter</td>
</tr>
<tr>
<td>Filtros da veia cava</td>
<td>Caval filters</td>
</tr>
<tr>
<td>Fisiologia venosa</td>
<td>Venous physiology</td>
</tr>
<tr>
<td>Fistula arteriovenosa</td>
<td>Arteriovenous fistula</td>
</tr>
<tr>
<td>Fistula arteriovenosa temporária</td>
<td>Temporary arteriovenous fistula</td>
</tr>
<tr>
<td>Flavonoides</td>
<td>Flavonoids</td>
</tr>
<tr>
<td>Flebectasia; ver também venectasia e varice, veia varicosa e varicosidade</td>
<td>Phlebectomy. See also venectasia and varice, varicose vein, and varicosity</td>
</tr>
<tr>
<td>Flebectomia</td>
<td>Phlebitis</td>
</tr>
<tr>
<td>Flebectomia com gancho</td>
<td>Hook phlebectomy</td>
</tr>
<tr>
<td>Flebectomia em ambulatório de MULLER</td>
<td>MULLER’s ambulatory phlebectomy</td>
</tr>
<tr>
<td>Flebectomia em ambulatório; ver avulsão por incisão em ambulatório</td>
<td>Ambulatory phlebectomy. See ambulatory stab avulsion</td>
</tr>
<tr>
<td>Flebectomia motorizada</td>
<td>Powered phlebectomy</td>
</tr>
<tr>
<td>Flebectomia motorizada transiluminada</td>
<td>Transilluminated powered phlebectomy</td>
</tr>
<tr>
<td>Flebite</td>
<td>Phlebitis</td>
</tr>
<tr>
<td>Flebografia por subtração digital</td>
<td>Digital subtraction phlebography</td>
</tr>
<tr>
<td>Flebografia/venografia ascendente</td>
<td>Ascending phlebography/venography</td>
</tr>
<tr>
<td>Flebografia/venografia descendente</td>
<td>Descending phlebography/venography</td>
</tr>
<tr>
<td>Flebografia; ver venografia</td>
<td>Phlebography. See venography</td>
</tr>
<tr>
<td>Flebologia</td>
<td>Phlebology</td>
</tr>
<tr>
<td>Flebotomia (veneseccção, venotomy)</td>
<td>Phlebotomy (venesection, venotomy)</td>
</tr>
<tr>
<td>Flebotrombose</td>
<td>Venous thrombosis</td>
</tr>
<tr>
<td>Flelegmasia cerulea dolens ou perna azul dolorosa</td>
<td>Phlegmasia cerulea dolens or painful blue leg</td>
</tr>
<tr>
<td>Fluxo retrógrado venoso; ver refluxo venoso</td>
<td>Venous back flow. See venous reflux</td>
</tr>
<tr>
<td>Fluxo venoso</td>
<td>Venous flow</td>
</tr>
<tr>
<td>Fluxometria Doppler a laser</td>
<td>Laser doppler flowmetry</td>
</tr>
<tr>
<td>Folheto da válvula; ver cúspide da válvula</td>
<td>Valve leaflet. See valve cusp or cusp</td>
</tr>
<tr>
<td>Fondaparinux</td>
<td>Fondaparinux</td>
</tr>
<tr>
<td>Formação de trombo venoso</td>
<td>Venous thrombus formation</td>
</tr>
<tr>
<td>Formigueiro</td>
<td>Tingling</td>
</tr>
<tr>
<td>Fórum Venoso dos EUA (AVF)</td>
<td>American Venous Forum (AVF)</td>
</tr>
<tr>
<td>Fórum Venoso Europeu</td>
<td>European Venous Forum</td>
</tr>
<tr>
<td>Fotoplethysmografia</td>
<td>Photoplethysmography</td>
</tr>
<tr>
<td>Fototermólise</td>
<td>Photothermolysis</td>
</tr>
<tr>
<td>Fração de ejeção; ver volume de ejeção</td>
<td>Ejection fraction. See also ejection volume</td>
</tr>
<tr>
<td>Fração de flavanoide purificado micronizado (FFPM)</td>
<td>Micronized purified flavonoid fraction (MPFF)</td>
</tr>
<tr>
<td>Fração do efluuxo</td>
<td>Outflow fraction</td>
</tr>
<tr>
<td>Fração do volume residual</td>
<td>Residual volume fraction</td>
</tr>
<tr>
<td>Frequência de repetição de impulsos (FRI)</td>
<td>Pulse repetition frequency</td>
</tr>
<tr>
<td>Função de bomba venosa</td>
<td>Venous pump function</td>
</tr>
<tr>
<td>Função de bomba venosa da barriga da perna</td>
<td>Venous calf pump function</td>
</tr>
<tr>
<td>Função valvular</td>
<td>Valvular function</td>
</tr>
<tr>
<td>Função venosa</td>
<td>Venous function</td>
</tr>
<tr>
<td>Gama-benzopirona; ver flavonoides</td>
<td>Gamma benzopyrone. See flavonoids</td>
</tr>
<tr>
<td>Gancho de flebectomia</td>
<td>Phlebectomy hook</td>
</tr>
<tr>
<td>Gangrena venosa</td>
<td>Venous gangrene</td>
</tr>
</tbody>
</table>
Gerador de laser
Gerador de radiouréncia
Glicerina
glicerina cromada
Hemangiendotelioma
Hemangioma
Hemangioma intraósseo
Hemodinâmica venosa
Heparina
Heparina de baixo peso molecular
Heparina não fracionada
Hiperpigmentação cutânea
Hipertensão venosa em ambulatório
Hipertensão venosa; ver também hipertensão venosa em
ambulatório
Hipoplasia venosa
Hirudina
Impressão de edema; ver sensação de edema
Incompetência de veia perfurante
Incompetência valvular
Incompetência venosa
Incompetência venosa primária
Incompetência venosa profunda
Incompetência venosa secundária
Índice de drenagem venosa
Índice de enchimento venoso
Índice de fluxo venoarterial
Índice de massa corporal
Índice de recirculação
Índice de rigidez dinâmico
Índice de rigidez estática
Índice tornozelo-braquial ou índice de pressão tornozelo-
braquial
Inibidores teciduais de metaloproteinases (TIMPs)
Injeção arterial durante escleroterapia
Injeção intra-arterial de esclerosante
Instituto Nacional para Excelência na Saúde e Cuidados
(NICVE); ver diretrizes do NICE para o tratamento de varizes
Insuficiência da safena
Insuficiência venosa cerebrospinal crônica
Insuficiência venosa crônica
Insuficiência venosa superficial
Investigação da avaliação de doença venosa e
padronização dos testes
Junção neosafenofemoral
Junção safenofemoral (JSF)
Junção safenopoplítea (JSP)
Laqueação alta
Laqueação alta e “stripping”
Laqueação alta e divisão

EN
Laser generator
Radiofrequency generator
Glycerin
Chromated glycerin
Hemangiendotelioma
Hemangioma
Intraosseous hemangioma
Venous hemodynamics
Heparin
Low molecular-weight heparin
Unfractionated heparin
Skin hyperpigmentation
Ambulatory venous hypertension
Venous hypertension. See also ambulatory venous
hypertension
Venous hypoplasia
Hirudin
Impression of swelling. See feeling of swelling
Perforator vein incompetence
Valvular incompetence
Venous incompetence
Primary venous incompetence
Deep venous incompetence
Secondary venous incompetence
Venous drainage index
Venous filling index (VFI)
Venoarterial flow index
Body mass index
Recirculation index
Dynamic stiffness index
Static stiffness index
Ankle brachial index or ankle-brachial pressure index
Tissue inhibitors of metalloproteinases (TIMPs)
Arterial injection during sclerotherapy
Intra-arterial injection of sclerosant
National Institute for health and Care Excellence
(NICE). See NICE guidelines for varicose vein
treatment
Saphenous insufficiency
Chronic cerebrospinal venous insufficiency
Chronic venous insufficiency
Superficial venous insufficiency
Investigating venous disease evaluation and
standardization of testing
Neosaphenofemoral junction
Saphenofemoral junction
Saphenopopliteal junction
High ligation
High ligation and stripping
High ligation and division
<table>
<thead>
<tr>
<th><strong>PT</strong></th>
<th><strong>EN</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Laqueação de veia perfurante ou laqueação de perfurante</td>
<td>Perforator vein ligation or perforator ligation</td>
</tr>
<tr>
<td>Laqueação junto à origem da veia</td>
<td>Flush ligation</td>
</tr>
<tr>
<td>Laqueação venosa</td>
<td>Venous ligation</td>
</tr>
<tr>
<td>Laser Alexandrine de impulso longo</td>
<td>Alexandrite long-pulse laser / Long-pulse Alexandrine laser</td>
</tr>
<tr>
<td>Laser diodo</td>
<td>Diode laser</td>
</tr>
<tr>
<td>Laser KTP</td>
<td>KTP laser</td>
</tr>
<tr>
<td>Laser ND-YAG (“garnet” de alumínio c/ iôrio impregnado com neodímio)</td>
<td>ND-YAG laser (neodymium-doped yttrium aluminum garnet)</td>
</tr>
<tr>
<td>Laser Yag; ver laser ND-YAG</td>
<td>YAG laser. See ND-YAG laser</td>
</tr>
<tr>
<td>Latejar</td>
<td>Throbbing</td>
</tr>
<tr>
<td>Leggings sobrepostas</td>
<td>Superimposed leggings</td>
</tr>
<tr>
<td>Leiomiossarcoma</td>
<td>Leiomyosarcoma</td>
</tr>
<tr>
<td>Lepirudina</td>
<td>Lepirudin</td>
</tr>
<tr>
<td>Lesão de veia ilíaca não trombótica</td>
<td>Nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Lesão nervosa após “stripping”</td>
<td>Nerve damage after stripping</td>
</tr>
<tr>
<td>Ligadura adesiva</td>
<td>Adhesive bandage</td>
</tr>
<tr>
<td>Ligadura com pouca elasticidade; ver ligadura não elástica</td>
<td>Short-stretch bandage. See inelastic bandage</td>
</tr>
<tr>
<td>Ligadura não elástica</td>
<td>Inelastic bandage</td>
</tr>
<tr>
<td>Ligadura; ver também ligaduras de compressão</td>
<td>Bandage. See also compression bandages</td>
</tr>
<tr>
<td>Ligaduras de compressão</td>
<td>Compression bandages</td>
</tr>
<tr>
<td>Ligaduras de compressão elásticas</td>
<td>Elastic compression bandages</td>
</tr>
<tr>
<td>Ligaduras de compressão multicamadas</td>
<td>Multilayered compression bandages</td>
</tr>
<tr>
<td>Lipedema</td>
<td>Lipedema</td>
</tr>
<tr>
<td>Lipodermatosclerose</td>
<td>Lipodermatosclerosis</td>
</tr>
<tr>
<td>Lúmen venoso</td>
<td>Venous lumen</td>
</tr>
<tr>
<td>Luz pulsada intensa</td>
<td>Intense pulsed light</td>
</tr>
<tr>
<td>Malformação arteriovenosa</td>
<td>Arteriovenous malformation</td>
</tr>
<tr>
<td>Malformação capilar</td>
<td>Capillary malformation</td>
</tr>
<tr>
<td>Malformação linfática</td>
<td>Lymphatic malformation</td>
</tr>
<tr>
<td>Malformação truncular</td>
<td>Truncular malformation</td>
</tr>
<tr>
<td>Malformação vascular congênita</td>
<td>Congenital vascular malformation</td>
</tr>
<tr>
<td>Malformação venosa</td>
<td>Venous malformation</td>
</tr>
<tr>
<td>Malformação venosa extratruncular</td>
<td>Extratruncular venous malformation</td>
</tr>
<tr>
<td>Malformação venosa intraóssea</td>
<td>Intraosseous venous malformation</td>
</tr>
<tr>
<td>Mancha de vinho do Porto</td>
<td>Port-wine stain</td>
</tr>
<tr>
<td>Manobra de Paraná</td>
<td>Paraná maneuver</td>
</tr>
<tr>
<td>Manobra de VALSALVA</td>
<td>VALSALVA maneuver</td>
</tr>
<tr>
<td>Manobra em pontas dos dedos dos pés</td>
<td>Tiptoe maneuver</td>
</tr>
<tr>
<td>Manobras de transferência de peso</td>
<td>Weight transfer maneuvers</td>
</tr>
<tr>
<td>Mapeamento ecográfico</td>
<td>Ultrasound mapping</td>
</tr>
<tr>
<td>Marquesa inclinada</td>
<td>Tilt table</td>
</tr>
<tr>
<td>Mastócitos em doença venosa crónica</td>
<td>Mast cells in chronic venous disease</td>
</tr>
<tr>
<td>Matting</td>
<td>Matting</td>
</tr>
<tr>
<td>Matting telangiectásico</td>
<td>Telangiectatic matting</td>
</tr>
<tr>
<td>Medição hemodinâmica venosa</td>
<td>Venous hemodynamic measurement</td>
</tr>
<tr>
<td>Meia impregnada com pasta de zinco</td>
<td>Zinc paste impregnated stockinette</td>
</tr>
<tr>
<td>Meias antitrombóticas</td>
<td>Antithrombotic stockings</td>
</tr>
<tr>
<td>Meias de compressão elásticas</td>
<td>Elastic compression stockings</td>
</tr>
<tr>
<td>Meias de compressão médicas</td>
<td>Medical compression stockings</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------</td>
</tr>
<tr>
<td>Meias de compressão; ver tubagem de compressão</td>
<td>Compression stockings. See compression hosiery</td>
</tr>
<tr>
<td>Metaloproteinases da matriz</td>
<td>Matrix metalloproteinases</td>
</tr>
<tr>
<td>Microflebectomia; ver avulsão por incisão em ambulatorio</td>
<td>Microphlebectomy. See ambulatory stab avulsion or</td>
</tr>
<tr>
<td>ou flebectomia de MULLER</td>
<td>MULLER's phlebectomy</td>
</tr>
<tr>
<td>Monitorização ecográfica</td>
<td>Ultrasound monitoring</td>
</tr>
<tr>
<td>Morruto de sódio</td>
<td>Sodium morrhuate</td>
</tr>
<tr>
<td>Mutação do fator V de Leiden (heterozigótica, homozigótica)</td>
<td>Factor V Leiden mutation (heterozygous, homozygous)</td>
</tr>
<tr>
<td>Necrose cutânea após escleroterapia</td>
<td>Cutaneous necrosis after sclerotherapy</td>
</tr>
<tr>
<td>Neoválvula (autogêna)</td>
<td>Neovalve (autogenous)</td>
</tr>
<tr>
<td>Neovascularização</td>
<td>Neovascularization</td>
</tr>
<tr>
<td>Obliteração venosa</td>
<td>Venous obliteration</td>
</tr>
<tr>
<td>Obstrução da veia iliaca</td>
<td>Iliac vein obstruction</td>
</tr>
<tr>
<td>Obstrução da veia iliocava</td>
<td>Iliocaval vein obstruction</td>
</tr>
<tr>
<td>Obstrução de veia; ver obstrução venosa</td>
<td>Vein obstruction. See venous obstruction</td>
</tr>
<tr>
<td>Obstrução do exluco</td>
<td>Outflow obstruction</td>
</tr>
<tr>
<td>Obstrução primária de veia não trombótica; ver lesão de veia</td>
<td>Nonthrombotic vein primary obstruction. See</td>
</tr>
<tr>
<td>iliaca não trombótica</td>
<td>nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Obstrução venosa</td>
<td>Venous obstruction</td>
</tr>
<tr>
<td>Obstrução venosa profunda</td>
<td>Deep venous obstruction</td>
</tr>
<tr>
<td>Oclusão da veia iliaca</td>
<td>Iliac vein occlusion</td>
</tr>
<tr>
<td>Oclusão da veia iliocava</td>
<td>Iliocaval vein occlusion</td>
</tr>
<tr>
<td>Oclusão de veia; ver oclusão venosa</td>
<td>Vein occlusion. See venous occlusion</td>
</tr>
<tr>
<td>Oclusão venosa</td>
<td>Venous occlusion</td>
</tr>
<tr>
<td>Oleato de etanolamina</td>
<td>Ethanolamine oleate</td>
</tr>
<tr>
<td>Olho da safena; ver olho egipcio</td>
<td>Saphenous eye. See egyptian eye</td>
</tr>
<tr>
<td>Olho egípcio</td>
<td>Egyptian eye</td>
</tr>
<tr>
<td>Operação de laqueação de perfurante COCKETT</td>
<td>COCKETT’s perforator vein ligation</td>
</tr>
<tr>
<td>Operação de LINTON; ver cirurgia perfurante endoscópica</td>
<td>LINTON’s operation. See also subfascial endoscopic</td>
</tr>
<tr>
<td>subfacial</td>
<td>perforator surgery</td>
</tr>
<tr>
<td>Operação de Warren; ver bypass da veia safena</td>
<td>Warren operation. See femoropopliteal or</td>
</tr>
<tr>
<td>femoropoplitea e femorocrural</td>
<td>femorocrural saphenous vein bypass</td>
</tr>
<tr>
<td>Operação PALMA; ver transposição femorofemoral da veia safena</td>
<td>PALMA operation. See femorofemoral saphenous vein transposition</td>
</tr>
<tr>
<td>Óxigénio, tratamento hiperbárico em úlceras venosas</td>
<td>Oxygen, hyperbaric treatment of venous ulcers</td>
</tr>
<tr>
<td>Patch em polietetrafluoroetileno para conter</td>
<td>Polytetrafluoroethylene patch for containing</td>
</tr>
<tr>
<td>neovascularização</td>
<td>neovascularization</td>
</tr>
<tr>
<td>Patogenia das varizes</td>
<td>Varice pathogenesis</td>
</tr>
<tr>
<td>Pentoxifilina</td>
<td>Pentoxifyline</td>
</tr>
<tr>
<td>Permeabilidade secundária</td>
<td>Secondary patency</td>
</tr>
<tr>
<td>Permeabilidade venosa</td>
<td>Venous compliance</td>
</tr>
<tr>
<td>Pernas irrequietas</td>
<td>Restless legs</td>
</tr>
<tr>
<td>Pernas pesadas; ver sensação de peso</td>
<td>Heavy leg. See heaviness</td>
</tr>
<tr>
<td>Phlegmasia alba dolens ou perna branca</td>
<td>Phlegmasia alba dolens or white leg</td>
</tr>
<tr>
<td>Pigmentação ou hiperpigmentação</td>
<td>Pigmentation or hyperpigmentation</td>
</tr>
<tr>
<td>PIN stripper</td>
<td>PIN stripper</td>
</tr>
<tr>
<td>Pletismografia a ar (APG)</td>
<td>Air Plethysmography</td>
</tr>
<tr>
<td>Pletismografia de impedância</td>
<td>Impedance plethysmography</td>
</tr>
<tr>
<td>Pletismografia de medição da tensão</td>
<td>Strain-gauge plethysmography</td>
</tr>
<tr>
<td>Pletismografia de oclusão</td>
<td>Occlusion plethysmography</td>
</tr>
<tr>
<td>Pletismografia venosa</td>
<td>Venous plethysmography</td>
</tr>
</tbody>
</table>
PT

Pletismografia; ver também pletismografia a ar, fotopletismografias e pletismografia de oclusão

Plexo pampiniforme
Plexo pudendo (vesicoprostático) (sexo masculino)
Plexo retal externo venoso sacral
Plexo retal interno venoso sacral
Plexo venoso prostático (sexo masculino)
Plexo venoso uterino (sexo feminino)
Plexo venoso vaginal (sexo feminino)
Polidocanol
Ponto de fuga
Pontuação anatómica; ver pontuação da doença segmentar venosa
Pontuação clínica de Antuérpia para embolia pulmonar
Pontuação da doença segmentar venosa
Pontuação da dor
Pontuação da gravidade venosa
Pontuação de Aberdeen da gravidade de veias varicosas (AVVSS)
Pontuação de CAPRINI
Pontuação de gravidade clínica venosa
Pontuação de Homburg da gravidade de veias varicosas
Pontuação de incapacidade venosa
Pontuação de Wells
Pontuação VILLALTA
Posição de TRENDELENBURG
PREsença de Varizes Após InTervenção (PREVAIT)

Pressão de compressão
Pressão de compressão de trabalho
Pressão de interface
Pressão hidrostática
Pressão intramuscular
Pressão venosa
Pressão venosa dinâmica
Pressão venosa em ambulatório
Prevenção/profílaxia da trombose venosa profunda
Procedimento com “sling” silástico PSATAKIS
Procedimento endovenoso; ver técnica endovenosa
Prostacicliina
Prurido; ver comichão
Punção ecoguiada, canulação
Qualidade de vida específica do resultado da resposta venosa
Qualidade de vida na doença venosa
Quantificação do refluxo
Questionário da qualidade de vida da úlcera venosa da perna
Questionário de Aberdeen para veias varicosas
Questionário de ulceração venosa de Charring Cross

EN

Plethysmography. See also air plethysmography, photoplethysmography and occlusion plethysmography

Pampiniform plexus
Pudendal (vesicoprostatic) plexus (male)
Sacral venous external rectal plexus
Sacral venous internal rectal plexus
Prostatic venous plexus (male)
Uterine venous plexus (female)
Vaginal venous plexus (female)
Polidocanol
Escape point
Anatomic score. See venous segmental disease score
Antwerp clinical score for pulmonary embolism
Venous segmental disease score
Pain score
Venous severity scoring
Aberdeen Varicose Vein Severity Score
CAPRINI score
Venous clinical severity score (VCSS)
Homburg varicose vein severity score
Venous disability score
Wells score
VILLALTA score
TRENDELENBURG position
PREsence of Varices After Interventional Treatment (PREVAIT)
Compression pressure
Working compression pressure
Interface pressure
Hydrostatic pressure
Intramuscular pressure
Venous pressure
Dynamic venous pressure
Ambulatory venous pressure
Deep vein thrombosis prevention/prophylaxis
PSATAKIS silastic sling procedure
Endovenous procedure. See endovenous technique
Prostacyclin
Pruritis. See itching
Ultrasound-guided puncture, cannulation
Specific quality of life outcome response-venous
Quality of life in venous disease
Reflex quantification
Venous leg ulcer quality of life questionnaire
Aberdeen Varicose Vein Questionnaire
Charing Cross Venous Ulcer Questionnaire
PT

Radiologia de intervenção (em flebologia)
Recirculação safena
Recirculação venosa no membro inferior
Reconstrução da válvula
Reconstrução da veia cava inferior suprarrenal
Reconstruções por cirurgia aberta para oclusão não maligna da veia cava
Recuperação de filtro
Rede de varicose na virilha; ver também neovascularização
Rede subcutânea venosa plantar
Rede varicosa da fossa poplitea
Rede venosa dorsal do pé
Reflexo de vasoconstrução postural; ver reflexo venoarterial

Reflexo venoarterial (reflexo de vasoconstrução postural)
Reflexo venoso profundo e superficial associado
Refluxo axial
Reflexo da safena
Refluxo da veia ovárica ou incompetência da veia ovárica
Refluxo da veia pélvica
Refluxo de veia ureteral
Refluxo residual
Refluxo segmentar
Refluxo valvular
Refluxo venoso
Refluxo venoso ou incompetência superficial
Refluxo venoso profundo
Remodelação de parede venosa
Reparação cirúrgica de incompetência de válvula venosa profunda
Reparação da válvula; ver reconstrução da válvula
Reparação de válvula com porta de aprisionamento
TRIPATHI

Resistência ao efluxo aumentada
Resistência ao efluxo venoso
Resolução de trombo venoso
Resposta venoarteriolar
Resssecção da primeira costela
Reviparina (clivarina)
Rígidez do tornozelo
Rivaroxabano
Saída da bomba da barriga da perna
Saída venosa
Saída venosa; ver refluxo venoso
Seio da válvula
Semente ou extrato de raiz de castanha-da-Índia
Sensação de calor ou ardor
Sensação de edema
Sensação de peso
Sensibilidade dolorosa
SEPS; ver cirurgia endoscópica subfascial de perfurante

EN

Interventional radiology (in phlebology)
Saphenous recirculation
Private venous circulation in the lower limb
Valve reconstruction
Suprarenal inferior vena cava reconstruction
Open surgical reconstructions for nonmalignant occlusion of the vena cava
Filter retrieval
Groin varicose network. See also neovascularization
Plantar venous subcutaneous network
Popliteal fossa varicose network
Dorsal venous network of the foot
Postural vasoconstriction reflex. See venoarterial reflex
Venoarterial reflex (postural vasoconstriction reflex)
Associated deep and superficial venous reflux
Axial reflux
Saphenous reflux
Ovarian vein reflux or ovarian vein incompetence
Pelvic vein reflux
Ureteric vein reflux
Residual reflux
Segmental reflux
Valvular reflux
Venous reflux
Superficial venous reflux or incompetence
Deep venous reflux
Vein wall remodeling
Surgical repair of deep venous valve incompetence
Valve repair. See valve reconstruction
TRIPATHI trap door valve repair
Increased outflow resistance
Venous outflow resistance
Venous thrombus resolution
Venoarteriolar response
First rib resection
Reviparin (clivarine)
Ankle stiffness
Rivaroxaban
Calf pump output
Venous blow out
Venous blow down. See venous reflux
Valve sinus
Horse chestnut seed or root extract
Heat or burning sensation
Feeling of swelling
Heaviness
Aching
SEPS. See Subfascial endoscopic perforator surgery
<table>
<thead>
<tr>
<th>PT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sinal de alinhamento</td>
<td>Alignment sign</td>
</tr>
<tr>
<td>Sinal de HOMANS</td>
<td>HOMANS sign</td>
</tr>
<tr>
<td>Sinal do rato Mickey</td>
<td>Mickey Mouse sign</td>
</tr>
<tr>
<td>Síndrome antifosfolipídica</td>
<td>Antiphospholipid syndrome</td>
</tr>
<tr>
<td>Síndrome compartimental na doença venosa</td>
<td>Compartment syndrome in venous disease</td>
</tr>
<tr>
<td>Síndrome da classe econômica; ver tromboembolismo venoso relacionado com viagens aéreas</td>
<td>Economy class syndrome. See air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Síndrome da veia cava superior</td>
<td>Superior vena cava syndrome</td>
</tr>
<tr>
<td>Síndrome de ACHENBACH</td>
<td>ACHENBACH’s syndrome</td>
</tr>
<tr>
<td>Síndrome de BUDD-CHIARI</td>
<td>BUDD-CHIARI syndrome</td>
</tr>
<tr>
<td>Síndrome de COCKETT; ver também síndrome de MAY-THURNER</td>
<td>COCKETT syndrome. See also MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Síndrome de congestão pélvica</td>
<td>Pelvic congestion syndrome</td>
</tr>
<tr>
<td>Síndrome de GULLMO; ver também síndrome de obstrução em tensão</td>
<td>GULLMO’s syndrome. See strain obstruction syndrome</td>
</tr>
<tr>
<td>Síndrome de KASABACH-MERRITT</td>
<td>KASABACH-MERRIT syndrome</td>
</tr>
<tr>
<td>Síndrome de KLIPPEL-TRENAUNAY</td>
<td>KLIPPEL-TRENAUNAY syndrome</td>
</tr>
<tr>
<td>Síndrome de MAFFUCCI</td>
<td>MAFFUCCI syndrome</td>
</tr>
<tr>
<td>Síndrome de MAY-THURNER</td>
<td>MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Síndrome de obstrução em tensão</td>
<td>Strain obstruction syndrome</td>
</tr>
<tr>
<td>Síndrome de PAGET-von SCHRÖTTER</td>
<td>PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Síndrome de PARKES-WEBER</td>
<td>PARKES WEBER syndrome</td>
</tr>
<tr>
<td>Síndrome de quebra-nozes</td>
<td>Nutcracker syndrome</td>
</tr>
<tr>
<td>Síndrome de SERVELLE-MARTORELL</td>
<td>SERVELLE-MARTORELL syndrome</td>
</tr>
<tr>
<td>Síndrome de STURGE-WEBER</td>
<td>STURGE-WEBER syndrome</td>
</tr>
<tr>
<td>Síndrome do desfiladeiro torácico</td>
<td>Thoracic outlet syndrome</td>
</tr>
<tr>
<td>Síndrome do desfiladeiro torácico venoso; ver também</td>
<td>Venous thoracic outlet syndrome. See also PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Síndrome pós-trombótica ou doença pós-trombótica</td>
<td>Postthrombotic syndrome or postthrombotic disease</td>
</tr>
<tr>
<td>Sintomas nas pernas; ver sintomas venosos</td>
<td>Leg symptoms. See venous symptoms</td>
</tr>
<tr>
<td>Síndrome venoso</td>
<td>Venous symptoms</td>
</tr>
<tr>
<td>Sistema ázigos</td>
<td>Azygos system</td>
</tr>
<tr>
<td>Sistema de cateter de perfusão LysUS (EKOS)</td>
<td>Lysus infusion catheter system (EKOS)</td>
</tr>
<tr>
<td>Sistema de pontuação clínica, pontuação de gravidade clínica</td>
<td>Clinical scoring system, clinical severity score</td>
</tr>
<tr>
<td>Sistema de seringa duplo</td>
<td>Double syringe system</td>
</tr>
<tr>
<td>Sistema de trombólise assistida por ecografia EKOS™</td>
<td>EKOS™ ultrasound-assisted thrombolysis system</td>
</tr>
<tr>
<td>Sistema venoso</td>
<td>Venous system</td>
</tr>
<tr>
<td>Sistema venoso de ALBANESE</td>
<td>ALBANESE venous system</td>
</tr>
<tr>
<td>Sistema venoso lateral; ver sistema venoso de ALBANESE</td>
<td>Lateral venous system. See ALBANESE venous system</td>
</tr>
<tr>
<td>Sistemas de trombectomia rotativos mais limpos</td>
<td>Cleaner rotational thrombectomy systems</td>
</tr>
<tr>
<td>Sociedade Europeia de Cirurgia Vascular</td>
<td>European Society for Vascular Surgery</td>
</tr>
<tr>
<td>Sociedade Internacional para o Estudo das Anomalias Vasculares (classificação de Anomalias vasculares); ver também classificação de Hamburgo</td>
<td>International Society for the Study of Vascular Anomalies (classification of vascular anomaly). See also Hamburg classification</td>
</tr>
<tr>
<td>Sola de LEJARS</td>
<td>LEJARS’ sole</td>
</tr>
<tr>
<td>Solução tumescente</td>
<td>Tumescent solution</td>
</tr>
<tr>
<td>Stent autoexpansível</td>
<td>Self-expanding stent</td>
</tr>
<tr>
<td>Stent com balão expansível</td>
<td>Balloon-expanding stent</td>
</tr>
<tr>
<td>Stent de Nitinol</td>
<td>Nitinol stent</td>
</tr>
<tr>
<td>Stent em “Z”</td>
<td>Z-stent™</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>-----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Stent GIANTURCO</td>
<td>GIANTURCO stent</td>
</tr>
<tr>
<td>Stripper OESCH; ver PIN stripper</td>
<td>OESCH stripper. See PIN stripper</td>
</tr>
<tr>
<td>Stripper Perfurante INvaginado (PIN); ver PIN stripper</td>
<td>Perforate INvaginate (PIN) stripper. See PIN stripper</td>
</tr>
<tr>
<td>Stripping com PIN stripper</td>
<td>PIN stripping</td>
</tr>
<tr>
<td>Stripping da safena</td>
<td>Saphenous stripping</td>
</tr>
<tr>
<td>Stripping Perfurante INvaginado (PIN); ver stripping com PIN stripper</td>
<td>Perforate INvaginate (PIN) stripping. See PIN stripping</td>
</tr>
<tr>
<td>Stripping por frio</td>
<td>Cryostripping</td>
</tr>
<tr>
<td>Stripping venoso</td>
<td>Venous stripping</td>
</tr>
<tr>
<td>Técnica com bloqueio de ar</td>
<td>Air-block technique</td>
</tr>
<tr>
<td>Técnica de TESSARI</td>
<td>TESSARI technique</td>
</tr>
<tr>
<td>Técnica de vaporização em impulsos na trombólise; ver também AngioJet™</td>
<td>Pulse-spray technique in thrombolysis. See also AngioJet™</td>
</tr>
<tr>
<td>Técnica endovenosa</td>
<td>Endovenous technique</td>
</tr>
<tr>
<td>Telangiectasia</td>
<td>Telangiectasia</td>
</tr>
<tr>
<td>Tempo de encerramento da válvula</td>
<td>Valve closure time</td>
</tr>
<tr>
<td>Tempo de enchimento venoso</td>
<td>Venous filling time (VFT)</td>
</tr>
<tr>
<td>Tempo de reenchimento</td>
<td>Refilling time</td>
</tr>
<tr>
<td>Tempo de reenchimento venoso; ver tempo de reenchimento</td>
<td>Venous refill time. See refilling time</td>
</tr>
<tr>
<td>Teoria ascendente para veias varicosas</td>
<td>Ascending theory for varicose veins</td>
</tr>
<tr>
<td>Teoria descendente na patogenia de veias varicosas</td>
<td>Descending theory in the pathogenesis of varicose veins</td>
</tr>
<tr>
<td>Teoria parietal da patogenia de veias varicosas</td>
<td>Parietal theory of varicose vein pathogenesis</td>
</tr>
<tr>
<td>Terapêutica anticoagulante oral</td>
<td>Oral anticoagulant therapy</td>
</tr>
<tr>
<td>Terapêutica de compressão</td>
<td>Compression therapy</td>
</tr>
<tr>
<td>Terapêutica de compressão para úlcera venosas</td>
<td>Compression therapy for venous ulcers</td>
</tr>
<tr>
<td>Terapêutica fibrinolítica</td>
<td>Fibrinolytic therapy</td>
</tr>
<tr>
<td>Terapia a laser percutânea para telangiectasias e veias varicosas</td>
<td>Percutaneous laser therapy for telangiectasia and varicose veins</td>
</tr>
<tr>
<td>Termoterapia induzida por radiofrequência</td>
<td>Radiofrequency-induced thermotherapy</td>
</tr>
<tr>
<td>Teste de “strip” para competência valvular; ver teste de “strip” para competência da válvula; ver teste de retirada do sangue (“milking”)</td>
<td>Strip test for valve competence. See milking test</td>
</tr>
<tr>
<td>Teste de PERTHES</td>
<td>PERTHES test</td>
</tr>
<tr>
<td>Teste de retirada do sangue (“milking”)</td>
<td>Milking test</td>
</tr>
<tr>
<td>Teste de TRENDELENBURG</td>
<td>TRENDELENBURG test</td>
</tr>
<tr>
<td>Tetradecil-sulfato de sódio</td>
<td>Sodium tetradeyl sulfate</td>
</tr>
<tr>
<td>Tinzaparin</td>
<td>Tinzaparin</td>
</tr>
<tr>
<td>Tomografia computorizada na doença venosa</td>
<td>Computed tomography in venous disease</td>
</tr>
<tr>
<td>Transferência de segmento venos; ver transplante de válvula</td>
<td>Venous segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Transferência ou transplante de veia axilar</td>
<td>Axillary vein transfer or transplantation</td>
</tr>
<tr>
<td>Transplante de segmento de veia ou segmento de transferência de veia; ver transplante de válvula</td>
<td>Vein segment transplantation or vein segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Transplante de válvula</td>
<td>Valve transplantation</td>
</tr>
<tr>
<td>Transposição de veia de KISTNER</td>
<td>KISTNER’s vein transposition</td>
</tr>
<tr>
<td>Transposição de veia; ver transposição de veia de KISTNER</td>
<td>Vein transposition. See KISTNER’s vein transposition</td>
</tr>
<tr>
<td>Transposição femorofemoral da veia safena</td>
<td>Femorofemoral saphenous vein transposition</td>
</tr>
<tr>
<td>Tratamento (ou terapêutica) com oxigénio hiperbárico de úlceras venosas</td>
<td>Hyperbaric oxygen treatment (or therapy) of venous ulcers</td>
</tr>
<tr>
<td>Tratamento conservador na doença venosa</td>
<td>Conservative treatment in venous disease</td>
</tr>
<tr>
<td>Tratamento de Maggot (terapêutica de desbridamento de maggot)</td>
<td>Maggot treatment (maggot debridement therapy)</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Tratamento endotérmico</td>
<td>Endothermal treatment</td>
</tr>
<tr>
<td>Tratamento endovenoso</td>
<td>Endovenous treatment</td>
</tr>
<tr>
<td>Tratamento endovenoso a laser; ver ablação endovenosa por laser de veias safenas</td>
<td>Endovenous laser treatment. See endovenous laser ablation of saphenous veins</td>
</tr>
<tr>
<td>Tratamento trombolítico venoso</td>
<td>Venous thrombolytic treatment</td>
</tr>
<tr>
<td>Triade de VIRCHOW</td>
<td>VIRCHOW’s triad</td>
</tr>
<tr>
<td>Trivex; ver flebectomia motorizada transiluminada</td>
<td>Trivex. See transilluminated powered phlebectomy</td>
</tr>
<tr>
<td>Trombectomia mecânica</td>
<td>Mechanical thrombectomy</td>
</tr>
<tr>
<td>Trombectomia mecânica percutânea</td>
<td>Percutaneous mechanical thrombectomy</td>
</tr>
<tr>
<td>Trombectomia operatória híbrida</td>
<td>Hybrid operative thrombectomy</td>
</tr>
<tr>
<td>Trombectomia percutânea Arrow-TREROTOLA™</td>
<td>Arrow-TREROTOLA™ percutaneous thrombectomy</td>
</tr>
<tr>
<td>Trombectomia venosa</td>
<td>Venous thrombectomy</td>
</tr>
<tr>
<td>Trombectomia venosa cirúrgica</td>
<td>Surgical venous thrombectomy</td>
</tr>
<tr>
<td>Trombo endovenoso induzido por calor; ver classificação de KABNICK</td>
<td>Endovenous heat-induced thrombus. See KABNICK classification</td>
</tr>
<tr>
<td>Trombo flutuante</td>
<td>Free-floating thrombus</td>
</tr>
<tr>
<td>Trombo venoso</td>
<td>Venous thrombus. See also venous thrombosis</td>
</tr>
<tr>
<td>Trombocitopenia induzida por heparina</td>
<td>Heparin-induced thrombocytopenia</td>
</tr>
<tr>
<td>Tromboembolismo venoso</td>
<td>Venous thromboembolism</td>
</tr>
<tr>
<td>Tromboembolismo venoso relacionado com viagens aéreas</td>
<td>Air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Trombofília</td>
<td>Thrombophilia</td>
</tr>
<tr>
<td>Tromboflebite</td>
<td>Superficial thrombophlebitis. See superficial venous thrombophlebitis</td>
</tr>
<tr>
<td>Tromboflebite venosa superficial; ver tromboflebite venosa superficial</td>
<td>Superficial venous thrombophlebitis. See superficial vein thrombosis</td>
</tr>
<tr>
<td>Tromboflebite venosa superficial; ver trombose de veia superficial</td>
<td>Pharmacomechanical thrombolysis</td>
</tr>
<tr>
<td>Trombólise farmacomecânica</td>
<td>Thrombolysis. See venous thrombolytic treatment</td>
</tr>
<tr>
<td>Trombólise; ver tratamento trombolítico venoso</td>
<td>Venous thromboprophylaxis</td>
</tr>
<tr>
<td>Tromboprofilaxia venosa</td>
<td>Inferior vena cava thrombosis</td>
</tr>
<tr>
<td>Trombose da veia cava inferior</td>
<td>Mesenteric vein thrombosis</td>
</tr>
<tr>
<td>Trombose da veia mesentérica</td>
<td>Effort thrombosis. See PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Trombose de esforço; ver síndrome de PAGET-von SCHRÖTTER</td>
<td>Axillo-subclavian vein thrombosis also called PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Trombose de veia axilossubclávia ou Síndrome de PAGET-von SCHRÖTTER</td>
<td>Deep vein thrombosis</td>
</tr>
<tr>
<td>Trombose de veia profunda</td>
<td>Acute deep vein thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Trombose de veia profunda aguda; ver trombose de veia profunda</td>
<td>Upper extremity deep vein thrombosis</td>
</tr>
<tr>
<td>Trombose de veia profunda em membro superior</td>
<td>Femoropopliteal deep vein thrombosis. See also deep vein thrombosis</td>
</tr>
<tr>
<td>Trombose de veia profunda femoropoplítea; ver trombose de veia profunda</td>
<td>Superficial vein thrombosis</td>
</tr>
<tr>
<td>Trombose de veia superficial</td>
<td>Heat-induced thrombosis. See endovenous heat-induced thrombus</td>
</tr>
<tr>
<td>Trombose induzida por calor; ver trombo endovenoso induzido por calor</td>
<td>Proximal thrombosis</td>
</tr>
<tr>
<td>Trombose proximal</td>
<td>Oral contraceptive-related thrombosis</td>
</tr>
<tr>
<td>Trombose relacionada com contraceptivo oral</td>
<td>Venous thrombosis risk factors. See risk factors for deep venous thrombosis</td>
</tr>
<tr>
<td>Trombose venosa - fatores de risco; ver fatores de risco para trombose venosa profunda</td>
<td>Calf vein thrombosis, deep vein thrombosis isolated in the calf</td>
</tr>
<tr>
<td>Trombose venosa da barriga da perna, trombose de veia profunda limitada à barriga da perna</td>
<td>Iliofemoral deep venous thrombosis</td>
</tr>
<tr>
<td>Trombose venosa profunda iliopoplítea</td>
<td>Recurrent deep venous thrombosis</td>
</tr>
<tr>
<td>Trombose venosa profunda recorrente</td>
<td></td>
</tr>
</tbody>
</table>
Trombose venosa profunda; ver trombose de veia profunda
Trombose venosa superficial e profunda concomitante
Tubagem de compressão
Úlcera arterial e venosa mista
Úlcera da perna; ver úlcera venosa da perna
Úlcera de MARJOLIN
Úlcera de MARTORELL
Úlcera venosa ativa; ver úlcera venosa da perna
Úlcera venosa da perna
Ultrasons
União Internacional de Flebologia
Uroquinase
Válvula bicúspide venosa
Válvula de aloenxerto
Válvula de veia autóloga
Válvula de xenoenxerto
Válvula PAVCNIK
Válvula Portland ou válvula PAVCNIK
Válvula pré-terminal da junção safenofemoral
Válvula pré-terminal da junção safenopoplítea
Válvula refluxiva; ver incompetência valvular
Válvula terminal da junção safenofemoral
Válvula terminal da junção safenopoplítea
Válvula terminal; ver válvula terminal da junção safenofemoral e válvula terminal da junção safenopoplítea
Válvula venosa
Válvula venosa artificial
Válvula venosa protésica
Válvula; ver válvula venosa
Válvulas venosas criopreservadas
Valvuloplastia
Valvuloplastia de KISTNER
Valvuloplastia de manga protésica
Valvuloplastia de Raju
Valvuloplastia de SOTTIURAI
Valvuloplastia externa/extraluminal
Valvuloplastia interna
Valvuloplastia transcomissural
Valvuloplastia transmural
Varfarina
Varice recorrente ou veia varicosa recorrente
Varice, veia varicosa, varicosidade
Varicocelo
Varicografia
Varicosidade pélvica; ver varizes pélvicas
Varicosidade; ver varice, veia varicosa, varicosidade
Varicosidades perineais
Varizes do ligamento redondo
Varizes pélvicas
Varizes recorrentes após cirurgia (REVAS)
Varizes subdérmicas; ver telangiectasia

Deep venous thrombosis. See deep vein thrombosis
Concomitant superficial and deep venous thrombosis
Compression hosiery
Mixed arterial and venous ulcer
Leg ulcer. See venous leg ulcer
MARJOLIN’s ulcer
MARTORELL’s ulcer
Active venous ulcer. See venous leg ulcer
Venous leg ulcer
Ultrasound
International Union of Phlebology
Urokinase
Venous bicuspid valve
Allograft valve
Autologous vein valve
Xenograft valve
PAVCNIK valve
Portland valve or PAVCNIK valve
Saphenofemoral junction preterminal valve
Saphenopopliteal junction preterminal valve
Refluxive valve. See valvular incompetence
Saphenofemoral junction terminal valve
Saphenopopliteal junction terminal valve
Terminal valve. See saphenofemoral junction terminal valve and saphenopopliteal junction terminal valve
Venous valve
Artificial venous valve
Prosthetic venous valve
Valve. See venous valve
Cryopreserved venous valves
Valvuloplasty
KISTNER’s valvuloplasty
Prosthetic sleeve valvuloplasty
Raju’s valvuloplasty
SOTTIURAI’s valvuloplasty
External / extraluminal valvuloplasty
Internal valvuloplasty
Transcomissural valvuloplasty
Transmural valvuloplasty
Warfarin
Recurrent varice or recurrent varicose vein
Varice, varicose vein, varicosity
Varicocele
Varicography
Pelvic varicosity. See pelvic varices
Varicosity. See varice, varicose vein, varicosity
Perineal varicosities
Round ligament varices
Pelvic varices
Recurrent varices after surgery (REVAS)
Subdermal varices. See telangiectasia
Varizes varicosas residuais ou varizes residuais
Veia
Veia acessória anterior da veia grande safena; ver veia acessória anterior da veia safena
Veia acessória anterior da veia safena
Veia acessória superficial da grande safena
Veia acessória superficial da pequena safena
Veia antebraquial mediana
Veia axial
Veia axilar
Veia basilica
Veia basílica acessória
Veia basílica medial
Veia braquial lateral
Veia braquiocefálica
Veia cava
Veia cava inferior
Veia cava superior
Veia cefálica
Veia cefálica acessória
Veia cefálica medial
Veia cefálica mediana
Veia ciática
Veia circunflexa da coxa anterior
Veia circunflexa da coxa posterior
Veia colateral
Veia colateral púbica cruzada
Veia comunicantes
Veia cubital mediana
Veia digital dorsal da mão
Veia do bulbo do pénis (sexo masculino)
Veia do bulbo do vestíbulo (sexo feminino)
Veia dorsal metatarsáica
Veia dorsal profunda do clítoris (sexo feminino)
Veia dorsal profunda do pénis (sexo masculino)
Veia dorsal superficial do clitoris ou do pénis
Veia epigástrica inferior
Veia epigástrica superficial
Veia femoral
Veia femoral circunflexa lateral
Veia femoral circunflexa medial
Veia femoral comum
Veia femoral profunda
Veia GIACOMINI
Veia glútea inferior; consultar veia inferior glútea
Veia grande safena
Veia ilíaca circunflexa profunda
Veia ilíaca circunflexa superficial
Veia ilíaca comum
Veia ilíaca externa
Veia ilíaca interna (hipogástrica)
<table>
<thead>
<tr>
<th>PT</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veia iliolumbar</td>
<td>iliolumbar vein</td>
</tr>
<tr>
<td>Veia incompetente</td>
<td>incompetent vein</td>
</tr>
<tr>
<td>Veia intergemelar ou veia intergastrocnémio</td>
<td>Intergemellar or intergastrocnemial vein</td>
</tr>
<tr>
<td>Veia jugular interna</td>
<td>Internal jugular vein</td>
</tr>
<tr>
<td>Veia marginal lateral do pé (comumente substituída por um plexo)</td>
<td>Lateral marginal vein of the foot</td>
</tr>
<tr>
<td>Veia marginal medial do pé</td>
<td>Medial marginal vein of the foot</td>
</tr>
<tr>
<td>Veia mediana do antebraço</td>
<td>Median vein of the forearm</td>
</tr>
<tr>
<td>Veia mediana do cotovelo</td>
<td>Median vein of the elbow</td>
</tr>
<tr>
<td>Veia mesentérica inferior</td>
<td>Inferior mesenteric vein</td>
</tr>
<tr>
<td>Veia mesentérica superior</td>
<td>Superior mesenteric vein</td>
</tr>
<tr>
<td>Veia não safena</td>
<td>Nonsaphenous vein</td>
</tr>
<tr>
<td>Veia ovárica</td>
<td>Ovarian vein</td>
</tr>
<tr>
<td>Veia perfurante</td>
<td>Perforator vein</td>
</tr>
<tr>
<td>veia perfurante da barriga da perna incompetente</td>
<td>Incompetent calf perforator</td>
</tr>
<tr>
<td>Veia perfurante da coxa lateral</td>
<td>Lateral thigh perforator vein</td>
</tr>
<tr>
<td>Veia perfurante da coxa medial do canal femoral</td>
<td>Medial thigh perforator vein of the femoral canal</td>
</tr>
<tr>
<td>Veia perfurante da coxa posterior posterolateral</td>
<td>Posterior thigh perforator vein posterolateral</td>
</tr>
<tr>
<td>Veia perfurante da coxa posterior posteromedia</td>
<td>Posterior thigh perforator vein posteromedia</td>
</tr>
<tr>
<td>Veia perfurante da fossa poplitea ou perfurante da fossa poplitea</td>
<td>Popliteal fossa perforating vein or popliteal fossa perforator</td>
</tr>
<tr>
<td>Veia perfurante da perna lateral</td>
<td>Lateral leg perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do gastrocnémi lateral</td>
<td>Lateral gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do gastrocnémi lateral da perna posterior</td>
<td>Posterior leg lateral gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do gastrocnémi médial da perna posterior</td>
<td>Posterior leg medial gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do glúteo médio</td>
<td>Midgluteal perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do glúteo superior</td>
<td>Superior gluteal perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do joelho lateral</td>
<td>Lateral knee perforator vein</td>
</tr>
<tr>
<td>Veia perfurante do pê dorsal</td>
<td>Dorsal foot perforator (perforating) vein</td>
</tr>
<tr>
<td>Veia perfurante do tornozelo medial; ver veias perfurantes tibiais posteriores</td>
<td>Medial ankle perforator vein. See posterior tibial perforator veins</td>
</tr>
<tr>
<td>Veia perfurante indireta</td>
<td>Indirect perforating vein</td>
</tr>
<tr>
<td>Veia perfurante infrarrotular</td>
<td>Infrapatellar perforator vein</td>
</tr>
<tr>
<td>Veia perfurante inguinal da coxa medial</td>
<td>Medial thigh inguinal perforator vein</td>
</tr>
<tr>
<td>Veia perfurante pudenda</td>
<td>Pudendal perforator veins</td>
</tr>
<tr>
<td>Veia perfurante superrotular</td>
<td>Suprapatellar perforator vein</td>
</tr>
<tr>
<td>Veia perfurante tibial posterior da perna medial (anteriormente veia perfurante de COCKETT)</td>
<td>Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)</td>
</tr>
<tr>
<td>Veia plantar metatársica</td>
<td>Metatarsal plantar vein</td>
</tr>
<tr>
<td>Veia podal</td>
<td>Pedal vein</td>
</tr>
<tr>
<td>Veia poplitea</td>
<td>Popliteal vein</td>
</tr>
<tr>
<td>Veia púbica</td>
<td>Pubic vein</td>
</tr>
<tr>
<td>Veia pudenda externa</td>
<td>External pudendal vein</td>
</tr>
<tr>
<td>Veia pudenda externa superficial</td>
<td>Superficial external pudendal vein</td>
</tr>
<tr>
<td>Veia pudenda interna</td>
<td>Internal pudendal vein</td>
</tr>
<tr>
<td>Veia radial</td>
<td>Radial vein</td>
</tr>
<tr>
<td>Veia renal</td>
<td>Renal vein</td>
</tr>
<tr>
<td>Veia retal superior</td>
<td>Superior rectal vein</td>
</tr>
<tr>
<td>Veia reticular</td>
<td>Reticular vein</td>
</tr>
<tr>
<td>Veia sacral mediana</td>
<td>Median sacral vein</td>
</tr>
<tr>
<td>Veia safena acessória posterior</td>
<td>Posterior accessory saphenous vein</td>
</tr>
<tr>
<td>PT</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------</td>
</tr>
<tr>
<td>Veia safena pequena (VSP)</td>
<td><em>Small saphenous vein. See also cranial extension of the small saphenous vein</em></td>
</tr>
<tr>
<td>Veia subclávia</td>
<td><em>Subclavian vein</em></td>
</tr>
<tr>
<td>Veia superficial</td>
<td><em>Superficial vein</em></td>
</tr>
<tr>
<td>Veia trabeculada</td>
<td><em>Trabeculated vein</em></td>
</tr>
<tr>
<td>Veia varicosa pós-trombótica</td>
<td><em>Postthrombotic varicose vein</em></td>
</tr>
<tr>
<td>Veia X</td>
<td><em>X-vein</em></td>
</tr>
<tr>
<td>Veia(s) intersafena</td>
<td><em>Intersaphenous vein(s)</em></td>
</tr>
<tr>
<td>Veias ázigos</td>
<td><em>Azygos veins</em></td>
</tr>
<tr>
<td>Veias braquiais</td>
<td><em>Brachial veins</em></td>
</tr>
<tr>
<td>Veias cubitais</td>
<td><em>Ulnar veins</em></td>
</tr>
<tr>
<td>Veias de aviso Maleolares; ver coroa flebectásica paraplantar</td>
<td><em>Maleolar flare. See corona phlebectatica paraplantaris</em></td>
</tr>
<tr>
<td>Veias de aviso no tornozelo; ver coroa flebectásica paraplantar</td>
<td><em>Ankle flare. See corona phlebectatica paraplantaris</em></td>
</tr>
<tr>
<td>Veias digitais profundas (plantares e dorsais)</td>
<td><em>Deep digital veins (plantar and dorsal)</em></td>
</tr>
<tr>
<td>Veias digitais superficiais (dorsal e plantar) do membro inferior</td>
<td><em>Superficial digital veins (dorsal and plantar) of the lower limb</em></td>
</tr>
<tr>
<td>Veias digitais superficiais (dorsal e plantar) do membro superior</td>
<td><em>Superficial digital veins (dorsal and plantar) of the upper limb</em></td>
</tr>
<tr>
<td>Veias do bulbo uretral (sexo masculino)</td>
<td><em>Urethral bulb veins (male)</em></td>
</tr>
<tr>
<td>Veias do gastrocnêmio</td>
<td><em>Gastrocnemius veins</em></td>
</tr>
<tr>
<td>Veias do gastrocnêmio lateral</td>
<td><em>Lateral gastrocnemius veins</em></td>
</tr>
<tr>
<td>Veias do gastrocnêmio medial</td>
<td><em>Medial gastrocnemius veins</em></td>
</tr>
<tr>
<td>Veias escrotais anteriores</td>
<td><em>Anterior scrotal veins</em></td>
</tr>
<tr>
<td>Veias escrotais posteriores (sexo masculino)</td>
<td><em>Posterior scrotal veins (male)</em></td>
</tr>
<tr>
<td>Veias fibulares ou peroneais</td>
<td><em>Fibular or peroneal veins</em></td>
</tr>
<tr>
<td>Veias finas; ver telangiectasia ou aranhas vasculares</td>
<td><em>Thread vein. See telangiectasia</em></td>
</tr>
<tr>
<td>Veias glúteas inferiores</td>
<td><em>Inferior gluteal veins</em></td>
</tr>
<tr>
<td>Veias glúteas superiores</td>
<td><em>Superior gluteal veins</em></td>
</tr>
<tr>
<td>Veias gonadais</td>
<td><em>Gonadal veins</em></td>
</tr>
<tr>
<td>Veias interósseas anteriores</td>
<td><em>Anterior interosseous veins</em></td>
</tr>
<tr>
<td>Veias labiais anteriores</td>
<td><em>Anterior labial veins</em></td>
</tr>
<tr>
<td>Veias labiais posteriores (sexo feminino)</td>
<td><em>Posterior labial veins (female)</em></td>
</tr>
<tr>
<td>Veias lombares</td>
<td><em>Lumbar veins</em></td>
</tr>
<tr>
<td>Veias metacárpicas dorsais</td>
<td><em>Dorsal metacarpal veins</em></td>
</tr>
<tr>
<td>Veias metatarsais profundas (plantar e dorsal)</td>
<td><em>Deep metatarsal veins (plantar and dorsal)</em></td>
</tr>
<tr>
<td>Veias metatarsais superficiais (dorsal e plantar)</td>
<td><em>Superficial metatarsal veins (dorsal and plantar)</em></td>
</tr>
<tr>
<td>Veias musculares</td>
<td><em>Muscular veins</em></td>
</tr>
<tr>
<td>Veias obturadoras</td>
<td><em>Obturator veins</em></td>
</tr>
<tr>
<td>Veias perforantes da coxa anterior</td>
<td><em>Anterior thigh perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes da perna anterior</td>
<td><em>Anterior leg perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes da perna medial</td>
<td><em>Medial leg perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes diretas</td>
<td><em>Direct perforating veins</em></td>
</tr>
<tr>
<td>Veias perforantes do gastrocnêmio medial</td>
<td><em>Medial gastrocnemius perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes do pé lateral</td>
<td><em>Lateral foot perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes do pé medial</td>
<td><em>Medial foot perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes do tornozelo lateral</td>
<td><em>Lateral ankle perforator veins</em></td>
</tr>
<tr>
<td>Veias perforantes tibiais posteriores</td>
<td><em>Posterior tibial perforator veins</em></td>
</tr>
<tr>
<td>Veias perineais superficiais</td>
<td><em>Superficial perineal veins</em></td>
</tr>
<tr>
<td>Veias plantares mediais</td>
<td><em>Medial plantar veins</em></td>
</tr>
</tbody>
</table>
Veias profundas
Veias profundas do clítoris ou veias dorsais profundas do clítoris (sexo feminino)
Veias profundas do pénis (sexo masculino)
Veias reais inferiores
Veias reais médias
Veias sacrais laterais
Veias safenas
Veias suprapúbicas
Veias suprarrenais ou adrenais
Veias testiculares
Veias tibiais anteriores
Veias tibiais posteriores
Veias uterinas (sexo feminino)
Veias vaginais (sexo feminino)
Veias varicosas pudendas
Veias varicosas sintomáticas
Velocidade do refluxo de pico
Venectasia; ver flebectasia ou varice, veia varicosa, varicosidade
Venoconstricção
Venografia à base de gadolínio
Venografia por ressonância magnética
Venografia por ressonância magnética melhorada com contraste
Venografia por tomografia computorizada ou venografia por tomografia computorizada em espiral
Venografia; ver também flebografia/venografia ascendente e flebografia/venografia descendente
Venoplastia
Venopunção ou venipunção
Venesseutura
Venotomia (flebectomia; venessecção)
Volume de ejeção
Volume venoso de trabalho
Volumetria do pé
Voo de longa distância; ver tromboembolismo venoso relacionado com viagens aéreas
Wallstent™
Ximelagatran
Zona do maléolo medial

Deep vein
Deep veins of the clitoris or deep dorsal veins of the clitoris (female)
Deep veins of the penis (male)
Inferior rectal veins
Middle rectal veins
Lateral sacral veins
Saphenous veins
Suprapubic veins
Suprarenal or adrenal veins
Testicular veins
Anterior tibial veins
Posterior tibial veins
Uterine veins (female)
Vaginal veins (female)
Pudendal varicose veins
Symptomatic varicose veins
Peak reflux velocity
Venectasia. See also phlebectasia or varice, varicose vein, varicosity
Venoconstriction
Gadolinium-based venography
Magnetic resonance venography
Contrast-enhanced magnetic resonance venography
Computed tomography venography or spiral computed tomography venography
Venography. See also ascending phlebography/venography and descending phlebography/venography
Venoplasty
Venepuncture or venipuncture
Venesuture
Venotomy (phlebotomy, venesection)
Ejection volume
Working venous volume
Foot volumetry
Long-haul flight. See air travel-related venous thromboembolism
Wallstent™
Ximelagatran
Gaiter zone
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Абердинская шкала тяжести варикозной болезни (AVVSS)</td>
<td>Aberdeen Varicose Vein Severity Score</td>
</tr>
<tr>
<td>Абердинский опросник тяжести варикозной болезни (AVVQ)</td>
<td>Aberdeen Varicose Vein Questionnaire</td>
</tr>
<tr>
<td>Абляция варикозных узлов или варикозных вен, см. Абляция вены</td>
<td>Varices or varicose vein ablation. See vein ablation</td>
</tr>
<tr>
<td>Абляция вены</td>
<td>Vein ablation</td>
</tr>
<tr>
<td>Абляция паром</td>
<td>Steam ablation</td>
</tr>
<tr>
<td>Абляция перфорантной вены или перфоранта</td>
<td>Perforator vein ablation or perforator ablation</td>
</tr>
<tr>
<td>Абляция ствола большой подкожной вены</td>
<td>Truncal venous ablation</td>
</tr>
<tr>
<td>Адамса-Дьюезий зажим или фильтр</td>
<td>ADAMS-DEWESE clip or filter</td>
</tr>
<tr>
<td>Аксиальный вена</td>
<td>Axial vein</td>
</tr>
<tr>
<td>Аксиальный рефлюкс</td>
<td>Axial reflux</td>
</tr>
<tr>
<td>Активация лейкоцитов</td>
<td>Leukocyte activation</td>
</tr>
<tr>
<td>Активная венозная трофическая язва, см. Трофические язвы на ногах</td>
<td>Active venous ulcer. See venous leg ulcer</td>
</tr>
<tr>
<td>Аллографт с сохраненными клапанами</td>
<td>Allograft valve</td>
</tr>
<tr>
<td>Альфа-бензопирон</td>
<td>Alpha benzopyrone</td>
</tr>
<tr>
<td>Амбулаторная минифлебэктомия</td>
<td>Ambulatory stab avulsion</td>
</tr>
<tr>
<td>Амбулаторная флебэктомия по Мюллеру</td>
<td>MULLER's ambulatory phlebectomy</td>
</tr>
<tr>
<td>Амбулаторная флебэктомия, см. Амбулаторная минифлебэктомия</td>
<td>Ambulatory phlebectomy. See ambulatory stab avulsion</td>
</tr>
<tr>
<td>Амбулаторное венозное давление (AVP)</td>
<td>Ambulatory venous pressure</td>
</tr>
<tr>
<td>Американский венозный форум</td>
<td>American Venous Forum (AVF)</td>
</tr>
<tr>
<td>Антитромбин (антитромбин III)</td>
<td>Antithrombin (antithrombin III)</td>
</tr>
<tr>
<td>Антитромбиновый синдром (АФС)</td>
<td>Antiphospholipid syndrome</td>
</tr>
<tr>
<td>Антбиотик, см. также Биофлавоноиды</td>
<td>Anthocyanins. See also bioflavonoids</td>
</tr>
<tr>
<td>Ангиома</td>
<td>Angioma</td>
</tr>
<tr>
<td>Аневризма вены</td>
<td>Venous aneurysm</td>
</tr>
<tr>
<td>Аневризма подколенной вены</td>
<td>Popliteal vein aneurysm</td>
</tr>
<tr>
<td>Аневризма, см. Аневризма вены</td>
<td>Aneurysm. See venous aneurysm</td>
</tr>
<tr>
<td>Анестезия для хирургического лечения варикозных вен</td>
<td>Anesthesia for interventional treatment of varicose veins</td>
</tr>
<tr>
<td>Антагонист витамина K</td>
<td>Vitamin K antagonist</td>
</tr>
<tr>
<td>Антериальная клиническая шкала риска легочной эмболии</td>
<td>Antwerp clinical score for pulmonary embolism</td>
</tr>
<tr>
<td>Антикоагулянты</td>
<td>Antithrombotic agents</td>
</tr>
<tr>
<td>Антивитамин K</td>
<td>Antithrombin (antithrombin III)</td>
</tr>
<tr>
<td>Ангиома</td>
<td>Antiphospholipid syndrome</td>
</tr>
<tr>
<td>Антацид, см. также Биофлавоноиды</td>
<td>Anthocyanins. See also bioflavonoids</td>
</tr>
<tr>
<td>Антигеморроидальный</td>
<td>Apixaban</td>
</tr>
<tr>
<td>Антигеморроидальный</td>
<td>X-vein</td>
</tr>
<tr>
<td>Артериовенозная мальформация (ABM)</td>
<td>Arteriovenous malformation</td>
</tr>
<tr>
<td>Артериовенозная фистула</td>
<td>Arteriovenous fistula</td>
</tr>
<tr>
<td>Артерия вены</td>
<td>Vein atresia</td>
</tr>
<tr>
<td>Аутологичный венозный клапан</td>
<td>Autologous vein valve</td>
</tr>
<tr>
<td>Аутотрансплантация функционирующего клапана в подколенную вену, см. Пересадка клапана</td>
<td>Autotransplantation of a competent valve into the popliteal vein. See valve transplantation</td>
</tr>
<tr>
<td>Ацетокумарол</td>
<td>Acenocoumarol</td>
</tr>
<tr>
<td>Ацетиламин, см. Экстракт из семян или корня конского каштана</td>
<td>Aescin. See horse chestnut seed or root extract</td>
</tr>
<tr>
<td>Баллон - расширяемый стент</td>
<td>Balloon-expanding stent</td>
</tr>
<tr>
<td>Баллонная ангиопластика вены</td>
<td>Venous balloon angioplasty</td>
</tr>
<tr>
<td>Бедренная вена</td>
<td>Femoral vein</td>
</tr>
<tr>
<td>Бедренное продолжение малой подкожной вены</td>
<td>Thigh extension of the small saphenous vein</td>
</tr>
</tbody>
</table>
TERMS IN OTHER LANGUAGES

RU

Белая атрофия кожи ног при варикозе
Белая болевая флегмазия или белая нога
Бивалридин
Бинт короткой растяжимости, см. неэластичный бинт
Биопротетический венозный клапан
Биопротетический клапан или клапан PAVCNIK
Биофлавоноиды
Болезнь БЕХЧЕТА
Болезнь БЮРГЕРА
Болезнь МОНДОРА
Боль, см. Ноющая боль
Большой подкожной вены
Брахиальные вены
Валик створки
Вальвулопластика
Вальвулопластика SOTTIURAI
Вальвулопластика муфтой из синтетического материала
Варикоз, варикозная вена, варикозно расширенная вена
Варикозно расширенные вены, см. Варикоз, варикозная вена, варикозно расширенная вена
Варикозное расширение вен круглых связок матки
Варикозное расширение вен малого таза
Варикозное расширение промежности
Варикозное расширение половых вен
Варикозное расширение тазовых вен, см. Варикозное расширение вен малого таза
Варикоцеле
Варфарин
Веерообразные вены на медиальной или латеральной поверхности лодыжки и стопы, см. Венозная корона стопы
Веерообразные вены на медиальной или латеральной поверхности стопы, см. Венозная корона стопы
Вена
Вена ДЖАКОМИНИ
Вена луковицы полового члена (у мужчин)
Вена луковицы преддверия влагалища (у женщин)
Вена соединяющая основные стволы подкожных вен (анастомоз)
Венепункция или пункция вены
Веноактивные препараты
Вено-артериальный индекс потока
Вено-артериальный рефлекс (постуральный вазоконстрикторный рефлекс)
Вено-артериолярный ответ
Венография на основе гадолиния
Венография см. также Восходящая флебография/венография и Нисходящая флебография/венография
Венозная аблация

EN

・ Atrophie blanche (white atrophy)
・ Phlegmasia alba dolens or white leg
・ Bivalirudin
・ Short-stretch bandage. See inelastic bandage
・ Venous bioprosthetic valve
・ Portland valve or PAVCNIK valve
・ Bioflavonoids
・ BEHÇET’s disease
・ BUERGER’s disease
・ MONDOR’s disease
・ Pain. See aching
・ Great saphenous vein
・ Brachial veins
・ Valvular agger
・ Valvuloplasty
・ SOTTIURAI’s valvuloplasty
・ Prosthetic sleeve valvuloplasty
・ Raju’s valvuloplasty
・ KISTNER’s valvuloplasty
・ TRIPATHI trap door valve repair
・ Varicography
・ Varice, varicose vein, varicosity
・ Varicosity. See varice, varicose vein, varicosity
・ Round ligament varices
・ Pelvic varices
・ Perineal varicosities
・ Pudendal varicose veins
・ Pelvic varicosity. See pelvic varices
・ Varicocele
・ Warfarin
・ Malleolar flare. See corona phlebectatica paraplantaris
・ Ankle flare. See corona phlebectatica paraplantaris
・ Vein
・ GIACOMINI vein
・ Vein of the bulb of the penis (male)
・ Vein of the bulb of the vestibule (female)
・ Intersaphenous vein(s)
・ Venepuncture or venipuncture
・ Venoactive drugs
・ Venoarterial flow index
・ Venoarterial reflex (postural vasoconstriction reflex)
・ Venoarteriolar response
・ Gadolinium-based venography
・ Venography. See also ascending phlebography/venography and descending phlebography/venography
・ Venous ablation
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Венозная гангrena</td>
<td>Venous gangrene</td>
</tr>
<tr>
<td>Венозная гемодинамика</td>
<td>Venous hemodynamics</td>
</tr>
<tr>
<td>Венозная гипертензия</td>
<td>Ambulatory venous hypertension / Venous hypertension</td>
</tr>
<tr>
<td>Венозная компрессия</td>
<td>Venous compression</td>
</tr>
<tr>
<td>Венозная корона столы</td>
<td>Corona phlebectatica paraplantaris</td>
</tr>
<tr>
<td>Венозная корона, см. Венозная корона столы</td>
<td>See corona phlebectatica paraplantaris</td>
</tr>
<tr>
<td>Венозная обструкция</td>
<td>Venous obstruction</td>
</tr>
<tr>
<td>Венозная окклюзия</td>
<td>Venous occlusion</td>
</tr>
<tr>
<td>Венозная перемежающаяся хромота</td>
<td>Venous claudication</td>
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<tr>
<td>Венозная сеть тыла столы</td>
<td>Dorsal venous network of the foot</td>
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<tr>
<td>Венозная система</td>
<td>Venous system</td>
</tr>
<tr>
<td>Венозная тромбоэмболия (ВТЭ)</td>
<td>Venous thromboembolism</td>
</tr>
<tr>
<td>Венозная тромбэктомия</td>
<td>Surgical venous thrombectomy / Venous thrombectomy</td>
</tr>
<tr>
<td>Венозная экзема (варикозная экзема, гравитационная экзема, застойный дерматит)</td>
<td>Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)</td>
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<tr>
<td>Венозное давление</td>
<td>Venous pressure</td>
</tr>
<tr>
<td>Венозное сплетение влагалища (у женщин)</td>
<td>Vaginal venous plexus (female)</td>
</tr>
<tr>
<td>Венозный клапан</td>
<td>Venous valve</td>
</tr>
<tr>
<td>Венозный отек (флебедема)</td>
<td>Venous edema (phlebedema)</td>
</tr>
<tr>
<td>Венозный поток</td>
<td>Venous flow</td>
</tr>
<tr>
<td>Венозный рефлюкс</td>
<td>Venous reflux</td>
</tr>
<tr>
<td>Венозный тромб см. также Венозный тромбоз</td>
<td>Venous thrombus. See also venous thrombosis</td>
</tr>
<tr>
<td>Венозный тромбоз</td>
<td>Venous thrombosis</td>
</tr>
<tr>
<td>Венозный тромбоз - факторы риска</td>
<td>Venous thrombosis risk factors. See risk factors for deep venous thrombosis</td>
</tr>
<tr>
<td>Венозный шунт</td>
<td>Venous bypass</td>
</tr>
<tr>
<td>Веноконстрикция</td>
<td>Venoconstriction</td>
</tr>
<tr>
<td>Венопластика</td>
<td>Venoplasty</td>
</tr>
<tr>
<td>Венотомия</td>
<td>Venotomy (phlebotomy, venesection)</td>
</tr>
<tr>
<td>Венотонические препараты, см. веноактивные препараты</td>
<td>Venotonic drugs. See vеноactive drugs</td>
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<tr>
<td>Вентиляционно-перфузионная сцинтиграфия</td>
<td>Ventilation-perfusion scintigraphy</td>
</tr>
<tr>
<td>Вены влагалища (у женщин)</td>
<td>Vaginal veins (female)</td>
</tr>
<tr>
<td>Вены луковицы мочеиспускательного канала (у мужчин)</td>
<td>Urethral bulb veins (male)</td>
</tr>
<tr>
<td>Вены матки (у женщин)</td>
<td>Uterine veins (female)</td>
</tr>
<tr>
<td>Вены мышц</td>
<td>Muscular veins</td>
</tr>
<tr>
<td>Венэктазия, см. Флебэктазия, или Варикоз, варикозная вена, варикозно расширенная вена</td>
<td>Venectasia. See also phlebectasia or varice, varicose vein, varicosity</td>
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<tr>
<td>Верхние ягодичные вены</td>
<td>Superior gluteal veins</td>
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<tr>
<td>Верхняя брыжеечная вена</td>
<td>Superior mesenteric vein</td>
</tr>
<tr>
<td>Верхняя полая вена</td>
<td>Superior vena cava</td>
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<tr>
<td>Верхняя ректальная вена</td>
<td>Superior rectal vein</td>
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<tr>
<td>Верхняя ягодичная перфорантная вена</td>
<td>Superior gluteal perforator vein</td>
</tr>
<tr>
<td>Винный (пламенеющий) невус</td>
<td>Port-wine stain</td>
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<tr>
<td>Внутренняя вальвулопластика</td>
<td>Internal valvuloplasty</td>
</tr>
<tr>
<td>Внутренняя подвздошная вена (Подчревная)</td>
<td>Internal iliac vein (hypogastric)</td>
</tr>
<tr>
<td>Внутренняя половая вена</td>
<td>Internal pudendal vein</td>
</tr>
<tr>
<td>Внутренняя яремная вена</td>
<td>Internal jugular vein</td>
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<tr>
<td>Внутриarterиальное введение склерозанта</td>
<td>Intra-arterial injection of sclerosant</td>
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<tr>
<td>Внутривенная абляция паром</td>
<td>Endovenous steam ablation</td>
</tr>
<tr>
<td>Внутривенная лазерная абляция подкожных вен</td>
<td>Endovenous laser ablation of saphenous veins</td>
</tr>
</tbody>
</table>
Внутривенная лазерная абляция см. Внутривенная лазерная абляция подкожных вен
Внутривенная лазерная терапия см. также Внутривенная лазерная абляция подкожных вен
Внутривенная радиочастотная абляция
Внутривенная тепловая абляция
Внутривенная терапия
Внутривенные методы, см. Внутривенные техники
Внутривенные техники
Внутривенный
Внутрикостная гемангиома
Внутримышечное давление
Внутрисосудистое ультразвуковое исследование (ВСУЗИ) (в флебологии)
Воздушная плетизмография (ВПГ)
Волокно, см. Лазерные волокна
Волюметрия ноги
Восстановление клапана, см. Реконструкция клапана
Восстановление проходимости при повторных вмешательствах
Восходящая теория развития варикозной болезни
Восходящая флебография/венография
Временная артериовенозная фистула
Время венозного наполнения
Время возвратного кровенаполнения
Время возобновления наполнения вен, см. Время возвратного кровенаполнения
Время смыкания створок клапана
Врожденная сосудистая мальформация
Вторичная клапанная недостаточность вен
Высокая перевязка
Высокая перевязка и стриппинг
Высокая перевязка с разделением
Гамбургская классификация
Гамма бензопирон, см. Флавоноиды
Гемангиома
Гемангиоэндотелиома
Гепарин
Гепарин-индуцированная тромбоцитопения
Гибридная хирургическая тромбэктомия
Гидростатическое давление
Гиперпигментация кожи
Гипоплазия вен
Гирудин
Глицирин
Глубокая вена бедра
Глубокая вена бедра
Глубокая вена, огибающая подвздошную кость
Глубокая дорсальная вена клитора (у женщин)
Глубокая дорсальная вена полового члена (у мужчин)
Глубокая ладонная венозная дуга

EN

Laser ablation. See endovenous laser ablation of saphenous veins
Endovenous laser treatment. See endovenous laser ablation of saphenous veins
Endovenous radiofrequency ablation
Endovenous thermal ablation
Endovenous treatment
Endovenous procedure. See endovenous technique
Endovenous
Intraosseous hemangioma
Intramuscular pressure
Intravascular ultrasound in phlebology
Air plethysmography
Fiber. See laser fibers
Foot volumetry
Valve repair. See valve reconstruction
Secondary patency
Ascending theory for varicose veins
Ascending phlebography/venography
Temporary arteriovenous fistula
Venous filling time (VFT)
Refilling time
Venous refill time. See refilling time
Valve closure time
Congenital vascular malformation
Secondary venous incompetence
High ligation
High ligation and stripping
High ligation and division
Hamburg classification
Gamma benzopryrone. See flavonoids
Hemangioma
Hemangiendothelioma
Heparin
Heparin-induced thrombocytopenia
Hybrid operative thrombectomy
Hydrostatic pressure
Skin hyperpigmentation
Venous hypoplasia
Hirudin
Glycerin
Deep femoral vein
Profunda femoral vein
Deep circumflex iliac vein
Deep dorsal vein of clitoris (female)
Deep dorsal vein of penis (male)
Deep palmar venous arch
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Глубокие вены</td>
<td>Deep vein</td>
</tr>
<tr>
<td>Глубокие вены клитора или глубокие дорсальные вены клитора (у женщин)</td>
<td>Deep veins of the clitoris or deep dorsal veins of the clitoris (female)</td>
</tr>
<tr>
<td>Глубокие вены плюсны (подошвенные и тыльные)</td>
<td>Deep metatarsal veins (plantar and dorsal)</td>
</tr>
<tr>
<td>Глубокие вены полового члена (у мужчин)</td>
<td>Deep veins of the penis (male)</td>
</tr>
<tr>
<td>Глубокие пальцевые вены ног (подошвенные и тыльные)</td>
<td>Deep digital veins (plantar and dorsal)</td>
</tr>
<tr>
<td>Гонадные вены</td>
<td>Gonadal veins</td>
</tr>
<tr>
<td>Градуированная компрессия</td>
<td>Graduated elastic compression</td>
</tr>
<tr>
<td>D-димер</td>
<td>D-dimer</td>
</tr>
<tr>
<td>Дабигатран</td>
<td>Dabigatran (dabigatran etexilate)</td>
</tr>
<tr>
<td>Давление компрессионной повязки</td>
<td>Interface pressure</td>
</tr>
<tr>
<td>Дальний перелет, см. Тромбоз авиапутешественников</td>
<td>Long-haul flight. See air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Дальтепарин</td>
<td>Dalteparin (dalteparin sodium)</td>
</tr>
<tr>
<td>Двигательное беспокойство в ногах</td>
<td>Danaparoid (danaparoid sodium)</td>
</tr>
<tr>
<td>Двойные компрессионные леггинсы одевающиеся одни поверх других</td>
<td>Restless legs</td>
</tr>
<tr>
<td>Даустворчатый клапан вены</td>
<td>Superimposed leggings</td>
</tr>
<tr>
<td>Дерматит (венозный дерматит, венозная экзема)</td>
<td>Venous bicuspid valve</td>
</tr>
<tr>
<td>Динамический индекс жесткости</td>
<td>Dermatitis (venous dermatitis, venous eczema)</td>
</tr>
<tr>
<td>Динамическое венозное давление</td>
<td>Dynamic stiffness index</td>
</tr>
<tr>
<td>Диодный лазер</td>
<td>Dynamic venous pressure</td>
</tr>
<tr>
<td>Диосмин</td>
<td>Diode laser</td>
</tr>
<tr>
<td>Длина волны лазера в диапазоне пика абсорбции гемоглобина</td>
<td>Diosmin</td>
</tr>
<tr>
<td>Длинноимпульсный александритовый лазер, см. Александритовый длинноимпульсный лазер</td>
<td>Hemoglobin-specific laser wavelengths</td>
</tr>
<tr>
<td>Допплер УЗИ, см. Дуплексное сканирование</td>
<td>Long-pulse Alexandrite laser. See Alexandrite long-pulse laser</td>
</tr>
<tr>
<td>Допллере УЗИ, см. Дуплексное сканирование</td>
<td>Milking test</td>
</tr>
<tr>
<td>Дуплексная сонография, см. Дуплексное сканирование</td>
<td>Accessory cephalic vein</td>
</tr>
<tr>
<td>Европейский венозный форум</td>
<td>Accessory basilic vein</td>
</tr>
<tr>
<td>Европейское общество сосудистых хирургов</td>
<td>Doppler ultrasound. See duplex ultrasonography</td>
</tr>
<tr>
<td>Египетский глаз</td>
<td>Duplex sonography. See duplex ultrasonography</td>
</tr>
<tr>
<td>Емкость венозного русла</td>
<td>Duplex ultrasonography</td>
</tr>
<tr>
<td>Жар или ощущение жжения</td>
<td>European Venous Forum</td>
</tr>
<tr>
<td>Z-стент™</td>
<td>European Society for Vascular Surgery</td>
</tr>
<tr>
<td>Заболевания вен</td>
<td>Egyptian eye</td>
</tr>
<tr>
<td>Заднелатеральная перфорантная вена бедра</td>
<td>Venous capacitance</td>
</tr>
<tr>
<td>Заднемедиальная перфорантная вена бедра</td>
<td>Heat or burning sensation</td>
</tr>
<tr>
<td>Задние большеберцовые вены</td>
<td>Z-stent™</td>
</tr>
<tr>
<td>Задние губные вены (у женщин)</td>
<td>Venous disease</td>
</tr>
<tr>
<td>Задние губные вены (у мужчин)</td>
<td>Posterior thigh perforator vein postero-lateral</td>
</tr>
<tr>
<td>Задняя большеберцовая перфорантная вена</td>
<td>Posterior thigh perforator vein postero-medial</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Posterior tibial veins</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Posterior labial veins (female)</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Posterior scrotal veins (male)</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Posterior tibial perforator veins</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Posterior accessory saphenous vein</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Posterior leg lateral gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Задняя добавочная подкожная вена</td>
<td>Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)</td>
</tr>
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RU

Задняя медиальная икроножная перфорантная вена
Задняя огибающая вена бедра
Запирательные вены
Застой в тазовых венах, см. Синдром венозного полнокровия малого таза
Застойный дерматит
Затруднение венозного оттока
Зона гетр
Зонтичный кава-фильтр МОБИНА-УДДИНА
Зуд
Избыточный ангигенез
Извлекаемый кава-фильтр
Изменения венозной гемодинамики при заболеваниях вен
Икроножная вена
Импедансная плетизмография
Имплантация фильтра в супраренальный отдел нижней полой вены
Инвазивная радиология (в флебологии)
Индекс венозного дренажа
Индекс венозного наполнения
Интенсивное импульсное излучение
Инфильтрационная анестезия
Инфрапателлярная перфорантная вена
Искусственный венозный клапан
Исследование PREPIC
Исследование PREPIC 2 см. Исследование PREPIC
Исследование SEPS проводившееся в Северной Америке
Исследование оценки варикозной болезни и стандартизация обследования
Кава-фильтр «Птичье гнездо»
Кава-фильтр Amplatz
Кава-фильтр OptEase®
Кава-фильтр TrapEase®
Кава-фильтр™ «Тюльпан» ГЮНТЕРА см. также фильтр GREENFIELD™ и фильтр G2
Кава-фильтры
Кавернозная ангиома
Капиллярная мальформация
Катетер АКопуа для тромбэктомии и удаления тромбов
Катетер для радиочастотной аблиции и облитерации вен ClosureFAST™
Катетер Oasis®
Катетер-управляемый тромболизис (КУТ)
Качество жизни пациентов при заболеваниях вен
Клапан EISEMANN-MALETTE, см. Аутологичный венозный клапан
Клапан PAVCNIK
Клапан, см. венозный клапан
Клапанная несостоятельность глубоких вен

EN

- **Posterior leg medial gastrocnemius perforator vein**
- **Posterior thigh circumflex vein**
- **Obturator veins**
- **Congestion in the pelvic veins. See pelvic congestion syndrome**
- **Stasis dermatitis**
- **Venous outflow resistance**
- **Gaiter zone**
- **MOBIN-UDDIN umbrella**
- **Itching**
- **Matting**
- **Retrievable cava filter**
- **Venous hemodynamic changes in venous disease**
- **Gastrocnemius veins**
- **Impedance plethysmography**
- **Suprarenal cava filter**
- **Interventional radiology (in phlebology)**
- **Venous drainage index**
- **Venous filling index (VFI)**
- **Body mass index**
- **Recirculation index**
- **Intense pulsed light**
- **Tumescent anaesthesia**
- **Infrapatellar perforator vein**
- **Artificial venous valve**
- **PREPIC study**
- **PREPIC 2 study. See PREPIC study**
- **North American subfascial endoscopic perforator surgery (SEPS) study**
- **Investigating venous disease evaluation and standardization of testing**
- **Bird’s nest filter**
- **Amplatz inferior vena cava filter**
- **OptEase® filter**
- **TrapEase® vena cava filter**
- **GUNther™ tulip filter. See also GREENFIELD™ filter and G2 filter**
- **Caval filters**
- **Cavernous angioma**
- **Capillary malformation**
- **AKonya Eliminator – thrombectomy catheter**
- **ClosureFAST™ catheter**
- **Oasis® catheter**
- **Catheter-directed thrombolysis**
- **Quality of life in venous disease**
- **EISEMANN and MALETTE valve-like structures. See autologous vein valve**
- **PAVCNIK valve**
- **Valve. See venous valve**
- **Deep venous incompetence**
RU

Клапанный валик, см. Валик створки
Клапанный рефлюкс
Клапанный синус
Классификация СЕАР см.Клинические классы по классификации СЕАР
Классификация НАС
Классификация КАВНИК см. Образование тромба вследствие внутривенной термоабляции
Классификация ВИДМЕРА
Классификация ГЕРАНА, см. Классификация КИСТНЕРА
Классификация КИСТНЕРА
Классификация по клиническим проявлениям, этиологии заболевания, анатомической локализации и патофизиологии процесса
Классификация сосудистых аномалий Международного общества изучения сосудистых аномалий см. также Гамбургская классификация
Клинические классы по классификации СЕАР
Кожные изменения при заболеваниях вен
Количественная оценка венозного рефлюкса
Коллатеральная вена
Комиссуры створок клапанов
Коммуникативная вена
Компартмент синдромы при варикозной болезни
Комплекс Angiojet™ см. также Система Angiojet™
Компрессионная терапия
Компрессионная терапия трофической венозной язвы
Компрессионные бинты
Компрессионные чулки см. Компрессионные чулки
Компрессионный синдром верхней апертуры грудной клетки
Компрессия бедра
Компрессия вены, см. Венозная компрессия
Компрессия левой почечной вены см. также Синдром «щелкунчика»
Компрессия подвздошной вены
Компьютерная томографическая ангиография (КТА)
Компьютерная томография при болезнях вен
Консервативное лечение при болезнях вен
Контрастно-усиленная-МР венография
Кора приморской сосны произрастающей в Южной Франции
Крестцовое венозное сплетение, внутренние геморроидальные вены
Крестцовое венозное сплетение, наружные геморроидальные вены
Криоконсервированные венозные клапаны
Криостриппинг
Крассэктомия
Ксенотрансплантант клапана

EN

Valve agger. See valvular agger
Valvular reflux
Valve sinus
CEAP clinical classes. See clinical classes of the CEAP
HACH classification
KABNICK classification. See also endovenous heat-induced thrombus
WIDMER’s classification
HERMAN’s classification. See KISTNER’s classification
KISTNER’s classification
Clinical, Etiological, Anatomical, Physiopathological (CEAP) classification
International Society for the Study of Vascular Anomalies (classification of vascular anomaly). See also Hamburg classification
Clinical classes of the CEAP
Venous skin changes
Reflux quantification
Collateral vein
Valve commissure
Communicating veins
Compartment syndrome in venous disease
Power pulse Angiojet™. See also AngioJet™
Compression therapy
Compression therapy for venous ulcers
Compression pressure
Compression bandages
Compression stockings / Antithrombotic stockings. See compression hosiery
Thoracic outlet syndrome
Thigh compression
Vein compression. See venous compression
Left renal vein compression. See nutcracker syndrome
Iliac vein compression
Computed tomography venography or spiral computed tomography venography
Computed tomography in venous disease
Conservative treatment in venous disease
Contrast-enhanced magnetic resonance venography
French maritime pine bark
Cranial extension of the small saphenous vein
Sacral venous internal rectal plexus
Sacral venous external rectal plexus
Cryopreserved venous valves
Cryostripping
Crossectomy
Xenograft valve
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ксмелагатран</td>
<td>Ximelagatran</td>
</tr>
<tr>
<td>Кумарин</td>
<td>Coumarin</td>
</tr>
<tr>
<td>Лазер КТР</td>
<td>KTP laser</td>
</tr>
<tr>
<td>Лазер ND-YAG (на алюмоиттриевом гранате с примесью неодима)</td>
<td>ND-YAG laser (neodymium-doped yttrium aluminum garnet)</td>
</tr>
<tr>
<td>Лазер на алюмоиттриевом гранате, см. Лазер ND-YAG</td>
<td>YAG laser. See ND-YAG laser</td>
</tr>
<tr>
<td>Лазерная доплеровская флуметрия</td>
<td>Laser doppler flowmetry</td>
</tr>
<tr>
<td>Лазерное излучение с длинами волн поглощаемых преимущественно водой</td>
<td>Water-specific laser wavelengths</td>
</tr>
<tr>
<td>Лазерные волокна</td>
<td>Laser fibers</td>
</tr>
<tr>
<td>Лазерный генератор</td>
<td>Laser generator</td>
</tr>
<tr>
<td>Латеральная вена огибающая бедро</td>
<td>Lateral circumflex femoral vein</td>
</tr>
<tr>
<td>Латеральная венозная система, см. Латеральное сплетение АЛЬБАНЕЗЕ</td>
<td>Lateral venous system. See ALBANESE venous system</td>
</tr>
<tr>
<td>Латеральная икроножная вена</td>
<td>Lateral gastrocnemius veins</td>
</tr>
<tr>
<td>Латеральная икроножная перфорантная вена</td>
<td>Lateral gastrocnemius perforator vein</td>
</tr>
<tr>
<td>Латеральная краевая вена стопы (обычно заменяется сплетением)</td>
<td>Lateral marginal vein of the foot</td>
</tr>
<tr>
<td>Латеральная перфорантная вена бедра</td>
<td>Lateral thigh perforator vein</td>
</tr>
<tr>
<td>Латеральная перфорантная вена области коленного сустава</td>
<td>Lateral knee perforator vein</td>
</tr>
<tr>
<td>Латеральная плечевая вена</td>
<td>Lateral brachial vein</td>
</tr>
<tr>
<td>Латеральное сплетение АЛЬБАНЕЗЕ</td>
<td>ALBANESE venous system</td>
</tr>
<tr>
<td>Латеральные крестцовые вены</td>
<td>Lateral sacral veins</td>
</tr>
<tr>
<td>Латеральные перфорантные вены голени</td>
<td>Lateral leg perforator vein</td>
</tr>
<tr>
<td>Латеральные перфорантные вены лодыжки</td>
<td>Lateral ankle perforator veins</td>
</tr>
<tr>
<td>Латеральные перфорантные вены стопы</td>
<td>Lateral foot perforator veins</td>
</tr>
<tr>
<td>Латеральные перфорантные вены голени</td>
<td>Pulmonary embolism or pulmonary thromboembolism</td>
</tr>
<tr>
<td>Латеральные перфорантные вены голени</td>
<td>Factor V Leiden mutation (heterozygous, homozygous)</td>
</tr>
<tr>
<td>Лечебная эмболия или легочная тромбоэмболия</td>
<td>Adhesive bandage</td>
</tr>
<tr>
<td>Лейденовская мутация гена F5 (гетерозиготная, гомозиготная)</td>
<td>Leiomysarcoma</td>
</tr>
<tr>
<td>Липостабильная повязка</td>
<td>Venous drugs</td>
</tr>
<tr>
<td>Лейкомиосаркома</td>
<td>Valve leaflet. See valve cuspid or cusp</td>
</tr>
<tr>
<td>Лекарственные препараты для лечения заболеваний вен</td>
<td>Lepirudin</td>
</tr>
<tr>
<td>Лепесток клапана, см. Створка клапана</td>
<td>Venous thrombolytic treatment</td>
</tr>
<tr>
<td>Лепирудин</td>
<td>Oxygen, hyperbaric treatment of venous ulcers</td>
</tr>
<tr>
<td>Лечение венозной тромбоэмболии</td>
<td>Lysus infusion catheter system (EKOS)</td>
</tr>
<tr>
<td>Лечение трофических язв методом гипербарической оксигенации</td>
<td>Lipedema</td>
</tr>
<tr>
<td>LYSUS, катетер для УЗ тромболизиса (EKOS)</td>
<td>Lipodermatosclerosis</td>
</tr>
<tr>
<td>Липедема</td>
<td>Ankle brachial index or ankle-brachial pressure index</td>
</tr>
<tr>
<td>Липодерматосклероз</td>
<td>Pampiniform plexus</td>
</tr>
<tr>
<td>Лодыжечно-плечевой индекс (ЛПИ)</td>
<td>Saphenous compartment. See Egyptian eye</td>
</tr>
<tr>
<td>Лозовидное сплетение</td>
<td>Ulnar veins</td>
</tr>
<tr>
<td>Локализация большой подкожной вены, см. Египетский глаз</td>
<td>Pubic vein</td>
</tr>
<tr>
<td>Локтевые вены</td>
<td>Radial vein</td>
</tr>
<tr>
<td>Лонная вена</td>
<td>Magnetic resonance venography</td>
</tr>
<tr>
<td>Лучевая вена</td>
<td>Small saphenous vein. See also cranial extension of the small saphenous vein</td>
</tr>
<tr>
<td>Лучевая вена</td>
<td>Fibular or peroneal veins</td>
</tr>
<tr>
<td>Магнитно-резонансная венография</td>
<td></td>
</tr>
<tr>
<td>Малая подкожная вена (МПВ) см. также Крациальное продолжение малой подкожной вены</td>
<td></td>
</tr>
<tr>
<td>Малоберцовые вены</td>
<td></td>
</tr>
<tr>
<td>RU</td>
<td>EN</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Мальформация вен</td>
<td>Venous malformation</td>
</tr>
<tr>
<td>Мальформация внутрикостной вены</td>
<td>Intraosseous venous malformation</td>
</tr>
<tr>
<td>Мальформация ствола большой подкожной вены</td>
<td>Truncular malformation</td>
</tr>
<tr>
<td>Мастоциты При Хронических Болезнях Вен</td>
<td>Mast cells in chronic venous disease</td>
</tr>
<tr>
<td>Маточное венозное сплетение (у женщин)</td>
<td>Uterine venous plexus (female)</td>
</tr>
<tr>
<td>Матриксные металлопротеиназы (ММП)</td>
<td>Matrix metalloproteinases</td>
</tr>
<tr>
<td>Медиальная вена огибающая бедро</td>
<td>Medial circumflex femoral vein</td>
</tr>
<tr>
<td>Медиальная икроножная вена</td>
<td>Medial gastrocnemius veins</td>
</tr>
<tr>
<td>Медиальная икроножная перфорантная вена</td>
<td>Medial gastrocnemius perforator veins</td>
</tr>
<tr>
<td>Медиальная краевая вена стопы</td>
<td>Medial marginal vein of the foot</td>
</tr>
<tr>
<td>Медиальная перфорантная вена лодыжки см. Задняя большеберцовая перфорантная вена</td>
<td>Medial ankle perforator vein. See posterior tibial perforator veins</td>
</tr>
<tr>
<td>Медиальная подошвенная вена</td>
<td>Medial plantar veins</td>
</tr>
<tr>
<td>Медиальные бедренно-паховые перфорантные вены</td>
<td>Medial thigh inguinal perforator vein</td>
</tr>
<tr>
<td>Медиальные перфорантные вены бедренного канала</td>
<td>Medial thigh perforator vein of the femoral canal</td>
</tr>
<tr>
<td>Медиальные перфорантные вены стопы</td>
<td>Medial foot perforator veins</td>
</tr>
<tr>
<td>Медиальные перфорантные вены стопы</td>
<td>Medical compression stockings</td>
</tr>
<tr>
<td>Медицинские компрессионные чулки</td>
<td>Integemellar vein or intergastrocnenial vein</td>
</tr>
<tr>
<td>Междуглазная вена</td>
<td>International Union of Phlebology</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>Air-block technique</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>PSATAKIS silastic sling procedure</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>TESSARI technique</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>Mechanicochemical ablation</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>Mechanical thrombectomy</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>MAY-HUSNI bypass. See saphenopopliteal bypass</td>
</tr>
<tr>
<td>Международный союз флебологов (IUP)</td>
<td>Micronized purified flavonoid fraction (MPFF)</td>
</tr>
<tr>
<td>Микрокапельная склеротерапия, см. Пенная склеротерапия</td>
<td>Microfoam sclerotherapy. See foam sclerotherapy</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Microphlebectomy. See ambulatory stab avulsion or MULLER’s ambulatory phlebectomy</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Stab avulsion or stab phlebectomy</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Multilayered compression bandages</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Sodium morrhuate</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Foot muscle pump</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Calf muscle pump or calf pump</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Muscle cramp. See cramp</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Suprapubic veins</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Tilted inferior vena cava filter</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>PREsence of Varices After Interventional Treatment (PREVAIT)</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Tightness</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>External iliac vein</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>External pudendal vein</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>External / extraluminal valvuloplasty</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Popliteal vein external banding</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>External venous banding / cuff</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Outflow obstruction</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Refluxive valve. See valvular incompetence</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Venous disorders</td>
</tr>
<tr>
<td>Микролиполиз, см. Амбулаторная липолиз</td>
<td>Sodium tetradeцил сульфат</td>
</tr>
<tr>
<td><strong>RU</strong></td>
<td><strong>EN</strong></td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Национальный институт здравоохранения и повышения квалификации (NICE), см. Рекомендации NICE (Национального института здравоохранения и повышения квалификации) по лечению варикозной болезни</td>
<td>National Institute for health and Care Excellence (NICE). See NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Недостаточность большой подкожной вены</td>
<td>Saphenous insufficiency</td>
</tr>
<tr>
<td>Недостаточность поверхностных вен</td>
<td>Superficial venous insufficiency</td>
</tr>
<tr>
<td>Недостаточность протеина S</td>
<td>Protein S deficiency</td>
</tr>
<tr>
<td>Недостаточность протеина C</td>
<td>Protein C deficiency</td>
</tr>
<tr>
<td>Некроз кожи после склеротерапии</td>
<td>Cutaneous necrosis after sclerotherapy</td>
</tr>
<tr>
<td>Неоваскуляризация</td>
<td>Neovascularization</td>
</tr>
<tr>
<td>Неоваскуляризация в области сафено-феморального соустья</td>
<td>Neosaphenofermal junction</td>
</tr>
<tr>
<td>Непарная и полунепарная вены</td>
<td>azygos veins</td>
</tr>
<tr>
<td>Непарное продолжение нижней полой вены (НПВ)</td>
<td>Azygos continuation of the inferior vena cava</td>
</tr>
<tr>
<td>Непрерывная допплерография</td>
<td>Continuous-wave Doppler</td>
</tr>
<tr>
<td>Непрямая перфорантная вена</td>
<td>Indirect perforating vein</td>
</tr>
<tr>
<td>Несафеновые вены</td>
<td>Nonsaphenous vein</td>
</tr>
<tr>
<td>Несостоятельность вен</td>
<td>Venous incompetence</td>
</tr>
<tr>
<td>Несостоятельность вены</td>
<td>Incompetent vein</td>
</tr>
<tr>
<td>Несостоятельность клапана</td>
<td>Valvular incompetence</td>
</tr>
<tr>
<td>Несостоятельность перфорантных вен</td>
<td>Perforator vein incompetence</td>
</tr>
<tr>
<td>Несостоятельность перфорантных вен голени</td>
<td>Incompetent calf perforator</td>
</tr>
<tr>
<td>Нестоволовые мальформации вен</td>
<td>Extratruncular venous malformation</td>
</tr>
<tr>
<td>Нетепловая абляция вен</td>
<td>Nonthermal vein ablation</td>
</tr>
<tr>
<td>Нетромботическая первичная обструкция вены, см.</td>
<td>Nonthrombotic vein primary obstruction. See nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Нетромботическое поражение подвздошной вены</td>
<td>Nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Нетромботическое поражение подвздошной вены</td>
<td></td>
</tr>
<tr>
<td>Нетромботический первый гепарин</td>
<td>Unfractionated heparin</td>
</tr>
<tr>
<td>Незластичный бинт/повязка</td>
<td>Inelastic bandage</td>
</tr>
<tr>
<td>Нижние ректальные вены</td>
<td>Inferior rectal veins</td>
</tr>
<tr>
<td>Нижние ягодичные вены</td>
<td>Inferior gluteal veins</td>
</tr>
<tr>
<td>Нижняя брыжеечная вена</td>
<td>Inferior mesenteric vein</td>
</tr>
<tr>
<td>Нижняя полая вена (НПВ)</td>
<td>Inferior vena cava</td>
</tr>
<tr>
<td>Нижняя эпигастральная вена</td>
<td>Inferior epigastric vein</td>
</tr>
<tr>
<td>Нижняя ягодичная вена</td>
<td>Lower gluteal vein</td>
</tr>
<tr>
<td>Низкомолекулярный гепарин (НМГ)</td>
<td>Low molecular-weight heparin</td>
</tr>
<tr>
<td>Нисходящая теория патогенеза варикозной болезни</td>
<td>Descending theory in the pathogenesis of varicose veins</td>
</tr>
<tr>
<td>Нисходящая флебография/венография</td>
<td>Descending phlebography/venography</td>
</tr>
<tr>
<td>Нитевидные вены, см. Телеангиэктазия</td>
<td>Thread vein. See telangiectasia</td>
</tr>
<tr>
<td>Нитиноловый СТЕНТ</td>
<td>Nitinol stent</td>
</tr>
<tr>
<td>Нормальная циркуляция крови по венам</td>
<td>Waterfall drainage</td>
</tr>
<tr>
<td>Ночные судороги, см. Судороги</td>
<td>Night cramp. See cramp</td>
</tr>
<tr>
<td>Ноющая боль</td>
<td>Aching</td>
</tr>
<tr>
<td>Облитерация вен</td>
<td>Venous obliteration</td>
</tr>
<tr>
<td>Образование венозных тромбов</td>
<td>Venous thrombus formation</td>
</tr>
<tr>
<td>Образование тромба вследствие внутривенной термоабляции, см. также Классификация KABNICK</td>
<td>Endovenous heat-induced thrombus. See KABNICK classification</td>
</tr>
<tr>
<td>Обратный ток крови в вене, см. Венозный рефлюкс</td>
<td>Venous back flow. See venous reflux</td>
</tr>
<tr>
<td>Обратный ток крови, см. Венозный рефлюкс</td>
<td>Venous blow down. See venous reflux</td>
</tr>
<tr>
<td>Обструкция вены, см. Венозная обструкция</td>
<td>Vein obstruction. See venous obstruction</td>
</tr>
<tr>
<td>Обструкция глубокой вены</td>
<td>Deep venous obstruction</td>
</tr>
<tr>
<td>Обструкция подвздошной вены</td>
<td>Iliac vein obstruction</td>
</tr>
</tbody>
</table>
Обструкция подвздошной и нижней полой вены
Общая бедренная вена (ОБВ)
Общая подвздошная вена
Объем выброса
Окклюзионная плетизмография
Окклюзия вени, см. Венозная окклюзия
Окклюзия подвздошной вены
Оперативное вмешательство на венах
Операция КОККЕТА – перевязка перфорантных вен
Операция ЛИНТОНА см. также Эндоскопическая субфасциальная диссекция перфорантных вен
Операция ПАЛЬМА, см. Феморо-феморальное шунтирование или транспозиция большой подкожной вены
Операция Уоррена см. Феморо-поплитеальное или феморо-круральное шунтирование
Опросник CXVUQ для пациентов с трофическими язвами
Опросник по качеству жизни больных с трофическими язвами на ногах (VLU-QoL)
Оральные антагонисты витамина К
Осмотические склерозирующие агенты для склеротерапии
Основная классификация CEAP
Остаточное варикозное расширение, см. Остаточное расширение варикозных вен
Остаточный рефлюкс
Острый тромбоз глубоких вен, см. Тромбоз глубоких вен
Отек, см. Венозный отек
Отеки ног связанные с профессиональной деятельностью
Открытая хирургическая рекострукция неопухолевой окклюзии полой вены
Открытие клапана
Открытое оперативное вмешательство на перфорантной вене
Открытые хирургические вмешательства на венах
Оценка по шкале патологии венозных сегментов
Ощущение опухания
Паранская проба
Патогенез варикозного расширения вен
Патогенез варикозной болезни: теория врожденной слабости соединительной ткани
Пациенты Cос
Пенная склеротерапия под ультразвуковым контролем
Пенная склеротерапия см. Склеротерапия
Пентоксифиллин
Первичная несостоятельность вен
Перевязка вены
Перевязка перфорантной вены или перфоранта
Перевязывание большой подкожной вены
Передние большеберцовые вены
Передние лабиальные вены
Передние межкостные вены
Передние прободающие вены бедра

Iliocaval vein obstruction
Common femoral vein
Ejection volume
Occlusion plethysmography
Vein occlusion. See venous occlusion
Iliac vein occlusion / ilio caval vein occlusion
Venous surgery
COCKETT’s perforator vein ligation
LINTON’S operation. See also subfascial endoscopic perforator surgery
PALMA operation. See femorofemoral saphenous vein transposition
Warren operation. See femoropopliteal or femorocrural saphenous vein bypass
Charing Cross Venous Ulcer Questionnaire
Venous leg ulcer quality of life questionnaire
Ophthalmic K antagonists
Osmotic sclerosing agent in sclerotherapy
Basic CEAP classification
Residual varicose vein or residual varice
Residual reflux
Acute deep vein thrombosis. See deep vein thrombosis
Edema. See venous edema
Occupational leg swelling
Open surgical reconstructions for nonmalignant occlusion of the vena cava
Valve opening
Perforator vein open surgery or perforator open surgery
Venous open surgery
Venous segmental disease score
Venous severity scoring
Impression of swelling. See feeling of swelling
Paranà maneuver
Varice pathogenesis
Parietal theory of varicose vein pathogenesis
Ccos Patient
Ultrasound-guided foam sclerotherapy
Foam sclerotherapy. See also sclerotherapy
Pentoxifylline
Primary venous incompetence
Venous ligation
Perforator vein ligation or perforator ligation
Flush ligation
Anterior tibial veins
Anterior labial veins
Anterior interosseous veins
Anterior thigh perforator veins
TERMS IN OTHER LANGUAGES - RUSSIAN

RU

Передние прободающие вены нижней конечности
Передние скротальные вены
Передняя вена огибающая бедро
Передняя добавочная БПВ, см. Передняя добавочная подкожная вена
Передняя добавочная подкожная вена (ПДПВ)
Перекрестный шунт
Пересадка клапана
Перфорантная вена
Перфорантная вена генитальной области (у мужчин)
Перфорантная вена подколенной ямки или перфорант подколенной ямки
Перфорантные вены тыла стопы
Перфузационная скинтиграфия
Пигментация или гиперпигментация
Пиковая скорость ретроградного тока крови
ПИН (перфорантный инвагинационный) стриппер
ПИН (перфорантный инвагинационный) стриппинг
ПИН стриппер
ПИН стриппинг
Плетизмография вен
Плетизмография, см. также
Воздушная плетизмография
или Фотоплетизмография
или Окклюзионная плетизмография
Плечеголовные вены
Поверхностная вена огибающая подвздошную кость
Поверхностная добавочная ветвь большой подкожной вены
Поверхностная добавочная ветвь малой подкожной вены
Поверхностная дорсальная вена клитора или полового члена
Поверхностная ладонная венозная дуга
Поверхностная наружная половая вена
Поверхностная эпигастральная вена
Поверхностные вены
Поверхностные вены промежности
Поверхностные пальцевые вены верхних конечностей (тыльные и ладонные)
Поверхностные пальцевые вены нижних конечностей (тыльные и подошвенные)
Поверхностные плюсневые вены (тыльные и подошвенные)
Поверхностный тромбофлебит, см. Тромбофлебит поверхностных вен
Поворотный стол для тилт-теста
Повреждение нервов после стриппинга
Повышенное сопротивление оттоку крови
Подвздошно-поясничная вена
Подключичная вена
Подколенная вена
Подмышечная вена
Подошвенная плюсневая вена

EN

- Anterior leg perforator veins
- Anterior scrotal veins
- Anterior thigh circumflex vein
- Anterior accessory of the great saphenous vein. See anterior accessory saphenous vein
- Anterior accessory saphenous vein
- Crossover bypass
- Valve transplantation
- Perforator vein
- Pudendal (vesicoprostatic) plexus (male)
- Popliteal fossa perforating vein or popliteal fossa perforator
- Dorsal foot perforator (perforating) vein
- Perfusion scintigraphy
- Pigmentation or hyperpigmentation
- Peak reflux velocity
- Perforate INvaginate (PIN) stripper. See PIN stripper
- Perforate INvaginate (PIN) stripping. See PIN stripping
- PIN stripper
- PIN stripping
- Venous plethysmography
- Plethysmography. See also air phlethysmography, photoplethysmography and occlusion plethysmography
- Brachiocephalic vein
- Superficial circumflex iliac vein
- Superficial accessory of the great saphenous vein
- Superficial accessory of the small saphenous vein
- Superficial dorsal vein of the clitoris or penis
- Superficial palmar venous arch
- Superficial external pudendal vein
- Superficial epigastric vein
- Superficial vein
- Superficial perineal veins
- Superficial digital veins (dorsal and plantar) of the upper limb
- Superficial digital veins (dorsal and plantar) of the lower limb
- Superficial metatarsal veins (dorsal and plantar)
- Superficial thrombophlebitis. See superficial venous thrombophlebitis
- Tilt table
- Nerve damage after stripping
- Increased outflow resistance
- Iliolumbar vein
- Subclavian vein
- Saphenous eye. See Egyptian eye
- Cephalic vein / Medial cephalic vein / Basilic vein / Medial basilic vein
- Popliteal vein
- Axillary vein
- LEJARS’ sole
- Metatarsal plantar vein
TERMS IN OTHER LANGUAGES - RUSSIAN

RU

Подошвенная подкожная венозная сеть
Показатели венозной гемодинамики
Показатель локализации
Показывание
Полая вена
Полидоканол
Политетрафлуоротиленовая (ПТФЭ) заплата для подавления неоваскуляризации
Положение ТРЕНДЕЛЕНБУРГА
Попадание склерозанта в артерию
Поперечная лонная коллатеральная вена
Поперечный лонно-простатический шунт
Порок развития лимфатической системы
Последовательная пневматическая компрессия
Постромботический синдром (ППС) или постромботическая болезнь
Постуральное изменение диаметра
Постуральный вазооконструкторный рефлекс, см. вено-артериальный рефлекс
Почечная вена
Поясничные вены
Предупреждение/профилактика тромбоза глубоких вен
Прерывистая пневматическая компрессия
Префорантные вены медиальной поверхности ноги (ПВ)
Признак ГОМАНСА
Проба Вальсальвы
Проба ПЕРТЕСА
Проба Троянова-ТРЕНДЕЛЕНБУРГА
Проксимальный тромбоз
Просвет вены
Простатическое венозное сплетение (у мужчин)
Простациклин
Профилактика тромбоза вен
Профилактический кава-фильтр
Прурит, см. зуд
Прямые перфорантные вены
Пульсация
Пункцирование, катетеризация под ультразвуковым контролем
Рабочее компрессионное давление
Рабочий венозный объем
Радиальное волокно с двойным кольцом
Радиочастотная абляция (РЧА)
Радиочастотная индуцированная термотерапия (RFITT)
Радиочастотный генератор
Раздел А классификации CEAP
Раздел С классификации CEAP
Раздел Е классификации CEAP
Раздел Р классификации CEAP

EN

» Plantar venous subcutaneous network
» Venous hemodynamic measurement
» Alignment sign
» Tingling
» Caval vein. See vena cava
» Polidocanol
» Polytetrafluoroethylene patch for containing neovascularization
» TRENDELENBURG position
» Arterial injection during sclerotherapy
» Cross-pubic collateral veins
» Cross-pubic prosthetic bypass
» Lymphatic malformation
» Sequential pneumatic compression
» Postthrombotic varicose vein
» Postthrombotic syndrome or postthrombotic disease
» Postural diameter change
» Postural vasoconstrictor reflex. See venoarterial reflex
» Renal vein
» Lumbar veins
» Deep vein thrombosis prevention/prophylaxis
» Intermittent pneumatic compression
» Medial leg perforator veins
» Compression adherence
» HOMANS sign
» Valsalva maneuver
» PERTHES test
» Weight transfer maneuvers
» TRENDELENBURG test
» Proximal thrombosis
» Venous lumen
» Prostatic venous plexus (male)
» Prostacyclin
» Venous thromboprophylaxis
» Prophylactic caval filter
» Pruritis. See itching
» Direct perforating veins
» Throbbing
» Ultrasound-guided puncture, cannulation
» Working compression pressure
» Working venous volume
» Double ring radial fiber
» Radiofrequency ablation
» Radiofrequency-induced thermotherapy
» Radiofrequency generator
» A component of the CEAP classification
» C component of the CEAP classification
» E component of the CEAP classification
» P component of the CEAP classification

217
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Разница венозного давления на кисти/стопе</td>
<td>Arm/foot pressure differential</td>
</tr>
<tr>
<td>Разрешение венозного тромбоза</td>
<td>Venous thrombus resolution</td>
</tr>
<tr>
<td>Раствор для инфильтрационной анестезии</td>
<td>Tumescent solution</td>
</tr>
<tr>
<td>Расширенный вариант классификации CEAP</td>
<td>Advanced clinical, etiological, anatomical, and pathophysiological (CEAP) classification</td>
</tr>
<tr>
<td>Ревипарин</td>
<td>Revipar (clivarine)</td>
</tr>
<tr>
<td>Резекция первого ребра</td>
<td>First rib resection</td>
</tr>
<tr>
<td>Рекомбинантный тканевой активатор плазминогена (r-TАП)</td>
<td>Recombinant tissue plasminogen activator</td>
</tr>
<tr>
<td>Рекомендации NICE (Национального института здравоохранения и повышения квалификации) по лечению варикозной болезни</td>
<td>NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Рекомендации Американского венозного форума/Общества сосудистой хирургии</td>
<td>American Venous Forum / Society for Vascular Surgery guidelines</td>
</tr>
<tr>
<td>Рекомендации Европейского общества сосудистых хирургов (ESVS) по лечению хронической варикозной болезни</td>
<td>European Society for Vascular Surgery guidelines for chronic venous disease</td>
</tr>
<tr>
<td>Реконструктивная хирургия глубоких вен</td>
<td>Deep vein reconstructive surgery</td>
</tr>
<tr>
<td>Реконструктивные операции на венах</td>
<td>Venous reconstructive surgery</td>
</tr>
<tr>
<td>Реконструкция клапана</td>
<td>Valve reconstruction</td>
</tr>
<tr>
<td>Реконструкция супраренального сегмента нижней полой вены</td>
<td>Suprarenal inferior vena cava reconstruction</td>
</tr>
<tr>
<td>Ремоделирование стенки вены после тромбоза глубоких вен</td>
<td>Vein wall remodeling</td>
</tr>
<tr>
<td>Ретикулярная вена</td>
<td>Reticular vein</td>
</tr>
<tr>
<td>Рефлюкс в глубокой вене</td>
<td>Deep venous reflux</td>
</tr>
<tr>
<td>Рефлюкс или недостаточность поверхностных вén</td>
<td>Superficial venous reflux or incompetence</td>
</tr>
<tr>
<td>Рефлюкс крови в поверхностные вены</td>
<td>Venous blow out</td>
</tr>
<tr>
<td>Рефлюкс по большой подкожной вене</td>
<td>Saphenous reflux</td>
</tr>
<tr>
<td>Рефлюкс по венам малого таза</td>
<td>Pelvic vein reflux</td>
</tr>
<tr>
<td>Рефлюкс по мочеточниковым венам</td>
<td>Ureteric vein reflux</td>
</tr>
<tr>
<td>Рефлюкс яичниковой вены или несостоятельность яичниковой вены</td>
<td>Ovarian vein reflux or ovarian vein incompetence</td>
</tr>
<tr>
<td>Рецидив варикозного расширения вен после хирургического лечения</td>
<td>Recurrent varices after surgery (REVAS)</td>
</tr>
<tr>
<td>Рецидив варикозной болезни или рецидив варикозного расширения вен</td>
<td>Recurrent varice or recurrent varicose vein</td>
</tr>
<tr>
<td>Рецидивирующий тромбоз глубоких вен</td>
<td>Recurrent deep venous thrombosis</td>
</tr>
<tr>
<td>Рециркуляция в подкожных венах ноги</td>
<td>Saphenous recirculation</td>
</tr>
<tr>
<td>Ривароксабан</td>
<td>Rivaroxaban</td>
</tr>
<tr>
<td>Рожки створок клапана</td>
<td>Valve cornua</td>
</tr>
<tr>
<td>Ручной допплер, см. также Непрерывная допплерография</td>
<td>Hand-held Doppler. See also continuous-wave Doppler</td>
</tr>
<tr>
<td>Саморасширяющийся стент</td>
<td>Self-expanding stent</td>
</tr>
<tr>
<td>Сапожок УННА</td>
<td>UNNA boot</td>
</tr>
<tr>
<td>Сафено-поплитеальное соусть</td>
<td>Saphenopopliteal junction</td>
</tr>
<tr>
<td>Сафено-поплитеальное соусть, претерминальный клапан</td>
<td>Saphenopopliteal junction preterminal valve</td>
</tr>
<tr>
<td>Сафено-поплитеальное соусть, терминальный клапан</td>
<td>Saphenopopliteal junction terminal valve</td>
</tr>
<tr>
<td>Сафено-поплитеальный шунт</td>
<td>Saphenopopliteal bypass</td>
</tr>
<tr>
<td>Сафено-феморальное соусть</td>
<td>Saphenofemoral junction</td>
</tr>
<tr>
<td>Сафено-феморальное соусть, претерминальный клапан</td>
<td>Saphenofemoral junction preterminal valve</td>
</tr>
<tr>
<td>Сафено-феморальное соусть, терминальный клапан</td>
<td>Saphenofemoral junction terminal valve</td>
</tr>
<tr>
<td>Сверхупругий нитиноловый кава-фильтр</td>
<td>Recovery nitinol filter</td>
</tr>
</tbody>
</table>
Сдавливаемость вен
Сегментарный варикоз с рефлюксом по поверхностным и/или перфорантным венам
Сегментный рефлюкс
Седалищная вена
Селективная абляция варикозных вен под местной анестезией
Сетка варикозных сосудов в паховой области, см. Неоваскуляризация
Сетка варикозных сосудов в подколенной ямке
Симптом Мики Мауса
Симптомы варикозного расширения вен
Симптомы заболевания вен
Симптомы со стороны ног, см. Симптомы заболеваний вен
Синдром «щелкунчика»
Синдром GULLMO см. Синдром обструкции напряжения
Синдром АХЕНБАХА
Синдром БАДДА-КИАРИ
Синдром венозного полнокровия малого таза
Синдром верхней апертуры грудной клетки см. также
Синдром КАЗАБАХА-МЕРРИТА
Синдром КЛИППЕЛЯ-ТРЕНОНЕ
Синдром КОККЕТА, см. синдром МЕЯ-ТЕРНЕРА
Синдром МАФУЧЧИ
Синдром обструкции напряжения
Синдром ПАРКСА-ВЕБЕРА
Синдром ПЕДЖЕТА-ШРЕТТЕРА
Синдром ПЕДЖЕТА-ШРЕТТЕРА
Синдром СЕРВЕЛЛА-МАРТОРЕЛЛА или порок развития
Синдром СТЕРДЖА-ВЕБЕРА
Синдром эконом-класса, см. Тромбоз авиапутешественников
Синтетический венозный клапан
Синяя болевая флегмазия или болезненная синяя нога
Система AngioJet™
Система хирургического пузырька для тромбоэктомии
Система большой подкожной вены
Система из двух шприцов
Система из двух шприцов
Система ЭКОС™ для ультразвукового тромболизиса
Склерозирующая пена
Склерозирующая пена биоматрикс
Склерозирующие агенты детергенты
Склерозирующий агент
Склеротерапия
Склеротерапия жидким склерозантом
Склеротерапия под ультразвуковым контролем

EN

Venous compressibility
Private venous circulation in the lower limb
Segmental reflux
Sciatic vein
Selective ablation of varices under local anesthesia
Groin varicose network. See also neovascularization
Popliteal fossa varicose network
Mickey Mouse sign
Symptomatic varicose veins
Venous symptoms
Leg symptoms. See venous symptoms
Nutcracker syndrome
GULLMO’s syndrome. See strain obstruction syndrome
ACHENBACH’s syndrome
BUDD-CHIARI syndrome
Pelvic congestion syndrome
Venous thoracic outlet syndrome. See also PAGET-von SCHRÖTTER syndrome
Superior vena cava syndrome
KASABACH-MERRIT syndrome
KLIPPEL-TRENAUNAY syndrome
COCKETT syndrome. See also MAY-THURNER syndrome
MAFFUCCI syndrome
MAY-THURNER syndrome
Strain obstruction syndrome
PARKES WEBER syndrome
PAGET-von SCHRÖTTER syndrome
SERVELLE-MARTORELL syndrome
STURGE-WEBER syndrome
Economy class syndrome. See air travel-related venous thromboembolism
Prosthetic venous valve
Phlegmasia cerulea dolens or painful blue leg
AngioJet™
X-sizer™ helical thrombectomy catheter
Saphenous veins
Double syringe system
Azygos system
ECOS™ ultrasound-assisted thrombolysis system
Sclerosing foam
Biomatrix sclerofoam
Detergent sclerosing agent for sclerotherapy
Sclerosant agent
Sclerotherapy
Liquid sclerotherapy
Ultrasound-guided sclerotherapy
TERMS IN OTHER LANGUAGES - RUSSIAN

RU

Склеротерапия при тумесцентной анестезии ретикулярных вен и телангiectазиях
Скованность в голеностопном суставе
Смысление створок клапана
Соблюдение режима компрессионной терапии
Советы по образу жизни для пациентов с хроническим заболеваниями вен
Сопутствующий тромбоз поверхностных и глубоких вен (при тромбозе поверхностных вен)
Сосудистая сетка, см. Телангiectазия
Сочетанный глубокий и поверхностный венозный рефлюкс
Спиральная компьютерная томография при легочной эмболии
Спиральная эмболизация при рефлюксе в глубоких венах
Спиральная эмболизация яичниковых или тазовых вен, см. Эмболизация вен малого таза
Справленное (пузырно-простатическое) сплетение
Срединная вена предплечья
Срединная крестцовая вена
Срединная локтевая вена
Средние ректальные вены
Средние ягодичные перфорантные вены
Средняя подкожная латеральная вена руки
Статический индекс жесткости (СИЖ)
Створка клапана
Стеноз вен
Стеноз Рокитанского
Стент GIANTURCO
Стент Wallstent™
Стентирование вен
Стентирование подвздошной вены
Стрептокиназа
Стреппер OESCH, см. ПИН-стреппер
Стриплинг большой подкожной вены
Стриплинг вен
Субдермальный варикоз, см. Телангiectазия
Судороги
Супрапателлярные перфорантные вены
Супраренальные или надпочечниковые вены
Сшивание вены
Телангиэкзатация
Телангиэкзатический избыточный ангиогенез
Тензиометрическая плетизмография
Тепловой тромбоз, см. Образование тромба вследствие внутривенной термобиализации
Терапия личинками «очистка раны с помощью личинок»
Терапия оральными антикоагулянтами

EN

▶ Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)
▶ Ankle stiffness
▶ Valve closure
▶ Compression compliance
▶ Lifestyle advice for chronic venous disorders
▶ Concomitant superficial and deep venous thrombosis
▶ Spider vein. See telangiectasia
▶ Associated deep and superficial venous reflux
▶ Specific quality of life outcome response-venous
▶ Spiral computed tomography angiography for pulmonary embolism
▶ Coiling for deep venous reflux
▶ Coiling of ovarian or pelvic veins. See also pelvic vein embolization
▶ Pudendal perforator veins
▶ Median antecubital vein / Median vein of the forearm
▶ Median sacral vein
▶ Median cubital vein
▶ Median vein of the elbow
▶ Middle rectal veins
▶ Midgluteal perforator vein
▶ Median cephalic vein
▶ Compression device
▶ Static stiffness index
▶ Valve cuspid or cusp
▶ Venous stenosis
▶ Rokitansky stenosis
▶ GIANTURCO stent
▶ Wallstent™
▶ Venous stenting
▶ Iliac vein stenting
▶ Streptokinase
▶ Strip test for valve competence. See milking test
▶ OESCH stripper. See PIN stripper
▶ Saphenous stripping
▶ Venous stripping
▶ Subdermal varices. See telangiectasia
▶ Cramp
▶ Suprapatellar perforator vein
▶ Suprarenal or adrenal veins
▶ Venesuture
▶ Telangiectasia
▶ Telangiectatic matting
▶ Strain-gauge plethysmography
▶ Heat-induced thrombosis. See endovenous heat-induced thrombus
▶ Maggot treatment (maggot debridement therapy)
▶ Oral anticoagulant therapy
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Терапия трофических язв методом гипербарической оксигенации</td>
<td>Hyperbaric oxygen treatment (or therapy) of venous ulcers</td>
</tr>
<tr>
<td>Термальная абляция вен</td>
<td>Venous thermal ablation</td>
</tr>
<tr>
<td>Термальный клапан, см. Сафено-феморальное соустье, термальный клапан</td>
<td>Terminal valve. See saphenofemoral junction terminal valve</td>
</tr>
<tr>
<td>Терминальный клапан и Сафено-поплитеальное соустье, терминальный клапан</td>
<td>saphenopopliteal junction terminal valve</td>
</tr>
<tr>
<td>Тестиккулярные вены</td>
<td>Testicular veins</td>
</tr>
<tr>
<td>Тиазапарин натрия</td>
<td>Tinzaparin</td>
</tr>
<tr>
<td>Титановый фильтр ГРИНФИЛДА</td>
<td>Titanium GREENFIELD™ filter</td>
</tr>
<tr>
<td>Тканевой активатор плазминогена</td>
<td>Tissue plasminogen activator</td>
</tr>
<tr>
<td>Тканевые ингибиторы металлопротеиназ (TIMP)</td>
<td>Tissue inhibitors of metalloproteinases (TIMPs)</td>
</tr>
<tr>
<td>Точка рефлюкса</td>
<td>Escape point</td>
</tr>
<tr>
<td>Трабекулярная вена</td>
<td>Trabeculated vein</td>
</tr>
<tr>
<td>Транскомиссуральная вальвулопластика</td>
<td>Transcommissural valvuloplasty</td>
</tr>
<tr>
<td>Трансмуральная вальвулопластика</td>
<td>Transmural valvuloplasty</td>
</tr>
<tr>
<td>Транспозиция вены по КИСТНЕРУ</td>
<td>KISTNER’s vein transposition</td>
</tr>
<tr>
<td>Транспозиция вены, см. Транспозиция вены по КИСТНЕРУ</td>
<td>Vein transposition. See KISTNER’s vein transposition</td>
</tr>
<tr>
<td>Транспозиция или трансплантация подмышечной вены</td>
<td>Axillary vein transfer or transplantation</td>
</tr>
<tr>
<td>Транспозиция сегмента вены, см. Пересадка клапана</td>
<td>Venous segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Транспозиция сегмента вены или перенос сегмента вены, см. Пересадка клапана</td>
<td>Vein segment transplantation or vein segment transfer. See valve transplantation</td>
</tr>
<tr>
<td>Триада ВИРХОВА</td>
<td>VIRCHOW’s triad</td>
</tr>
<tr>
<td>Триев, см. Флебэктомия с использованием световода</td>
<td>Trivex. See transilluminated powered phlebectomy</td>
</tr>
<tr>
<td>Тромбоз авапутешественников</td>
<td>Air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Тромбоз брыжеечной вены</td>
<td>Mesenteric vein thrombosis</td>
</tr>
<tr>
<td>Тромбоз в подключечно-подмышечном венозном сегменте см. также Синдром ПЕДЖЕТА-ШРЕТТЕРА</td>
<td>Axillo-subclavian vein thrombosis also called PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Тромбоз вен голени, изолированный тромбоз глубоких вен голени</td>
<td>Calf vein thrombosis, deep vein thrombosis isolated in the calf</td>
</tr>
<tr>
<td>Тромбоз глубоких вен</td>
<td>Deep vein thrombosis</td>
</tr>
<tr>
<td>Тромбоз глубоких вен верхней конечности</td>
<td>Upper extremity deep vein thrombosis</td>
</tr>
<tr>
<td>Тромбоз глубоких вен, см. Тромбоз глубоких вен</td>
<td>Deep venous thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Тромбоз нижней полой вены</td>
<td>Inferior vena cava thrombosis</td>
</tr>
<tr>
<td>Тромбоз поверхностных вен</td>
<td>Superficial vein thrombosis</td>
</tr>
<tr>
<td>Тромбоз подвздошной и глубокой бедренной вен</td>
<td>Iliofemoral deep venous thrombosis</td>
</tr>
<tr>
<td>Тромбоз подколенной и бедренной вен см. также</td>
<td>Femoropopliteal deep vein thrombosis. See also deep vein thrombosis</td>
</tr>
<tr>
<td>Тромбоз глубоких вен</td>
<td>Oral contraceptive-related thrombosis</td>
</tr>
<tr>
<td>Тромбоз спинной вены</td>
<td>Effort thrombosis. See PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Тромбофилаксис методом «pulse-spray»</td>
<td>Pulse-spray technique in thrombolysis. See also AngioJet™</td>
</tr>
<tr>
<td>Тромбофилаксис см. Лечение венозной тромбоэмболии</td>
<td>Thrombolysis. See venous thrombolytic treatment</td>
</tr>
<tr>
<td>Тромбофилия</td>
<td>Thrombophilia</td>
</tr>
<tr>
<td>Тромбофлебит</td>
<td>Thrombophlebit</td>
</tr>
<tr>
<td>Тромбофлебит поверхностных вен (ТПВ)</td>
<td>Superficial thrombophlebit. See superficial venous thrombophlebit</td>
</tr>
<tr>
<td>Тромбоэктомическая система Trellis</td>
<td>Trellis thrombectomy catheter</td>
</tr>
<tr>
<td>Трофическая язва смешанного артериального и венозного происхождения</td>
<td>Mixed arterial and venous ulcer</td>
</tr>
<tr>
<td>Трофические изменения, см. Кожные изменения при заболеваниях вен</td>
<td>Trophic changes. See venous skin changes</td>
</tr>
<tr>
<td>RU</td>
<td>EN</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Трофические нарушения, см. Кожные изменения при заболеваниях вен</td>
<td>Trophic disorders. See venous skin changes</td>
</tr>
<tr>
<td>Трофические язвы на ногах</td>
<td>Venous leg ulcer</td>
</tr>
<tr>
<td>Трубчатый бинт пропитанный цинковой массой</td>
<td>Zinc paste impregnated stockinette</td>
</tr>
<tr>
<td>Тыльная венозная дуга стопы</td>
<td>Dorsal venous arch of the foot</td>
</tr>
<tr>
<td>Тыльная плюсневая вена</td>
<td>Metatarsal dorsal vein / Pedal vein</td>
</tr>
<tr>
<td>Тыльные пальцевые вены кисти</td>
<td>Dorsal digital vein of the hand</td>
</tr>
<tr>
<td>Тыльные пястные вены</td>
<td>Dorsal metacarpal veins</td>
</tr>
<tr>
<td>Тяжесть</td>
<td>Heaviness</td>
</tr>
<tr>
<td>Тяжесть в ноге, см. Тяжесть</td>
<td>Heavy leg. See heaviness</td>
</tr>
<tr>
<td>Удаление кава-фильтра</td>
<td>Filter retrieval</td>
</tr>
<tr>
<td>Ультразвук</td>
<td>Ultrasound</td>
</tr>
<tr>
<td>Ультразвуковое исследование</td>
<td>Ultrasonography</td>
</tr>
<tr>
<td>Ультразвуковое картирование</td>
<td>Ultrasound mapping</td>
</tr>
<tr>
<td>Ультразвуковое мониторирование</td>
<td>Ultrasound monitoring</td>
</tr>
<tr>
<td>Урокиназа</td>
<td>Urokinase</td>
</tr>
<tr>
<td>Усталость</td>
<td>Fatigue</td>
</tr>
<tr>
<td>Устройства для надевания компрессионного трикотажа</td>
<td>Donning and doffing devices (for stockings)</td>
</tr>
<tr>
<td>Устройство ClariVein®</td>
<td>ClariVein®</td>
</tr>
<tr>
<td>Устройство Cleaner для ротационной тромбэктомии</td>
<td>Cleaner rotational thrombectomy systems</td>
</tr>
<tr>
<td>Устройство для механической флебэктомии, см. Аппаратная флебэктомия</td>
<td>Phlebectomy power device. See powered phlebectomy</td>
</tr>
<tr>
<td>Устройство для чрескожной тромбэктомии Arrow-TREROTOLA™</td>
<td>Arrow-TREROTOLA™ percutaneous thrombectomy</td>
</tr>
<tr>
<td>Ущемление подколенной вены</td>
<td>Popliteal vein entrapment</td>
</tr>
<tr>
<td>Фактор свертывания VIII</td>
<td>Factor VIII</td>
</tr>
<tr>
<td>Факторы риска PREVAIT (Наличие варикоза после оперативного лечения)</td>
<td>Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)</td>
</tr>
<tr>
<td>Факторы риска пост-тромботического синдрома ПТС</td>
<td>Risk factors for postthrombotic syndrome</td>
</tr>
<tr>
<td>Факторы риска развития варикозного расширения вен</td>
<td>Risk factors for varicose veins</td>
</tr>
<tr>
<td>Факторы риска рецидива тромбоза глубоких вен</td>
<td>Risk factors for deep venous thrombosis recurrence</td>
</tr>
<tr>
<td>Факторы риска тромбоза глубоких вен</td>
<td>Risk factors for deep venous thrombosis</td>
</tr>
<tr>
<td>Факторы риска хронического заболевания вен, см. факторы риска развития варикозного расширения вен и хронической венозной недостаточности (C2-C6)</td>
<td>Risk factors for chronic venous disease. See risk factors for varicose veins and for chronic venous insufficiency (C2-C6)</td>
</tr>
<tr>
<td>Факторы риска хронической венозной недостаточности (C2-C6)</td>
<td>Risk factors for chronic venous insufficiency (C2-C6)</td>
</tr>
<tr>
<td>Фармакомеханический тромболизис</td>
<td>Pharmacomechanical thrombolysis</td>
</tr>
<tr>
<td>Фармакотерапия при заболеваниях вен</td>
<td>Venous pharmacotherapy</td>
</tr>
<tr>
<td>Фасциотомия при заболевании вен</td>
<td>Fasciotomy in venous disease</td>
</tr>
<tr>
<td>Фасциэктомия при заболевании вен</td>
<td>Fasciectomy in venous disease</td>
</tr>
<tr>
<td>Феморо-феморальное шунтирование</td>
<td>Femorofemoral bypass</td>
</tr>
<tr>
<td>Феморо-оптиальное или феморо-крuralное шунтирование</td>
<td>Femoropopliteal and femorocrural saphenous vein bypass</td>
</tr>
<tr>
<td>Феморо-феморальное шунтирование или транспозиция большой подкожной вены</td>
<td>Femorofemoral saphenous vein transposition</td>
</tr>
<tr>
<td>Фениндион</td>
<td>Phenindione</td>
</tr>
<tr>
<td>Фенпрокумон</td>
<td>Fenprocoumon</td>
</tr>
<tr>
<td>Фибрин</td>
<td>Fibrin</td>
</tr>
<tr>
<td>Фибринолиз</td>
<td>Fibrinolysis</td>
</tr>
<tr>
<td>Фибринолитическая терапия</td>
<td>Fibrinolytic therapy</td>
</tr>
<tr>
<td>Физиология вен</td>
<td>Venous physiology</td>
</tr>
</tbody>
</table>
G2 filter. See also GREENFIELD™ filter and GUNTER™ tulip filter
GREENFIELD™ filter. See also G2 filter and GUNTER™ tulip filter
Inferior vena cava filter
Flavonoids
Phlebitis
Phlebography. See venography
Phlebology
Phlebotomy (venesection, venotomy)
Phlebotonic drug. See venotonic drugs or vеноactive drugs
Tiptoe maneuver
Phlebectasia. See also venectasia and varice, varicose vein, and varicosity
Phlebectomy hook
Phlebectomy
Transilluminated powered phlebectomy
Hook phlebectomy
Free-floating thrombus
Fondaparinux
MALETI neovalve construction
Neovalve (autogenous)
Photoplethysmography
Photothermolysis
Ejection fraction. See also ejection volume
Residual volume fraction
Outflow fraction
Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire (CHIVA)
Venous function
Venous calf pump function
Valvular function
Venous pump function
Chemical ablation
Chemical irritant (sclerosing agent) in sclerotherapy
Deep vein surgery
Valve surgery
Surgical repair of deep venous valve incompetence
Homburg varicose vein severity score
Chromated glycerin
Chronic venous insufficiency
Chronic venous disorders
Chronic cerebrospinal venous insufficiency
Chronic venous disease
Digital subtraction phlebography
Pulse repetition frequency
Percutaneous ablation of perforating veins
Percutaneous balloon angioplasty or percutaneous venoplasty
<table>
<thead>
<tr>
<th>RU</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Чрескожная лазерная терапия телангиоэктазий и варикозных вен</td>
<td>Percutaneous laser therapy for telangiectasia and varicose veins</td>
</tr>
<tr>
<td>Чрескожная механическая тромбэктомия</td>
<td>Percutaneous mechanical thrombectomy</td>
</tr>
<tr>
<td>Шкала CAPRINI</td>
<td>CAPRINI score</td>
</tr>
<tr>
<td>Шкала VILLALTA</td>
<td>VILLALTA score</td>
</tr>
<tr>
<td>Шкала ГИНЗБЕРГА</td>
<td>GINSBERG scale</td>
</tr>
<tr>
<td>Шкала клинической оценки, шкала клинической оценки тяжести</td>
<td>Clinical scoring system, clinical severity score</td>
</tr>
<tr>
<td>Шкала клинической тяжести заболеваний вен</td>
<td>Venous clinical severity score (VCSS)</td>
</tr>
<tr>
<td>Шкала оценки боли</td>
<td>Pain score</td>
</tr>
<tr>
<td>Шкала снижения трудоспособности при варикозной болезни</td>
<td>Venous disability score</td>
</tr>
<tr>
<td>Шкала Уаллса</td>
<td>Wells score</td>
</tr>
<tr>
<td>Эдинбургское венозное исследование</td>
<td>Edinburgh vein study</td>
</tr>
<tr>
<td>Эдоксабан</td>
<td>Edoxaban</td>
</tr>
<tr>
<td>Экзема</td>
<td>Eczema</td>
</tr>
<tr>
<td>Экстракт виноградных косточек</td>
<td>Grape seed extract</td>
</tr>
<tr>
<td>Экстракт из семян или корня конского каштана</td>
<td>Horse chestnut seed or root extract</td>
</tr>
<tr>
<td>Экцентрическая компрессия</td>
<td>Eccentric compression</td>
</tr>
<tr>
<td>Эластичность вен</td>
<td>Venous compliance</td>
</tr>
<tr>
<td>Эластичные компрессионные бинты</td>
<td>Elastic compression bandages</td>
</tr>
<tr>
<td>Эластичные компрессионные чулки</td>
<td>Elastic compression stockings</td>
</tr>
<tr>
<td>Эластичный бинт см. Также Компрессионные бинты</td>
<td>Bandage. See also compression bandages</td>
</tr>
<tr>
<td>Электрический нейромышечный стимулятор (НМЭС) при венозной недостаточности</td>
<td>Neuromuscular electric stimulator in chronic venous insufficiency</td>
</tr>
<tr>
<td>Электростимулятор мышц голени</td>
<td>Electrical calf muscle stimulation device</td>
</tr>
<tr>
<td>Эмболизация</td>
<td>Embolization</td>
</tr>
<tr>
<td>Эмболизация вен малого таза</td>
<td>Pelvic vein embolization</td>
</tr>
<tr>
<td>Эмболизация гонадных вен</td>
<td>Gonadal vein embolization</td>
</tr>
<tr>
<td>Эмболизация или аблиция клеевой композицией</td>
<td>Glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Эмболизация клеевой композицией, см. Эмболизация или аблиция клеевой композицией</td>
<td>Adhesive embolization. See glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Эмболизация цианакрилатом см. Эмболизация клеевой композицией</td>
<td>Cyanoacrylate embolization. See glue embolization</td>
</tr>
<tr>
<td>Эмболизация яичниковой вены</td>
<td>Ovarian vein embolization</td>
</tr>
<tr>
<td>Эмболия</td>
<td>Embolism</td>
</tr>
<tr>
<td>Эмболы</td>
<td>Emboli</td>
</tr>
<tr>
<td>Эмболэктомия</td>
<td>Embolectomy</td>
</tr>
<tr>
<td>Эмбриогенез вен</td>
<td>Venous embryology</td>
</tr>
<tr>
<td>Эндоскопическая диссекция перфорантных вен, см. Эндоскопическая субфасциальная диссекция перфорантных вен</td>
<td>Endoscopic perforator surgery. See subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Эндоскопическая субфасциальная диссекция перфорантных вен</td>
<td>SEPS. See subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Эндотермическая терапия</td>
<td>Endothermal treatment</td>
</tr>
<tr>
<td>Эндофлебэктомия или эндовенэктомия</td>
<td>Endophlebectomy or endovenectomy</td>
</tr>
<tr>
<td>Эноксапарин</td>
<td>Enoxaparin</td>
</tr>
<tr>
<td>Эпидемиологические и экономические исследования венозной недостаточности</td>
<td>Venous insufficiency epidemiological and economic studies (VEINES)</td>
</tr>
<tr>
<td>Этаноламина олеат</td>
<td>Ethanolamine olate</td>
</tr>
<tr>
<td>Эффект ВЕНТУРИ</td>
<td>VENTURI effect</td>
</tr>
<tr>
<td>Эффект турникета</td>
<td>Tourniquet effect</td>
</tr>
<tr>
<td>RU</td>
<td>EN</td>
</tr>
<tr>
<td>----</td>
<td>----</td>
</tr>
<tr>
<td>Эффективность мышечно-венозной помпы голени</td>
<td>Calf pump output</td>
</tr>
<tr>
<td>Эхогенность вен</td>
<td>Venous echogenicity</td>
</tr>
<tr>
<td>Эхосклеротерапия, см. Склеротерапия под ультразвуковым контролем</td>
<td>Echosclerotherapy. See ultrasound-guided sclerotherapy</td>
</tr>
<tr>
<td>Язва МАРТОРЕЛЛА</td>
<td>MARTORELL’s ulcer</td>
</tr>
<tr>
<td>Язва МАРЬОЛИНА</td>
<td>MARJOLIN’s ulcer</td>
</tr>
<tr>
<td>Язвы на ногах, см. Трофические язвы на ногах</td>
<td>Leg ulcer. See venous leg ulcer</td>
</tr>
<tr>
<td>Яичниковая вена</td>
<td>Ovarian vein</td>
</tr>
<tr>
<td>Яремно-подмышечный венозный шунт</td>
<td>Jugular axillary vein bypass</td>
</tr>
</tbody>
</table>
Ablación de la vena
Ablación de la vena perforante o ablación perforante
Ablación de varices o vena varicosa, ver ablación de la vena
Ablación endovenosa por láser de las venas safenas
Ablación endovenosa por radiofrecuencia
Ablación endovenosa por vapor
Ablación láser, ver ablación láser endovenosa de las venas safenas
Ablación mecanoquímica
Ablación no térmica de la vena
Ablación percutánea de venas perforantes
Ablación Perforante Invaginada (PIN), ver ablación PIN
Ablación PIN
Ablación por radiofrecuencia
Ablación por vapor
Ablación química
Ablación selectiva de las varices con anestesia local
Ablación venosa
Ablación venosa térmica
Ablación venosa troncular
Accesorio anterior de la vena safena mayor, ver vena safena accesoria anterior
Accesorio superficial de la vena safena grande
Accesorio superficial de la vena safena pequeña
Acenocumarol
Activación de leucocitos
Activador tisular del plasminógeno
Activador tisular del plasminógeno recombinante
Adherencia de compresión
Aescin, ver semillas de castaña o extracto de raíz de castaña
Agente esclerosante
Agente esclerosante irritante detergente para escleroterapia
Agente esclerosante irritante químico en escleroterapia
Agente esclerosante osmótico en escleroterapia
Agentes antitrombóticos
Agger valvular
Alfa-benzopirona
Anestesia para el tratamiento intervencionista de las venas varicosas
Anestesia tumescente
Aneurisma de la vena poplítea
Aneurisma venoso
Aneurisma, ver aneurisma venoso
Angiografía por tomografía computarizada espiral para embolia pulmonar
AngioJet™
AngioJet™ de pulsos electrónicos, ver además AngioJet™
Angioma
Angioma cavernoso
Angioplastia con balón percutáneo o venoplastia percutánea

Vein ablation
Perforator vein ablation or perforator ablation
Varices or Varicose vein ablation. See vein ablation
Endovenous laser ablation of saphenous veins
Endovenous radiofrequency ablation
Endovenous steam ablation
Endovenous thermal ablation
Laser ablation. See endovenous laser ablation of saphenous veins
Mechanochemical ablation
Nonthermal vein ablation
Percutaneous ablation of perforating veins
Perforate INvaginate (PIN) stripper. See PIN stripper
PIN stripper
Radiofrequency ablation
Steam ablation
Chemical ablation
Selective ablation of varices under local anesthesia
Venous ablation
Venous thermal ablation
Truncal venous ablation
Anterior accessory of the great saphenous vein. See anterior accessory saphenous vein
Superficial accessory of the great saphenous vein
Superficial accessory of the small saphenous vein
Acenocoumarol
Leukocyte activation
Tissue plasminogen activator
Recombinant tissue plasminogen activator
Compression adherence
Aescin. See horse chestnut seed or root extract
Sclerosant agent
Detergent sclerosing agent for sclerotherapy
Chemical irritant (sclerosing agent) in sclerotherapy
Ósmotic sclerosing agent in sclerotherapy
Antithrombotic agents
Valvular agger
Alpha benzopyrone
Anesthesia for interventional treatment of varicose veins
Tumescent anesthesia
Popliteal vein aneurysm
Venous aneurysm
Aneurysm. See venous aneurysm
Spiral computed tomography angiography for pulmonary embolism
AngioJet™
Power pulse AngioJet™. See also AngioJet™
Angioma
Cavernous angioma
Percutaneous balloon angioplasty or percutaneous venoplasty
SP

Angioplastia con balón venoso
Antagonistas de la vitamina K
Antagonistas de la vitamina K oral
Antitrombina (antitrombina III)
Antocianinas, ver bioflavonoides
Apertura de la válvula
Apixabán
Arco venoso dorsal del pie
Arco venoso palmar profundo
Arco venoso palmar superficial
Argatroban
Atrapamiento de la vena poplítea
Atresia de la vena
Atrofia blanca, ver vasculopatía livedoide
Autotrasplante de una válvula competente a la vena poplítea, ver trasplante de válvula
Avulsión incisiva ambulatoria
Avulsión incisiva o flebectomía incisiva
Bioflavonoides
Bivalirudina
Bomb muscular de pie
Bomb para músculo de la pantorrilla o bomba de pantorrilla
Bota UNNA
Bypass cruzado
Bypass de la vena jugulo-axilar
Bypass de vena safena femoropoplítea y femorocrural
Bypass femoroiliocaval
Bypass MAY-HUSNI, ver bypass safenopoplíteo
Bypass protésico público transversal
Bypass safenopoplíteo
Bypass venoso
Calambre
Calambre muscular, ver calambre
Calambre nocturno, ver calambre
Calctines de compresión, ver medias de compresión
Calidad de vida en la enfermedad venosa
Cambio de diámetro postural
Cambios en la piel venosa
Cambios hemodinámicos venosos en la enfermedad venosa
Cambios tróficos, ver cambios en la piel venosa
Capacitancia venosa
Catéter de cierre rápido
Catéter Oasis®
Catéter para trombectomía AKónya Eliminator
Catéter para trombectomía helicoidal X-sizer™
Catéter para trombectomía Trellis
Cierre de la válvula
Cirugía abierta de la vena perforante o cirugía abierta perforante
Cirugía abierta venosa

EN

Venous balloon angioplasty
Vitamin K antagonist
Oral vitamin K antagonists
Antithrombin (antithrombin III)
Anthocyanins. See also bioflavonoids
Valve opening
Apixaban
Dorsal venous arch of the foot
Deep palmar venous arch
Superficial palmar venous arch
Argatroban
Popliteal vein entrapment
Vein atresia
White atrophy. See atrophie blanche
Autotransplantation of a competent valve into the popliteal vein. See valve transplantation
Ambulatory stab avulsion
Stab avulsion or stab phlebectomy
Bioflavonoids
Bivalirudin
Foot muscle pump
Calf muscle pump or calf pump
UNNA boot
Crossover bypass
Jugular axillary vein bypass
Femoropopliteal and femorocrural saphenous vein bypass
Femoroiliocaval bypass
MAY-HUSNI bypass. See saphenopopliteal bypass
Cross-pubic prosthetic bypass
Saphenopopliteal bypass
Venous bypass
Cramp
Muscle cramp. See cramp
Night cramp. See cramp
Compression stockings. See compression hosiery
Quality of life in venous disease
Postural diameter change
Venous skin changes
Venous hemodynamic changes in venous disease
Trophic disorders. See venous skin changes
Venous capacitance
ClosureFAST™ catheter
Oasis® catheter
AKónya Eliminator – thrombectomy catheter
X-sizer™ helical thrombectomy catheter
Trellis thrombectomy catheter
Valve closure
Perforator vein open surgery or perforator open surgery
Venous open surgery
SP

Cirugía de válvula
Cirugía endoscópica de las venas perforantes, ver cirugía perforante endoscópica subfascial
Cirugía perforante endoscópica subfascial
Cirugía reconstructiva de la vena profunda
Cirugía reconstructiva venosa
Cirugía venosa
Cirugía venosa profunda
ClariVein®
Clases clínicas de la CEAP
Clasificación CEAP básica
Clasificación clínica, etiológica, anatómica y patofisiológica avanzada (CEAP)
Clasificación clínica, etiológica, anatómica, patofisiológica (CEAP)
Clasificación de Hamburgo
Clasificación de KABNICK, ver además trombo inducido por calor endovenoso
Clasificación HACH
Clasificación HERMAN, ver clasificación KISTNER
Clasificación KISTNER
Clasificación Widmer
Claudicación venosa
Clip o filtro ADAMS-DEWEASE
Comisura de la válvula
Compartimento safeno, ver ojo egipcio
Componente A de la clasificación CEAP
Componente C de la clasificación CEAP
Componente E anatómico de la clasificación CEAP
Componente P de la clasificación CEAP
Compresibilidad venosa
Compresión de la vena ilíaca
Compresión de la vena renal izquierda, ver síndrome de cascanueces
Compresión de la vena, ver compresión venosa
Compresión del muslo
Compresión elástica graduada
Compresión excéntrica
Compresión neumática intermitente
Compresión neumática secuencial
Compresión venosa
Congestión de las venas pélvicas, ver síndrome de congestión pélvica
Consejos de estilo de vida para los trastornos venosos crónicos
Construcción de neoválvula MALETI
Continuación Azigos de la vena cava inferior
Corona flebectásica paraplantarís
Corona flebectásica, ver corona flebectásica paraplantarís
Corteza de pino marítimo francés
Crioablación

EN

Valve surgery
Endoscopic perforator surgery. See subfascial endoscopic perforator surgery
Subfascial endoscopic perforator surgery
Deep vein reconstructive surgery
Venous reconstructive surgery
Venous surgery
Deep venous surgery
ClariVein®
Clinical classes of the CEAP / CEAP clinical classes
Basic CEAP classification
Advanced Clinical, Etiological, Anatomical, and Pathophysiological (CEAP) classification
Clinical, Etiological, Anatomical, Physiopathological (CEAP) classification
Hamburg classification
KABNICK classification. See also endovenous heat-induced thrombus
HACH classification
HERMAN’s classification. See KISTNER’s classification
KISTNER’s classification
Widmer’s classification
Venous claudication
ADAMS-DEWEASE clip or filter
Valve commissure
Saphenous compartment. See Egyptian eye
A component of the CEAP classification
C component of the CEAP classification
E component of the CEAP classification
P component of the CEAP classification
Venous compressibility
Iliac vein compression
Left renal vein compression. See nutcracker syndrome
Vein compression. See venous compression
Thigh compression
Graduated elastic compression
Eccentric compression
Intermittent pneumatic compression
Sequential pneumatic compression
Venous compression
Congestion in the pelvic veins. See pelvic congestion syndrome
Lifestyle advice for chronic venous disorders
MALETI neovalve construction
Azigos continuation of the inferior vena cava
Corona phlebectatica paraplantarís
Corona phlebectatica. See corona phlebectatica paraplantarís
French maritime pine bark
Cryoablating
TERMS IN OTHER LANGUAGES - SPANISH

<table>
<thead>
<tr>
<th>SP</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crosectomía</td>
<td>Crossectomy</td>
</tr>
<tr>
<td>Cuantificación de reflujo</td>
<td>Reflux quantification</td>
</tr>
<tr>
<td>Cuestionario Charing Cross sobre úlceras venosas</td>
<td>Charing Cross Venous Ulcer Questionnaire</td>
</tr>
<tr>
<td>Cuestionario de Aberdeen sobre venas varicosas</td>
<td>Aberdeen Varicose Vein Questionnaire</td>
</tr>
<tr>
<td>Cuestionario de calidad de vida específica y respuesta venosa</td>
<td>Specific quality of life outcome response-venous</td>
</tr>
<tr>
<td>Cuestionario de calidad de vida sobre úlcera venosa de la pierna</td>
<td>Venous leg ulcer quality of life questionnaire</td>
</tr>
<tr>
<td>Cumárina</td>
<td>Coumarin</td>
</tr>
<tr>
<td>Cumplimiento de compresión</td>
<td>Compression compliance</td>
</tr>
<tr>
<td>Cumplimiento venoso</td>
<td>Venous compliance</td>
</tr>
<tr>
<td>Cúspide de la válvula o cúspide</td>
<td>Valve cusp or cusp</td>
</tr>
<tr>
<td>Dabigatrán (dabigatrán etexilato)</td>
<td>Dabigatran (dabigatran etexilate)</td>
</tr>
<tr>
<td>Dalteparina (dalteparina sódica)</td>
<td>Dalteparin (dalteparin sodium)</td>
</tr>
<tr>
<td>Danaparoid (danaparoid sódico)</td>
<td>Danaparoid (danaparoid sodium)</td>
</tr>
<tr>
<td>Daño en los nervios después de ablación</td>
<td>Nerve damage after stripping</td>
</tr>
<tr>
<td>Deficiencia de proteína C</td>
<td>Protein C deficiency</td>
</tr>
<tr>
<td>Deficiencia de proteína S</td>
<td>Protein S deficiency</td>
</tr>
<tr>
<td>Dermatitis (dermatitis venosa, eccema venoso)</td>
<td>Dermatitis (venous dermatitis, venous eczema)</td>
</tr>
<tr>
<td>Dermatitis por estasis</td>
<td>Stasis dermatitis</td>
</tr>
<tr>
<td>Diferencial de presión brazo/pie</td>
<td>Arm/foot pressure differential</td>
</tr>
<tr>
<td>Dímero D</td>
<td>D-dimer</td>
</tr>
<tr>
<td>Diosmina</td>
<td>Diosmin</td>
</tr>
<tr>
<td>Directrices NICE para el tratamiento de venas varicosas</td>
<td>NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Directrices para la enfermedad venosa crónica de la Sociedad Europea de Cirugía Vascular</td>
<td>European Society for Vascular Surgery guidelines for chronic venous disease</td>
</tr>
<tr>
<td>Dispositivo de compresión</td>
<td>Compression device</td>
</tr>
<tr>
<td>Dispositivo de estimulación eléctrica del músculo de la pantorrilla</td>
<td>Electrical calf muscle stimulation device</td>
</tr>
<tr>
<td>Dispositivo electrónico para flebectomía, ver flebectomía motorizada</td>
<td>Phlebectomy power device. See powered phlebectomy</td>
</tr>
<tr>
<td>Dispositivos de ajuste y descarga (para medias)</td>
<td>Donning and doffing devices (for stockings)</td>
</tr>
<tr>
<td>Dolor pulsátil</td>
<td>Throbbing</td>
</tr>
<tr>
<td>Dolor, ver dolorido</td>
<td>Pain. See aching</td>
</tr>
<tr>
<td>Dolorido</td>
<td>Aching</td>
</tr>
<tr>
<td>Doppler de onda continua</td>
<td>Continuous-wave Doppler</td>
</tr>
<tr>
<td>Doppler portátil, ver además Doppler de onda continua</td>
<td>Hand-held Doppler. See also continuous-wave Doppler</td>
</tr>
<tr>
<td>Drenaje en cascada</td>
<td>Waterfall drainage</td>
</tr>
<tr>
<td>Eccema</td>
<td>Eczema</td>
</tr>
<tr>
<td>Eccema venoso (eccema varicoso, eczema gravitacional, dermatitis por estasis)</td>
<td>Venous eczema (varicose eczema, gravitational eczema, stasis dermatitis)</td>
</tr>
<tr>
<td>Ecoscleroterapia, ver escleroterapia guiada por ultrasonidos</td>
<td>Echoclerotherapy. See ultrasound-guided sclerotherapy</td>
</tr>
<tr>
<td>Ecogenicidad venosa</td>
<td>Venous echogenicity</td>
</tr>
<tr>
<td>Ecografía</td>
<td>Ultrasonography</td>
</tr>
<tr>
<td>Ecografía dúplex</td>
<td>Duplex ultrasonography</td>
</tr>
<tr>
<td>Edema venoso (flebedema)</td>
<td>Venous edema (phlebedema)</td>
</tr>
<tr>
<td>Edema, ver edema venoso</td>
<td>Edema. See venous edema</td>
</tr>
<tr>
<td>Edoxabán</td>
<td>Edoxaban</td>
</tr>
<tr>
<td>Efecto de torniquete</td>
<td>Touriquet effect</td>
</tr>
<tr>
<td>Efecto VENTURI</td>
<td>VENTURI effect</td>
</tr>
<tr>
<td>SP</td>
<td>EN</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td>Embolectomía</td>
<td>Embolectomy</td>
</tr>
<tr>
<td>Embolia</td>
<td>Embolism</td>
</tr>
<tr>
<td>Embolia pulmonar o tromboembolia pulmonar</td>
<td>Pulmonary embolism or pulmonary thromboembolism</td>
</tr>
<tr>
<td>Embolización</td>
<td>Embolization</td>
</tr>
<tr>
<td>Embolización adhesiva, ver embolización con pegamento o ablación adhesiva/con pegamento</td>
<td>Adhesive embolization. See glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Embolización con cianoacrilato, ver embolización con pegamento</td>
<td>Cyanoacrylate embolization. See glue embolization</td>
</tr>
<tr>
<td>Embolización con pegamento o ablación adhesiva/con pegamento</td>
<td>Glue embolization or glue/adhesive ablation</td>
</tr>
<tr>
<td>Embolización de la vena gonadal</td>
<td>Gonadal vein embolization</td>
</tr>
<tr>
<td>Embolización de la vena ovárica</td>
<td>Ovarian vein embolization</td>
</tr>
<tr>
<td>Embolización de la vena pélvica</td>
<td>Pelvic vein embolization</td>
</tr>
<tr>
<td>Émibolos</td>
<td>Emboli</td>
</tr>
<tr>
<td>Embrillogía venosa</td>
<td>Venous embryology</td>
</tr>
<tr>
<td>Endoflebectomía o endovenetomía</td>
<td>Endophlebectomy or endovenectomy</td>
</tr>
<tr>
<td>Endoprótesis autoexpansible</td>
<td>Self-expanding stent</td>
</tr>
<tr>
<td>Endoprótesis de la vena iliaca</td>
<td>Iliac vein stenting</td>
</tr>
<tr>
<td>Endoprótesis de nitinol</td>
<td>Nitinol stent</td>
</tr>
<tr>
<td>Endoprótesis vascular con balón</td>
<td>Balloon-expanding stent</td>
</tr>
<tr>
<td>Endoprótesis venosa</td>
<td>Venous stenting</td>
</tr>
<tr>
<td>Endovenoso</td>
<td>Endovenous</td>
</tr>
<tr>
<td>Enfermedad de BEHÇET</td>
<td>BEHÇET’s disease</td>
</tr>
<tr>
<td>Enfermedad de BUERGER</td>
<td>BUERGER’s disease</td>
</tr>
<tr>
<td>Enfermedad de MONDOR</td>
<td>MONDOR’s disease</td>
</tr>
<tr>
<td>Enfermedad venosa</td>
<td>Venous disease</td>
</tr>
<tr>
<td>Enfermedad venosa crónica</td>
<td>Chronic venous disease</td>
</tr>
<tr>
<td>Enoxaparina</td>
<td>Enoxaparin</td>
</tr>
<tr>
<td>Enrollado de las venas ováricas o de las venas pélvicas, ver embolización de la vena pélvica</td>
<td>Coiling of ovarian or pelvic veins. See also pelvic vein embolization</td>
</tr>
<tr>
<td>Eritema de tobillo, ver corona flebectásica paraplantaris</td>
<td>Ankle flare see corona phlebectatica paraplantaris</td>
</tr>
<tr>
<td>Eritema maleolar, ver corona flebectásica paraplantaris</td>
<td>Malleolar flare. See corona phlebectatica paraplantaris</td>
</tr>
<tr>
<td>Escala GINSBERG</td>
<td>GINSBERG scale</td>
</tr>
<tr>
<td>Escleroespuma con biomatriz</td>
<td>Biomatrix sclerofoam</td>
</tr>
<tr>
<td>Escleroterapia</td>
<td>Sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia con espuma guiada por ultrasonido</td>
<td>Ultrasound-guided foam sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia con espuma, ver además escleroterapia</td>
<td>Foam sclerotherapy. See also sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia con microespuma, ver escleroterapia con espuma</td>
<td>Microfoam sclerotherapy. See foam sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia en anestesia tumescente de las venas reticulares y telangiectasias (START)</td>
<td>Sclerotherapy in Tumescent Anesthesia of Reticular veins and Telangiectasia (START)</td>
</tr>
<tr>
<td>Escleroterapia guiada por ultrasonido</td>
<td>Ultrasound-guided sclerotherapy</td>
</tr>
<tr>
<td>Escleroterapia líquida</td>
<td>Liquid sclerotherapy</td>
</tr>
<tr>
<td>Espiral para reflux venoso profundo</td>
<td>Coiling for deep venous reflux</td>
</tr>
<tr>
<td>Espuma esclerosante</td>
<td>Sclerosing foam</td>
</tr>
<tr>
<td>Estenosís de ROKITANSKY</td>
<td>ROKITANSKY stenosis</td>
</tr>
<tr>
<td>Estenosis venosa</td>
<td>Venous stenosis</td>
</tr>
<tr>
<td>Estimulador eléctrico neuromuscular en la insuficiencia venosa crónica</td>
<td>Neuromuscular electric stimulator in chronic venous insufficiency</td>
</tr>
<tr>
<td>Estreptocinasa</td>
<td>Streptokinase</td>
</tr>
</tbody>
</table>
SP

Estructuras tipo valvulares EISEMANN y MALETTE, ver válvula de vena autóloga

Estudio de cirugía perforante endoscópica subfascial (SEPS) de América del Norteamérica

Estudio de la vena Edinburg

Estudio PREPIC

Estudio PREPIC 2, ver Estudio PREPIC

Estudios epidemiológicos y económicos de insuficiencia venosa (VEINES)

Evaluación de la enfermedad venosa segmentaria

Evaluación de la gravedad de la enfermedad venosa

Extensión craneal de la vena safena menor

Extensión del muslo de la vena safena menor

Extracto de semilla de uva

Factor V de mutación Leiden, (heterocigótico, homocigótico)

Factor VIII

Factores de riesgo de las venas varicosas

Factores de riesgo de trombosis venosa, ver factores de riesgo para la trombosis venosa profunda

Factores de riesgo para el síndrome posttrombótico

Factores de riesgo para la enfermedad venosa crónica, ver factores de riesgo de las venas varicosas y para la insuficiencia venosa crónica (C_{3}-C_{6})

Factores de riesgo para la insuficiencia venosa crónica (C_{3}-C_{6})

Factores de riesgo para la recurrencia de la trombosis venosa crónica

Factores de riesgo para la trombosis venosa crónica

Factores de riesgo para PREVAIT (presencia de varices tras la intervención)

Fármacos flebotónicos, ver venotónicos o fármacos venoactivos

Fármacos venoactivos

Fármacos venosos

Fármacos venotónicos, ver fármacos venoactivos

Farmacoterapia venosa

Fascietomía en la enfermedad venosa

Fasciostomía en la enfermedad venosa

Fatiga

Fenindiona

Fenprocoumon

Fibra radial de doble anillo

Fibra, ver fibras láser

Fibras láser

Fibrina

Fibrinolisis

Filtro caval profiláctico

Filtro de la cava recuperable

Filtro de la cava suprarrenal

Filtro de la vena cava inferior

Filtro de la vena cava inferior Amplatz

Filtro de la vena cava inferior Tilted

Filtro de la vena cava TrapEase®

EN

EISEMANN and MALETTE valve-like structures. See autologous vein valve

North American subfascial endoscopic perforator surgery (SEPS) study

Edinburgh vein study

PREPIC study

PREPIC 2 study. See PREPIC study

Venous insufficiency epidemiological and economic studies (VEINES)

Venous segmental disease score

Venous severity scoring

Cranial extension of the small saphenous vein

Thigh extension of the small saphenous vein

Grape seed extract

Factor V Leiden mutation (heterozygous, homozygous)

Factor VIII

Risk factors for varicose veins

Venous thrombosis risk factors. See risk factors for deep venous thrombosis

Risk factors for postthrombotic syndrome

Risk factors for chronic venous disease. See risk factors for varicose veins and for chronic venous insufficiency (C_{3}-C_{6})

Risk factors for chronic venous insufficiency (C_{3}-C_{6})

Risk factors for deep venous thrombosis recurrence

Risk factors for deep venous thrombosis

Risk factors for PREVAIT (PREsence of Varices After Interventional Treatment)

Phlebotonic drug. See venotonic drugs or venoactive drugs

Venoactive drugs

Venous drugs

Venotonic drugs. See venoactive drugs

Venous pharmacotherapy

Fasciectomy in venous disease

Fasciostomy in venous disease

Fatigue

Phenindione

Fenprocoumon

Double ring radial fiber

Fiber. See laser fibers

Laser fibers

Fibrin

Fibrinolysis

Prophylactic caval filter

Retrievable cava filter

Suprarenal cava filter

Inferior vena cava filter

Amplatz inferior vena cava filter

Tilted inferior vena cava filter

TrapEase® vena cava filter
TERMS IN OTHER LANGUAGES - SPANISH

SP

- Filtro de nido de pájaro
- Filtro de recuperación de nitinol
- Filtro de titanio GREENFIELD™
- Filtro G2, ver además filtro GREENFIELD™ y filtro GUNTHER™ tulip
- Filtro GREENFIELD™, ver además filtro G2 y filtro GUNTHER™ tulip
- Filtro GUNTHER™ tulip, ver además filtro GREENFIELD™ y filtro G2
- Filtro OptEase®
- Filtros en la cava
- Fisiología venosa
- Fistula arteriovenosa
- Fistula arteriovenosa temporal
- Flavonoides
- Flebectasia, ver además venectasia y vena varicos, varices y varicosidad
- Flebectomía
- Flebectomía ambulatoria de MULLER
- Flebectomía ambulatoria, ver avulsión incisiva ambulatoria
- Flebectomía de gancho
- Flebectomía motorizada
- Flebectomía motorizada transiluminada
- Flebitis
- Flebografía de sustracción digital
- Flebografía, venografía descendente
- Flebografía, ver venografía
- Flebografía/venografía ascendente
- Flebología
- Flebotomía, venesección, venotomía
- Flemasia alba dolens o pierna blanca
- Flemasia cerulea dolens o pierna dolorosa azul
- Flujo ascendente venoso
- Flujo de retorno venoso, ver reflejo venoso
- Flujo descendiente venoso, ver reflejo venoso
- Flujo venoso
- Fluometría Doppler láser
- Fondaparinux
- Formación de trombos venosos
- Foro venoso americano (AVF)
- Foro venoso americano / directrices de la Sociedad de Cirugía Vascular
- Foro venoso europeo
- Fotoplethsmografía
- Fototermólisis
- Fracción de eyeción
- Fracción de volumen residual
- Fracción del flujo de salida
- Fracción flavonoide purificada micronizada (MPFF)
- Frecuencia de repetición de pulso
- Función de la bomba venosa

EN

- Bird’s nest filter
- Recovery nitinol filter
- Titanium GREENFIELD™ filter
- G2 filter. See also GREENFIELD™ filter and GUNTHER™ tulip filter
- GREENFIELD™ filter. See also G2 filter and GUNTHER™ tulip filter
- GUNTHER™ tulip filter. See also GREENFIELD filter and G2 filter
- OptEase® filter
- Caval filters
- Venous physiology
- Arteriovenous fistula
- Temporary arteriovenous fistula
- Flavonoids
- Phlebectasia. See also venectasia and varice, varicose vein, and varicosity
- Phlebectomy
- MULLER’s ambulatory phlebectomy
- Ambulatory phlebectomy. See ambulatory stab avulsion
- Hook phlebectomy
- Powered phlebectomy
- Transilluminated powered phlebectomy
- Phlebitis
- Digital subtraction phlebography
- Descending phlebography, venography
- Phlebography. See venography
- Ascending phlebography/venography
- Phlebology
- Phlebotomy (venesection, venotomy)
- Phlemasia alba dolens or white leg
- Phlemasia cerulea dolens or painful blue leg
- Venous blow out
- Venous back flow. See venous reflux
- Venous blow down. See venous reflux
- Venous flow
- Laser doppler flowmetry
- Fondaparinux
- Venous thrombus formation
- American Venous Forum (AVF)
- American Venous Forum / Society for Vascular Surgery guidelines
- European Venous Forum
- Photoplethysmography
- Photothermolysis
- Ejection fraction. See also ejection volume
- Residual volume fraction
- Outflow fraction
- Micronized purified flavonoid fraction (MPFF)
- Pulse repetition frequency
- Venous pump function
<table>
<thead>
<tr>
<th>SP</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Función de la bomba venosa de la pantorrilla</td>
<td>Venous calf pump function</td>
</tr>
<tr>
<td>Función valvular</td>
<td>Valvular function</td>
</tr>
<tr>
<td>Función venosa</td>
<td>Venous function</td>
</tr>
<tr>
<td>Gama benzopirona, ver flavonoides</td>
<td>Gamma benzopyrone. See flavonoids</td>
</tr>
<tr>
<td>Gammagrafía de perfusión</td>
<td>Perfusion scintigraphy</td>
</tr>
<tr>
<td>Gammagrafía de ventilación-perfusión</td>
<td>Ventilation-perfusion scintigraphy</td>
</tr>
<tr>
<td>Gancho de flebectomía</td>
<td>Phlebectomy hook</td>
</tr>
<tr>
<td>Gangrena venosa</td>
<td>Venous gangrene</td>
</tr>
<tr>
<td>Generator de láser</td>
<td>Laser generator</td>
</tr>
<tr>
<td>Generator de radiofrecuencia</td>
<td>Radiofrequency generator</td>
</tr>
<tr>
<td>Glicerina</td>
<td>Glycerin</td>
</tr>
<tr>
<td>Glicerina cromada</td>
<td>Chromated glycerin</td>
</tr>
<tr>
<td>Hemangioendotelioma</td>
<td>Hemangioendothelioma</td>
</tr>
<tr>
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<td>Hemangioma</td>
</tr>
<tr>
<td>Hemangioma intraóseo</td>
<td>Intraosseous hemangioma</td>
</tr>
<tr>
<td>Hemodinámica quirúrgica de la insuficiencia venosa ambulatoria</td>
<td>Chirurgie Hémodynamique de l’Insuffisance Veineuse en Ambulatoire</td>
</tr>
<tr>
<td>Hemodinámica venosa</td>
<td>Venous hemodynamics</td>
</tr>
<tr>
<td>Heparina</td>
<td>Heparin</td>
</tr>
<tr>
<td>Heparina de bajo peso molecular</td>
<td>Low molecular-weight heparin</td>
</tr>
<tr>
<td>Heparina no fraccionada</td>
<td>Unfractionated heparin</td>
</tr>
<tr>
<td>Hiperpigmentación de la piel</td>
<td>Occupational leg swelling</td>
</tr>
<tr>
<td>Hipertensión venosa ambulatoria</td>
<td>Skin hyperpigmentation</td>
</tr>
<tr>
<td>Hipertensión venosa, ver además hipertensión venosa ambulatoria</td>
<td>Ambulatory venous hypertension</td>
</tr>
<tr>
<td>Hipoplasia venosa</td>
<td>Venous hypoplasia</td>
</tr>
<tr>
<td>Hirudina</td>
<td>Hirudin</td>
</tr>
<tr>
<td>Hormigueo</td>
<td>Tingling</td>
</tr>
<tr>
<td>Impresión de hinchazón, ver sensación de hinchazón</td>
<td>Impression of swelling. See feeling of swelling</td>
</tr>
<tr>
<td>Incompetencia de la vena perforante</td>
<td>Perforator vein incompetence</td>
</tr>
<tr>
<td>Incompetencia valvular</td>
<td>Valvular incompetence</td>
</tr>
<tr>
<td>Incompetencia venosa</td>
<td>Venous incompetence</td>
</tr>
<tr>
<td>Incompetencia venosa primaria</td>
<td>Primary venous incompetence</td>
</tr>
<tr>
<td>Incompetencia venosa profunda</td>
<td>Deep venous incompetence</td>
</tr>
<tr>
<td>Incompetencia venosa secundaria</td>
<td>Secondary venous incompetence</td>
</tr>
<tr>
<td>Índice de drenaje venoso</td>
<td>Venous drainage index</td>
</tr>
<tr>
<td>Índice de flujo venoarterial</td>
<td>Venoarterial flow index</td>
</tr>
<tr>
<td>Índice de llenado venoso (VFI)</td>
<td>Venous filling index (VFI)</td>
</tr>
<tr>
<td>Índice de masa corporal</td>
<td>Body mass index</td>
</tr>
<tr>
<td>Índice de recirculación</td>
<td>Recirculation index</td>
</tr>
<tr>
<td>Índice de rigidez dinámica</td>
<td>Dynamic stiffness index</td>
</tr>
<tr>
<td>Índice de rigidez estática</td>
<td>Static stiffness index</td>
</tr>
<tr>
<td>Índice tobillo-brazo o índice de presión tobillo-brazo</td>
<td>Ankle brachial index or ankle-brachial pressure index</td>
</tr>
<tr>
<td>Inhibidores tisulares de metaloproteinásas (TIMP)</td>
<td>Tissue inhibitors of metalloproteinases (TIMPs)</td>
</tr>
<tr>
<td>Instituto Nacional para Salud y Excelencia Clínica (NICE), ver Directrices NICE para el tratamiento de venas varicosas</td>
<td>National Institute for health and Care Excellence (NICE). See NICE guidelines for varicose vein treatment</td>
</tr>
<tr>
<td>Insuficiencia safena</td>
<td>Saphenous insufficiency</td>
</tr>
<tr>
<td>Insuficiencia venosa cerebroespinal crónica</td>
<td>Chronic cerebrospinal venous insufficiency</td>
</tr>
<tr>
<td>Insuficiencia venosa crónica</td>
<td>Chronic venous insufficiency</td>
</tr>
<tr>
<td>Insuficiencia venosa superficial</td>
<td>Superficial venous insufficiency</td>
</tr>
<tr>
<td>SP</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------</td>
</tr>
<tr>
<td>Intersección neosafeno-femoral</td>
<td>Neosaphenofemoral junction</td>
</tr>
<tr>
<td>Intersección safenofemoral</td>
<td>Saphenofemoral junction</td>
</tr>
<tr>
<td>Investigación de la evaluación y de la estandarización de las pruebas de la enfermedad venosa</td>
<td>Investigating venous disease evaluation and standardization of testing</td>
</tr>
<tr>
<td>Inyección arterial durante escleroterapia</td>
<td>Arterial injection during sclerotherapy</td>
</tr>
<tr>
<td>Inyección intraarterial de esclerosante</td>
<td>Intra-arterial injection of sclerosant</td>
</tr>
<tr>
<td>Láser de Alejandrita de pulso largo</td>
<td>Alexandrite long-pulse laser / Long-pulse Alexandrite laser</td>
</tr>
<tr>
<td>Láser de diodo</td>
<td>Diode laser</td>
</tr>
<tr>
<td>Láser KTP</td>
<td>KTP laser</td>
</tr>
<tr>
<td>Láser ND-YAG (granate de itrio-aluminio (YAG) dopada con neodimio)</td>
<td>ND-YAG laser (neodymium-doped yttrium aluminum garnet)</td>
</tr>
<tr>
<td>Láser YAG, ver Láser ND-YAG</td>
<td>YAG laser. See ND-YAG laser</td>
</tr>
<tr>
<td>Leiomiosarcoma</td>
<td>Leiomyosarcoma</td>
</tr>
<tr>
<td>Lepirudina</td>
<td>Lepirudin</td>
</tr>
<tr>
<td>Lesión venosa iliaca no trombótica</td>
<td>Nonthrombotic iliac vein lesion</td>
</tr>
<tr>
<td>Ligación de vena perforante de COCKETT</td>
<td>COCKETT's perforator vein ligation</td>
</tr>
<tr>
<td>Ligadura al ras</td>
<td>Flush ligation</td>
</tr>
<tr>
<td>Ligadura alta</td>
<td>High ligation</td>
</tr>
<tr>
<td>Ligadura de la vena perforante o ligadura perforante</td>
<td>Perforator vein ligation or perforator ligation</td>
</tr>
<tr>
<td>Ligadura venosa</td>
<td>Venous ligation</td>
</tr>
<tr>
<td>Ligadura y ablación alta</td>
<td>High ligation and stripping</td>
</tr>
<tr>
<td>Ligadura y división alta</td>
<td>High ligation and division</td>
</tr>
<tr>
<td>Lipodermatoesclerosis</td>
<td>Lipodermatosclerosis</td>
</tr>
<tr>
<td>Lipoejema</td>
<td>Lipedema</td>
</tr>
<tr>
<td>Longitudes de onda láser para agua</td>
<td>Water-specific laser wavelengths</td>
</tr>
<tr>
<td>Longitudes de onda láser para hemoglobina</td>
<td>Hemoglobin-specific laser wavelengths</td>
</tr>
<tr>
<td>Lumen venoso</td>
<td>Venous lumen</td>
</tr>
<tr>
<td>Luz pulsada intensa</td>
<td>Intense pulsed light</td>
</tr>
<tr>
<td>Malformación arteriovenosa</td>
<td>Arteriovenous malformation</td>
</tr>
<tr>
<td>Malformación capilar</td>
<td>Capillary malformation</td>
</tr>
<tr>
<td>Malformación linfática</td>
<td>Lymphatic malformation</td>
</tr>
<tr>
<td>Malformación troncular</td>
<td>Truncular malformation</td>
</tr>
<tr>
<td>Malformación vascular congénita</td>
<td>Congenital vascular malformation</td>
</tr>
<tr>
<td>Malformación venosa</td>
<td>Venous malformation</td>
</tr>
<tr>
<td>Malformación venosa extratruncular</td>
<td>Extratruncular venous malformation</td>
</tr>
<tr>
<td>Malformación venosa intraósea</td>
<td>Intratrous venous malformation</td>
</tr>
<tr>
<td>Mallas superpuestas</td>
<td>Superimposed leggings</td>
</tr>
<tr>
<td>Mancha de color vino de Oporto</td>
<td>Port-wine stain</td>
</tr>
<tr>
<td>Maniobra de Paraná</td>
<td>Paraná maneuver</td>
</tr>
<tr>
<td>Maniobra de puntillas</td>
<td>Tiptoe maneuver</td>
</tr>
<tr>
<td>Maniobra Valsalva</td>
<td>Valsalva maneuver</td>
</tr>
<tr>
<td>Maniobras de transferencia de peso</td>
<td>Weight transfer maneuvers</td>
</tr>
<tr>
<td>Mapeo por ultrasonido</td>
<td>Ultrasound mapping</td>
</tr>
<tr>
<td>Mastocitos en enfermedad venosa crónica</td>
<td>Mast cells in chronic venous disease</td>
</tr>
<tr>
<td>Mayor resistencia al flujo de salida</td>
<td>Increased outflow resistance</td>
</tr>
<tr>
<td>Medias antitrombóticas</td>
<td>Antithrombotic stockings</td>
</tr>
<tr>
<td>Medias de compresión</td>
<td>Compression hosiery</td>
</tr>
<tr>
<td>Medias elásticas de compresión</td>
<td>Elastic compression stockings</td>
</tr>
<tr>
<td>Medias médicas de compresión</td>
<td>Medical compression stockings</td>
</tr>
<tr>
<td>Medición hemodinámica venosa</td>
<td>Venous hemodynamic measurement</td>
</tr>
</tbody>
</table>
Metaloproteínas de matriz
Microflebectomía, ver avulsión incisiva ambulatoria, o Flebectomy ambulatoria de MULLER
Monitorización por ultrasonidos
Morruto sódico
Necrosis cutánea después de escleroterapia
Neoválvula (autógena)
Neovascularización
Obliteración venosa
Obstrucción de la vena iliaca
Obstrucción de la vena iliocava
Obstrucción de la vena, ver obstrucción venosa
Obstrucción del flujo de salida
Obstrucción primaria de la vena no trombótica, ver lesión venosa iliaca no trombótica
Obstrucción venosa
Obstrucción venosa profunda
Oclusión de la vena iliaca
Oclusión de la vena iliocava
Oclusión de la vena, ver oclusión venosa
Oclusión venosa
Ojo egipcio
Ojo safeno, ver ojo egipcio
Oleato de etanolamina
Operación de LINTON, ver además cirugía perforante endoscópica subfascial
Operación de PALMA, ver trasposición de la vena safena femorofemoral
Operación de WARREN, ver bypass de vena safena femoropoplítea y femorocrural
Opresión
Paciente C
Paraguas MOBIN-UDDIN
Parche de politetrafluoroetileno para contener neovascularización
Patogénesis de varices
Pentoxifilina
Permeabilidad secundaria
Pesadez
Pico
Piernas inquietas
Piernas pesadas, ver pesadez
Pigmentación o hiperpigmentación
Plataforma inclinable
Pletismografía de aire
Pletismografía de impedancia
Pletismografía de oclusión
Pletismografía de tensión de calibre
Pletismografía venosa
Pletismografía, ver además pletismografía de aire, fotograflelasmografía y pletismografía de oclusión

EN
Matrix metalloproteinases
Microphlebectomy. See ambulatory stab avulsion or MULLER’s phlebectomy
Ultrasound monitoring
Sodium morrhuate
Cutaneous necrosis after sclerotherapy
Neovalve (autogenous)
Neovascularization
Venous obliteration
Iliac vein obstruction
Iliocaval vein obstruction
Vein obstruction. See venous obstruction
Outflow obstruction
Nonthrombotic vein primary obstruction. See nonthrombotic iliac vein lesion
Venous obstruction
Deep venous obstruction
Iliac vein occlusion
Iliocaval vein occlusion
Vein occlusion. See venous occlusion
Venous occlusion
Egyptian eye
Saphenous eye. See egyptian eye
Ethanolamine oleate
LINTON’s operation. See also subfascial endoscopic perforator surgery
PALMA operation. See femorofemoral saphenous vein transposition
WARREN operation. See femoropopliteal or femorocrural saphenous vein bypass
Tightness
C patient
MOBIN-UDDIN umbrella
Polytetrafluoroethylene patch for containing neovascularization
Varices pathogenesis
Pentoxifylline
Secondary patency
Heaviness
Itching
Restless legs
Heavy leg. See heaviness
Pigmentation or hyperpigmentation
Tilt table
Air Plethysmography
Impedance plethysmography
Occlusion plethysmography
Strain-gauge plethysmography
Venous plethysmography
Plethysmography. See also air plethysmography, photoplethysmography and occlusion plethysmography
TERM IN OTHER LANGUAGES - SPANISH

SP

- Plexo pampiniforme
- Plexo pudendo (vesicoprostático) (varón)
- Plexo rectal externo venoso sacro
- Plexo rectal interno venoso sacro
- Plexo venoso prostático (varón)
- Plexo venoso uterino (hembra)
- Plexo venoso vaginal (hembra)
- Polidocanol
- Posición TRENDELENBURG
- Posterolateral de la vena perforante posterior del muslo
- Posteromedial de la vena perforante posterior del muslo
- PREsencia de VArices tras la Intervención y Tratamiento (PREVAIT)
- Presión de compresión
- Presión de compresión de trabajo
- Presión de interfaz
- Presión hidrostática
- Presión intramuscular
- Presión venosa
- Presión venosa embulatoria
- Presión venosa dinámica
- Prevención/profilaxis de la trombosis venosa profunda
- Primera resección de costilla
- Procedimiento con una banda de Silastic PSATAKIS
- Procedimiento endovenoso, ver técnica endovenosa
- Prospecto de la válvula, ver cúspide de la válvula
- Prostaciclina
- Prueba de compresión sistólica
- Prueba de tira radiactiva para competencia de la válvula, ver prueba de compresión sistólica
- Prueba de TRENDELENBURG
- Prurito, ver picor
- Punción guiada por ultrasonido, canulación
- Punto de escape
- Puntuación anatómica, ver Evaluación de la enfermedad venosa segmentaria
- Puntuación CAPRINI
- Puntuación clínica de Amberes para la embolia pulmonar
- Puntuación de gravedad clínica venosa (VCSS)
- Puntuación de gravedad del cuestionario de Aberdeen sobre venas varicosas
- Puntuación de gravedad del cuestionario de Homburg sobre venas varicosas
- Puntuación de incapacidad venosa
- Puntuación del dolor
- Puntuación VILLALTA
- Puntuación Wells
- Radiología intervencionista (en flebología)
- Recirculación safenosa
- Reconstrucción de la válvula

EN

- Pampiniform plexus
- Pudendal (vesicoprostatic) plexus (male)
- Sacral venous external rectal plexus
- Sacral venous internal rectal plexus
- Prostatic venous plexus (male)
- Uterine venous plexus (female)
- Vaginal venous plexus (female)
- Polidocanol
- TRENDELENBURG position
- Posterior thigh perforator vein posterolateral
- Posterior thigh perforator vein posteromedial
- PREsence of Varices After Interventional Treatment (PREVAIT)
- Compression pressure
- Working compression pressure
- Interface pressure
- Hydrostatic pressure
- Intramuscular pressure
- Venous pressure
- Ambulatory venous pressure
- Dynamic venous pressure
- Deep vein thrombosis prevention/prophylaxis
- First rib resection
- PSATAKIS silastic sling procedure
- Endovenous procedure. See endovenous technique
- Valve leaflet. See valve cusp or cusp
- Prostacyclin
- Milking test
- PERTHES test
- Strip test for valve competence. See milking test
- TRENDELENBURG test
- Pruritis. See itching
- Ultrasound-guided puncture, cannulation
- Escape point
- Anatomic score. See venous segmental disease score
- CAPRINI score
- Antwerp clinical score for pulmonary embolism
- Venous clinical severity score (VCSS)
- Aberdeen Varicose Vein Severity Score
- Homburg varicose vein severity score
- Venous disability score
- Pain score
- VILLALTA score
- Wells score
- Interventional radiology (in phlebology)
- Saphenous recirculation
- Valve reconstruction
<table>
<thead>
<tr>
<th>SP</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reconstrucción de la vena cava inferior suprarrenal</td>
<td>Suprarenal inferior vena cava reconstruction</td>
</tr>
<tr>
<td>Reconstrucción quirúrgica abierta para oclusiones no malignas de la vena cava</td>
<td>Open surgical reconstruction for nonmalignant occlusion of the vena cava</td>
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<tr>
<td>Red capilar telangiectásica</td>
<td>Telangiectatic matting</td>
</tr>
<tr>
<td>Red subcutánea plantar venosa</td>
<td>Plantar venous subcutaneous network</td>
</tr>
<tr>
<td>Red varicosa de la ingle, ver además neovascularización</td>
<td>Groin varicous network. See also neovascularization</td>
</tr>
<tr>
<td>Red varicosa del hueso poplíteo</td>
<td>Popliteal fossa varicous network</td>
</tr>
<tr>
<td>Red venosa dorsal del pie</td>
<td>Dorsal venous network of the foot</td>
</tr>
<tr>
<td>Reflejo vasoconstrictor postural, ver reflejo vеноarterial</td>
<td>Postural vasoconstriction reflex. See venoarterial reflex</td>
</tr>
<tr>
<td>Reflejo vеноarterial (reflejo vasoconstrictor postural)</td>
<td>Venoarterial reflex (postural vasoconstriction reflex)</td>
</tr>
<tr>
<td>Reflujo axial</td>
<td>Axial reflux</td>
</tr>
<tr>
<td>Reflujo de la vena ovárica o incompetencia de la vena ovárica</td>
<td>Ovarian vein reflux or ovarian vein incompetence</td>
</tr>
<tr>
<td>Reflujo de la vena pélvica</td>
<td>Pelvic vein reflux</td>
</tr>
<tr>
<td>Reflujo de la vena uretral</td>
<td>Ureteric vein reflux</td>
</tr>
<tr>
<td>Reflujo o incompetencia venosos superficiales</td>
<td>Superficial venous reflux or incompetence</td>
</tr>
<tr>
<td>Reflujo residual</td>
<td>Residual reflux</td>
</tr>
<tr>
<td>Reflujo safeno</td>
<td>Saphenous reflux</td>
</tr>
<tr>
<td>Reflujo segmentario</td>
<td>Segmental reflux</td>
</tr>
<tr>
<td>Reflujo valvular</td>
<td>Valvular reflux</td>
</tr>
<tr>
<td>Reflujo venoso</td>
<td>Venous reflux</td>
</tr>
<tr>
<td>Reflujo venoso profundo</td>
<td>Deep venous reflux</td>
</tr>
<tr>
<td>Reflujo venoso profundo y superficial asociado</td>
<td>Associated deep and superficial venous reflux</td>
</tr>
<tr>
<td>Remodelado de la pared de la vena</td>
<td>Vein wall remodeling</td>
</tr>
<tr>
<td>Reparación de la válvula de la trampilla TRIPATHI</td>
<td>TRIPATHI trap door valve repair</td>
</tr>
<tr>
<td>Reparación de la válvula, ver reconstrucción de la válvula</td>
<td>Valve repair. See valve reconstruction</td>
</tr>
<tr>
<td>Reparación quirúrgica de la incompetencia de la válvula venosa profunda</td>
<td>Surgical repair of deep venous valve incompetence</td>
</tr>
<tr>
<td>Resistencia venosa al flujo de salida</td>
<td>Venous outflow resistance</td>
</tr>
<tr>
<td>Resolución de trombos venosos</td>
<td>Venous thrombus resolution</td>
</tr>
<tr>
<td>Respuesta vеноarteriolar</td>
<td>Venoarteriolar response</td>
</tr>
<tr>
<td>Retirada del filtro</td>
<td>Filter retrieval</td>
</tr>
<tr>
<td>Reviparina (clivarine)</td>
<td>Reviparin (clivarine)</td>
</tr>
<tr>
<td>Rígidez del tobillo</td>
<td>Ankle stiffness</td>
</tr>
<tr>
<td>Rivaroxaban</td>
<td>Rivaroxaban</td>
</tr>
<tr>
<td>Salida de la bomba de pantorrilla</td>
<td>Calf pump output</td>
</tr>
<tr>
<td>Semillas de castaña o extracto de raíz de castaña</td>
<td>Horse chestnut seed or root extract</td>
</tr>
<tr>
<td>Seno de la válvula</td>
<td>Valve sinus</td>
</tr>
<tr>
<td>Sensación de calor o ardor</td>
<td>Heat or burning sensation</td>
</tr>
<tr>
<td>Sensación de hinchazón</td>
<td>Feeling of swelling</td>
</tr>
<tr>
<td>Separación safena</td>
<td>Saphenous stripping</td>
</tr>
<tr>
<td>Separación venosa</td>
<td>Venous stripping</td>
</tr>
<tr>
<td>Separador OESCH, ver ablación PIN</td>
<td>OESCH stripper. See PIN stripper</td>
</tr>
<tr>
<td>Separador Perforante Invaginado (PIN), ver separador PIN</td>
<td>Perforate Invaginate (PIN) stripping. See PIN stripping</td>
</tr>
<tr>
<td>Separador PIN</td>
<td>PIN stripping</td>
</tr>
<tr>
<td>SEPS, ver cirugía perforante endoscópica subfascial</td>
<td>SEPS. See subfascial endoscopic perforator surgery</td>
</tr>
<tr>
<td>Signo de alineación</td>
<td>Alignment sign</td>
</tr>
<tr>
<td>Signo de Mickey Mouse</td>
<td>Mickey Mouse sign</td>
</tr>
<tr>
<td>Signo HOMANS</td>
<td>HOMANS sign</td>
</tr>
<tr>
<td>Sin circulación venosa en las extremidades inferiores</td>
<td>Private venous circulation in the lower limb</td>
</tr>
<tr>
<td>Síndrome posttrombótico o enfermedad posttrombótica</td>
<td>Postthrombotic syndrome or postthrombotic disease</td>
</tr>
<tr>
<td>Síndrome antifosfolípido</td>
<td>Antiphospholipid syndrome</td>
</tr>
<tr>
<td>SP</td>
<td>EN</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Síndrome compartimental de la enfermedad venosa</td>
<td>Compartment syndrome in venous disease</td>
</tr>
<tr>
<td>Síndrome de ACHENBACH</td>
<td>ACHENBACH’s syndrome</td>
</tr>
<tr>
<td>Síndrome de BUDD-CHIARI</td>
<td>BUDD-CHIARI syndrome</td>
</tr>
<tr>
<td>Síndrome de cascanueces</td>
<td>Nutcracker syndrome</td>
</tr>
<tr>
<td>Síndrome de COCKETT, ver además síndrome MAY-THURNER</td>
<td>COCKETT syndrome. See also MAY-THURNER syndrome</td>
</tr>
<tr>
<td>Síndrome de congestión pélvica</td>
<td>Pelvic congestion syndrome</td>
</tr>
<tr>
<td>Síndrome de la clase turista, ver tromboembolia venosa relacionada con viajes en avión</td>
<td>Economy class syndrome / Long-haul flight. See air travel-related venous thromboembolism</td>
</tr>
<tr>
<td>Síndrome de la salida torácica</td>
<td>Thoracic outlet syndrome</td>
</tr>
<tr>
<td>Síndrome de la salida torácica venosa, ver además</td>
<td>Venous thoracic outlet syndrome</td>
</tr>
<tr>
<td>Síndrome PAGET-von SCHRÖTTER</td>
<td>PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Síndrome de la vena cava superior</td>
<td>Superior vena cava syndrome</td>
</tr>
<tr>
<td>Síndrome de obstrucción por esfuerzo</td>
<td>Strain obstruction syndrome</td>
</tr>
<tr>
<td>Síndrome GULLMO, ver síndrome de obstrucción por esfuerzo</td>
<td>GULLMO’s syndrome. See strain obstruction syndrome</td>
</tr>
<tr>
<td>Síndrome KASABACH-MERRIT</td>
<td>KASABACH-MERRIT syndrome</td>
</tr>
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<td>Síndrome KLIPPEL-TRENAUNAY</td>
<td>KLIPPEL-TRENAUNAY syndrome</td>
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<td>Síndrome MAFFUCCI</td>
<td>MAFFUCCI syndrome</td>
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<tr>
<td>Síndrome MAY-THURNER</td>
<td>MAY-THURNER syndrome</td>
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<tr>
<td>Síndrome PAGET-von SCHRÖTTER</td>
<td>PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Síndrome PARKES-WEBER</td>
<td>PARKES-WEBER syndrome</td>
</tr>
<tr>
<td>Síndrome SERVELLE-MARTORELL</td>
<td>SERVELLE-MARTORELL syndrome</td>
</tr>
<tr>
<td>Síndrome STURGE-WEBER</td>
<td>STURGE-WEBER syndrome</td>
</tr>
<tr>
<td>Síntomas de la pierna, ver síntomas venosos</td>
<td>Leg symptoms. See venous symptoms</td>
</tr>
<tr>
<td>Síntomas venosos</td>
<td>Venous symptoms</td>
</tr>
<tr>
<td>Sistema ácigos</td>
<td>Azigos system</td>
</tr>
<tr>
<td>Sistema de perfusión por catéter Lysus (EKOS)</td>
<td>Lysus infusion catheter system (EKOS)</td>
</tr>
<tr>
<td>Sistema de puntuación clínica, puntuación de gravedad clínica</td>
<td>Clinical scoring system, clinical severity score</td>
</tr>
<tr>
<td>Sistema de trombolisis asistido por ultrasonidos EKOS™</td>
<td>EKOS™ ultrasound-assisted thrombolysis system</td>
</tr>
<tr>
<td>Sistema doble de jeringa</td>
<td>Double syringe system</td>
</tr>
<tr>
<td>Sistema venoso</td>
<td>Venous system</td>
</tr>
<tr>
<td>Sistema venoso ALBANESE</td>
<td>ALBANESE venous system</td>
</tr>
<tr>
<td>Sistema venoso lateral, ver sistema venoso ALBANESE</td>
<td>Lateral venous system. See ALBANESE venous system</td>
</tr>
<tr>
<td>Sistemas de trombectomía rotacional Cleaner</td>
<td>Cleaner rotational thrombectomy systems</td>
</tr>
<tr>
<td>Sociedad Europea de Cirugía Vascular</td>
<td>European Society for Vascular Surgery</td>
</tr>
<tr>
<td>Sociedad Internacional para el estudio de anomalías vasculares (classificación de anomalías vasculares), ver además clasificación de Hamburgo</td>
<td>International Society for the Study of Vascular Anomalies (classification of vascular anomaly). See also Hamburg classification</td>
</tr>
<tr>
<td>Solución tumescente</td>
<td>Tumescent solution</td>
</tr>
<tr>
<td>Stockinette impregnado en pasta de zinc</td>
<td>Zinc paste impregnated stockinette</td>
</tr>
<tr>
<td>Suela de LEJARS</td>
<td>LEJARS’ sole</td>
</tr>
<tr>
<td>Sulfato de tetradecil sódico</td>
<td>Sodium tetradecyl sulfate</td>
</tr>
<tr>
<td>Técnica de bloqueo del aire</td>
<td>Air-block technique</td>
</tr>
<tr>
<td>Técnica de pulverización pulsada en trombólisis, ver además AngioJet™</td>
<td>Pulse-spray technique in thrombolysis. See also AngioJet™</td>
</tr>
<tr>
<td>Técnica endovenosa</td>
<td>Endovenous technique</td>
</tr>
<tr>
<td>Técnica TESSARI</td>
<td>TESSARI technique</td>
</tr>
<tr>
<td>Telangiectasia</td>
<td>Matting / Telangiectasia</td>
</tr>
<tr>
<td>Teoría ascendente para venas varicosas</td>
<td>Ascending theory for varicose veins</td>
</tr>
<tr>
<td>Teoría descendente en la patogénesis de las venas varicosas</td>
<td>Descending theory in the pathogenesis of varicose veins</td>
</tr>
<tr>
<td>Teoría parietal de la patogénesis de las venas varicosas</td>
<td>Parietal theory of varicose vein pathogenesis</td>
</tr>
</tbody>
</table>
TERMS IN OTHER LANGUAGES - SPANISH

SP
Terapia anticoagulante oral
Terapia de compresión
Terapia de compresión para úlceras venosas
Terapia fibrinolítica
Terapia larval (terapia de desbridamiento por larvas)
Terapia percutánea con láser para telangiectasias y venas varicosas
Termoterapia inducida por radiofrecuencia
Tiempo de cierre de la válvula
Tiempo de llenado venoso (VFT)
Tiempo de recarga
Tiempo de recarga venosa, ver además tiempo de recarga
Tinzaparin
Tomografía computarizada en la enfermedad venosa
Transferencia del segmento venoso, ver trasplante de válvula
Transferencia o trasplante de la vena axilar
Transposición de la vena de KISTNER
Transposición de la vena, ver transposición de la vena KISTNER
Trasplante de válvula
Trasplante del segmento venoso o transferencia del segmento venoso, ver trasplante de válvula
Trasposición de la vena safena femorofemoral
Trastornos tróficos, ver cambios en la piel venosa
Trastornos venosos
Trastornos venosos crónicos
Tratamiento (o terapia) con oxígeno hiperbárico de las úlceras venosas
Tratamiento con oxígeno hiperbárico en úlceras venosas
Tratamiento conservador en enfermedad venosa
Tratamiento endotérmico
Tratamiento endovenoso
Tratamiento endovenoso por láser, ver ablación láser endovenosa de las venas safenas
Tratamiento trombáltico venoso
Tríada de VIRCHOW
Trivex, ver flebectomía motorizada transiluminada
Trombectomía mecánica
Trombectomía mecánica percutánea
Trombectomía operativa híbrida
Trombectomía percutánea Arrow-TREROTOLA™
Trombectomía venosa
Trombectomía venosa quirúrgica
Trombo inducido por calor endovenoso, ver clasificación de KABNICK
Trombo venoso, ver además Trombosis venosa
Trombocitopenia inducida por heparina
Tromboembolia venosa
Tromboembolia venosa relacionada con viajes en avión
Trombofilia
Tromboflebitis

EN
- Oral anticoagulant therapy
- Compression therapy
- Compression therapy for venous ulcers
- Fibrinolytic therapy
- Maggot treatment (maggot debridement therapy)
- Percutaneous laser therapy for telangiectasia and varicose veins
- Radiofrequency-induced thermotherapy
- Valve closure time
- Venous filling time (VFT)
- Refilling time
- Venous refill time. See refilling time
- Tinzaparin
- Computed tomography in venous disease
- Venous segment transfer. See valve transplantation
- Axillary vein transfer or transplantation
- KISTNER’s vein transposition
- Vein transposition. See KISTNER’s vein transposition
- Valve transplantation
- Vein segment transplantation or vein segment transfer. See valve transplantation
- Femorofemoral saphenous vein transplantation
- Trophic changes. See venous skin changes
- Venous disorders
- Chronic venous disorders
- Hyperbaric oxygen treatment (or therapy) of venous ulcers
- Oxygen, hyperbaric treatment of venous ulcers
- Conservative treatment in venous disease
- Endothermal treatment
- Endovenous treatment
- Endovenous laser treatment. See endovenous laser ablation of saphenous veins
- Venous thrombolytic treatment
- VIRCHOW’s triad
- Trivex. See transilluminated powered phlebectomy
- Mechanical thrombectomy
- Percutaneous mechanical thrombectomy
- Hybrid operative thrombectomy
- Arrow-TREROTOLA™ percutaneous thrombectomy
- Venous thrombectomy
- Surgical venous thrombectomy
- Endovenous heat-induced thrombus. See KABNICK classification
- Venous thrombus. See also venous thrombosis
- Heparin-induced thrombocytopenia
- Venous thromboembolism
- Air travel-related venous thromboembolism
- Thrombophilia
- Thrombophlebitis
<table>
<thead>
<tr>
<th>SP</th>
<th>EN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tromboflebitis superficial, ver tromboflebitis venosa superficial</td>
<td>- Superficial thrombophlebitis. See superficial venous thrombophlebitis</td>
</tr>
<tr>
<td>Tromboflebitis venosa superficial, ver trombosis venosa superficial</td>
<td>- Superficial venous thrombophlebitis. See superficial vein thrombosis</td>
</tr>
<tr>
<td>Trombolisis dirigida por catéter</td>
<td>- Catheter-directed thrombolysis</td>
</tr>
<tr>
<td>Trombolisis farmacomecánica</td>
<td>- Pharmacomechanical thrombolysis</td>
</tr>
<tr>
<td>Trombolisis, ver tratamiento trombolítico venoso</td>
<td>- Thrombolysis. See Venous thrombolytic treatment</td>
</tr>
<tr>
<td>Tromboprofilaxis venosa</td>
<td>- Venous thromboprophylaxis</td>
</tr>
<tr>
<td>Trombos flotantes</td>
<td>- Free-floating thrombus</td>
</tr>
<tr>
<td>Trombosis concomitante superficial y venosa profunda</td>
<td>- Concomitant superficial and deep venous thrombosis</td>
</tr>
<tr>
<td>Trombosis de la vena cava inferior</td>
<td>- Inferior vena cava thrombosis</td>
</tr>
<tr>
<td>Trombosis de la vena de la pantorrilla, trombosis venosa profunda aislada en la pantorrilla</td>
<td>- Calf vein thrombosis, deep vein thrombosis isolated in the calf</td>
</tr>
<tr>
<td>Trombosis inducida por calor, ver trombo inducido por calor endovenoso</td>
<td>- Heat-induced thrombosis. See endovenous heat-induced thrombus</td>
</tr>
<tr>
<td>Trombosis por esfuerzo, ver síndrome de PAGET-von SCHRÖTTER</td>
<td>- Effort thrombosis. See PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Trombosis proximal</td>
<td>- Proximal thrombosis</td>
</tr>
<tr>
<td>Trombosis relacionada con anticonceptivos orales</td>
<td>- Oral contraceptive-related thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa</td>
<td>- Venous thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa axilo-subclavia, o Síndrome PAGET-von SCHRÖTTER</td>
<td>- Axillo-subclavian vein thrombosis also called PAGET-von SCHRÖTTER syndrome</td>
</tr>
<tr>
<td>Trombosis venosa mesentérica</td>
<td>- Mesenteric vein thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa profunda</td>
<td>- Deep venous thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa profunda aguda, ver trombosis venosa profunda</td>
<td>- Acute deep vein thrombosis. See deep vein thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa profunda de la extremidad superior</td>
<td>- Upper extremity deep vein thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa profunda femoropoplítea, ver además</td>
<td>- Femoropopliteal deep vein thrombosis. See also deep vein thrombosis</td>
</tr>
<tr>
<td>Trombosis venosa profunda iliofemoral</td>
<td>- Iliofemoral deep venous thrombosis</td>
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<td>Trombosis venosa profunda recurrente</td>
<td>- Recurrent deep venous thrombosis</td>
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<tr>
<td>Trombosis venosa superficial</td>
<td>- Superficial vein thrombosis</td>
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<td>Úlcera de la pierna, ver úlcera venosa de la pierna</td>
<td>- Leg ulcer. See venous leg ulcer</td>
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<td>Úlcera de MARJOLIN</td>
<td>- MARJOLIN’s ulcer</td>
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<td>Úlcera de MARTORELL</td>
<td>- MARTORELL’s ulcer</td>
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<tr>
<td>Úlcera mixta arterial y venosa</td>
<td>- Mixed arterial and venous ulcer</td>
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<td>Úlcera venosa activa, ver úlcera venosa de la pierna</td>
<td>- Active venous ulcer. See venous leg ulcer</td>
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<td>Úlcera venosa de la pierna</td>
<td>- Venous leg ulcer</td>
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<td>Ultrasonido</td>
<td>- Ultrasound</td>
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<td>Ultrasonido intravascular en flebología</td>
<td>- Intravascular ultrasound in phlebology</td>
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<td>Ultrasonidos doppler, ver ecografía dúplex</td>
<td>- Doppler ultrasound / Duplex sonography. See duplex ultrasonography</td>
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<td>Unión internacional de flebología</td>
<td>- International Union of Phlebology</td>
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<td>Unión safenopoplitea</td>
<td>- Saphenopopliteal junction</td>
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<td>Uroquinasa</td>
<td>- Urokinase</td>
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<tr>
<td>Válvula , ver válvula venosa</td>
<td>- Valve. See venous valve</td>
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<td>Válvula Agger, ver agger valvular</td>
<td>- Valve agger. See valvular agger</td>
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<tr>
<td>Válvula bicúspide venosa</td>
<td>- Venous bicuspid valve</td>
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<td>Válvula bioprostética venosa</td>
<td>- Venous bioprosthetic valve</td>
</tr>
<tr>
<td>Válvula cornua</td>
<td>- Valve cornua</td>
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<tr>
<td>Válvula de alotrasplante</td>
<td>- Allograft valve</td>
</tr>
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</table>
TERMS IN OTHER LANGUAGES - SPANISH

SP

Válvula de Portland o válvula PAVCNIK
Válvula de vena autóloga
Válvula de xenoinjerto
Válvula PAVCNIK
Válvula preterminal de la intersección safenofemoral
Válvula preterminal de la intersección safenopoplítea
Válvula refluxiva, ver incompetencia valvular
Válvula terminal de la intersección safenofemoral
Válvula terminal de la intersección safenopoplítea
Válvula terminal, ver válvula terminal de la intersección safenofemoral y válvula terminal de la intersección safenopoplítea
Válvula venosa
Válvula venosa artificial
Válvula venosa protésica
Válvulas venosas criocconservadas
Valvuloplastia
Valvuloplastia con manguito protésico
Valvuloplastia de KISTNER
Valvuloplastia de Raju
Valvuloplastia de SOTTIURAI
Valvuloplastia externa/extraluminal
Valvuloplastia interna
Valvuloplastia transcomisural
Valvuloplastia transmural
Varice recurrente o vena varicosa recurrente
Varice, vena varicosa, varicosidad
Varices del ligamento redondo
Varices pélvicas
Varices perineales
Varices recurrentes después de la cirugía (REVAS)
Varices subdérmicas, ver telangiectasia
Varicocele
Varicografía
Varicosis pélvica, ver varices pélvicas
Varicosis, ver varice, vena varicosa, varicosidad
Vasculopatía livedoide (atrofia blanca)
Velocidad máxima de reflujo
Vena
Vena antebrachial media
Vena axilar
Vena basilica
Vena basilica accesoria
Vena basilica medial
Vena braquial lateral
Vena braquiocefálica
Vena cava
Vena cava inferior
Vena cava superior
Vena cefálica

EN

Portland valve or PAVCNIK valve
Autologous vein valve
Xenograft valve
PAVCNIK valve
Saphenofemoral junction preterminal valve
Saphenopopliteal junction preterminal valve
Refluxive valve. See valvular incompetence
Saphenofemoral junction terminal valve
Saphenopopliteal junction terminal valve
Terminal valve. See saphenofemoral junction terminal valve and saphenopopliteal junction terminal valve
Venous valve
Artificial venous valve
Prosthetic venous valve
Cryopreserved venous valves
Valvuloplasty
Prosthetic sleeve valvuloplasty
KISTNER’s valvuloplasty
Raju’s valvuloplasty
SOTTIURAI’s valvuloplasty
External/Extraluminal valvuloplasty
Internal valvuloplasty
Transcommissural valvuloplasty
Transmural valvuloplasty
Recurrent varice or recurrent varicose vein
Varices, varicose vein, varicosity
Round ligament varices
Pelvic varices
Perineal varicosities
Recurrent varices after surgery (REVAS)
Subdermal varices. See telangiectasia
Varicocele
Varicography
Pelvic varicosity. See pelvic varices
Varicosity. See varice, varicose vein, varicosity
Atrophie blanche (white atrophy)
Peak reflux velocity
Vein
Median antebrachial vein
Axillary vein
Axillary vein
Basilic vein
Accessory basilic vein
Medial basilic vein
Lateral brachial vein
Brachiocephalic vein
Vena cava / Caval vein
Inferior vena cava
Superior vena cava
Cephalic vein
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<td>Vena cefálica accesoria</td>
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<td>Vena cefálica media</td>
<td>Median cephalic vein</td>
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<tr>
<td>Vena cefálica medial</td>
<td>Medial cephalic vein</td>
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<td>Vena ciática</td>
<td>Sciatic vein</td>
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<td>Vena circunfleja anterior del muslo</td>
<td>Anterior thigh circumflex vein</td>
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<tr>
<td>Vena circunfleja posterior del muslo</td>
<td>Posterior thigh circumflex vein</td>
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<td>Vena colateral</td>
<td>Collateral vein</td>
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<td>Vena cubital media</td>
<td>Median cubital vein</td>
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<td>Vena de araña, ver telangiectasia</td>
<td>Spider vein. See telangiectasia</td>
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<td>Vena de GIACOMINI</td>
<td>GIACOMINI vein</td>
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<tr>
<td>Vena de GIANTURCO</td>
<td>GIANTURCO stent</td>
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<tr>
<td>Vena del bulbo del pene (varón)</td>
<td>Vein of the bulb of the penis (male)</td>
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<tr>
<td>Vena del bulbo del vestíbulo (hembra)</td>
<td>Vein of the bulb of the vestibule (female)</td>
</tr>
<tr>
<td>Vena digital dorsal de la mano</td>
<td>Dorsal digital vein of the hand</td>
</tr>
<tr>
<td>Vena dorsal metatarsal</td>
<td>Metatarsal dorsal vein</td>
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<tr>
<td>Vena dorsal perforadora (perforante) del pie</td>
<td>Dorsal foot perforator (perforating) vein</td>
</tr>
<tr>
<td>Vena dorsal superficial del clítoris o del pene</td>
<td>Superficial dorsal vein of the clitoris or penis</td>
</tr>
<tr>
<td>Vena epigástrica inferior</td>
<td>Inferior epigastric vein</td>
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<tr>
<td>Vena epigástrica superficial</td>
<td>Superficial epigastric vein</td>
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<tr>
<td>Vena escrotal posterior (varón)</td>
<td>Posterior scrotal veins (male)</td>
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<tr>
<td>Vena femoral</td>
<td>Femoral vein</td>
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<tr>
<td>Vena femoral circunfleja lateral</td>
<td>Lateral circumflex femoral vein</td>
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<td>Vena femoral circunfleja medial</td>
<td>Medial circumflex femoral vein</td>
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<td>Vena femoral común</td>
<td>Common femoral vein</td>
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<tr>
<td>Vena femoral profunda</td>
<td>Profunda femoral vein</td>
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<td>Vena gastronemia lateral</td>
<td>Lateral gastrocnemius vein</td>
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<tr>
<td>Vena gastronemia medial</td>
<td>Medial gastrocnemius vein</td>
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<td>Vena iliaca circunfleja profunda</td>
<td>Deep circumflex iliac vein</td>
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<tr>
<td>Vena iliaca circunfleja superficial</td>
<td>Superficial circumflex iliac vein</td>
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<tr>
<td>Vena iliaca común</td>
<td>Common iliac vein</td>
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<tr>
<td>Vena iliaca externa</td>
<td>External iliac vein</td>
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<tr>
<td>Vena iliaca interna (hipogástrica)</td>
<td>Internal iliac vein (hypogastric)</td>
</tr>
<tr>
<td>Vena ilíolumbar</td>
<td>Iliolumbar vein</td>
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<tr>
<td>Vena incompetente</td>
<td>Incompetent vein</td>
</tr>
<tr>
<td>Vena intergemelar o vena intergastrocnemia</td>
<td>Intergemellar vein or intergastrocnemial vein</td>
</tr>
<tr>
<td>Vena interósea anterior</td>
<td>Anterior interosseous veins</td>
</tr>
<tr>
<td>Vena labial anterior</td>
<td>Anterior labial veins</td>
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<td>Vena marginal lateral del pie</td>
<td>Lateral marginal vein of the foot</td>
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<tr>
<td>Vena marginal medial del pie</td>
<td>Medial marginal vein of the foot</td>
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<tr>
<td>Vena media del antebrazo</td>
<td>Median vein of the forearm</td>
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<tr>
<td>Vena media del codo</td>
<td>Median vein of the elbow</td>
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<tr>
<td>Vena mesentérica inferior</td>
<td>Inferior mesenteric vein</td>
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<td>Vena mesentérica superior</td>
<td>Superior mesenteric vein</td>
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<tr>
<td>Vena no safena</td>
<td>Nonsaphenous vein</td>
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<tr>
<td>Vena ovárica</td>
<td>Óvarian vein</td>
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<tr>
<td>Vena pedal</td>
<td>Pedal vein</td>
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<td>Vena perforante</td>
<td>Perforator vein</td>
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<tr>
<td>Vena perforante gastrocnemia lateral</td>
<td>Lateral gastrocnemius perforator vein</td>
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<tr>
<td>Vena perforante gastrocnemia lateral posterior de la pierna</td>
<td>Posterior leg lateral gastrocnemius perforator vein</td>
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<tr>
<td>Vena perforante gastrocnemia media posterior de la pierna</td>
<td>Posterior leg medial gastrocnemius perforator vein</td>
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SP

Vena perforante glútea superior  
Vena perforante incompetente  
Vena perforante indirecta  
Vena perforante infrarrotuliana  
Vena perforante lateral de la pierna  
Vena perforante lateral de la rodilla  
Vena perforante lateral del muslo  
Vena perforante media del glúteo  
Vena perforante media del tobillo, ver venas perforantes tibiales posteriores  
Vena perforante suprapatellar  
Vena perforante tibial posterior medial de la pierna (anteriormente perforante COCKETT)  
Vena plantar medial  
Vena plantar metatarsal  
Vena poplítea  
Vena poplítea del hueso poplíteo o perforador del hueso poplíteo  
Vena pudenda común  
Vena pudenda externa superficial  
Vena pudenda interna  
Vena radial  
Vena rectal superior  
Vena renal  
Vena reticular  
Vena sacra media  
Vena safena accesoria anterior  
Vena safena accesoria posterior  
Vena safena mayor  
Vena safena menor, ver además Extención craneal de la vena safena menor  
Vena subclavia  
Vena superficial  
Vena tuberculada  
Vena varicosa posttrombótica  
Vena varicosa pudenda  
Vena yugular interna  
Vena(s) intersafenosa(s)  
Venas ácigos  
Venas braquiales  
Venas colaterales público transversales  
Venas comunicantes  
Venas cubitales  
Venas del bulbo uretral (varón)  
Venas digitales profundas (plantares y dorsales)  
Venas digitales superficiales (dorsales y plantares) de la extremidad inferior  
Venas digitales superficiales (dorsales y plantares) de la extremidad superior  
Venas dorsales profundas del clítoris (hembra)  
Venas dorsales profundas del pene (varón)

EN

Superior gluteal perforator vein  
Incompetent calf perforator  
Indirect perforating vein  
Infrapatellar perforator vein  
Lateral leg perforator vein  
Lateral knee perforator vein  
Lateral thigh perforator vein  
Midgluteal perforator vein  
Medial ankle perforator vein. See posterior tibial perforator veins  
Suprapatellar perforator vein  
Medial leg posterior tibial perforator vein (formerly COCKETT perforator vein)  
Medial plantar veins  
Metatarsal plantar vein  
Popliteal vein  
Popliteal fossa perforating vein or popliteal fossa perforator  
External pudendal vein  
Superficial external pudendal vein  
Internal pudendal vein  
Radial vein  
Superior rectal vein  
Renal vein  
Reticular vein  
Median sacral vein  
Anterior accessory saphenous vein  
Posterior accessory saphenous vein  
Great saphenous vein  
Small saphenous vein. See also cranial extension of the small saphenous vein  
Subclavian vein  
Superficial vein  
Trabeculated vein  
Postthrombotic varicose vein  
Pudendal varicose veins  
Internal jugular vein  
Intersaphenous vein(s)  
Azygos veins  
Brachial veins  
Cross-pubic collateral veins  
Communicating veins  
Ulnar veins  
Urethral bulb veins (male)  
Deep digital veins (plantar and dorsal)  
Superficial digital veins (dorsal and plantar) of the lower limb  
Superficial digital veins (dorsal and plantar) of the upper limb  
Deep dorsal vein of clitoris (female)  
Deep dorsal vein of penis (male)
<table>
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<tr>
<td>Venas escrotales anteriores</td>
<td>Anterior scrotal veins</td>
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<td>Venas femorales profundas</td>
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<td>Venas fibulares o peroneas</td>
<td>Fibular or peroneal veins</td>
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<td>Inferior gluteal veins</td>
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<td>Venas glúteas superiores</td>
<td>Superior gluteal veins</td>
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<td>Posterior labial veins (female)</td>
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<td>Lumbar veins</td>
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<td>Dorsal metacarpal veins</td>
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<td>Deep metatarsal veins (plantar and dorsal)</td>
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<td>Venas metatarsales superficiales (dorsal y plantar)</td>
<td>Superficial metatarsal veins (dorsal and plantar)</td>
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<td>Muscular veins</td>
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<td>Anterior leg perforator veins</td>
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<td>Venas perforantes anteriores del muslo</td>
<td>Anterior thigh perforator veins</td>
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<td>Venas perforantes directas</td>
<td>Direct perforating veins</td>
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<td>Venas perforantes inguinales mediales del muslo</td>
<td>Medial thigh inguinal perforator vein</td>
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<td>Venas perforantes laterales del pie</td>
<td>Lateral foot perforator veins</td>
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<td>Venas perforantes laterales del tobillo</td>
<td>Lateral ankle perforator veins</td>
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<td>Venas perforantes medias de la pierna</td>
<td>Medial leg perforator veins</td>
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<td>Venas perforantes mediales del muslo del canal femoral</td>
<td>Medial thigh perforator vein of the femoral canal</td>
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<td>Venas perforantes mediales del pie</td>
<td>Medial foot perforator veins</td>
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<td>Venas perforantes mediales gastrocnemias</td>
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<td>Venas perforantes pudendas</td>
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<td>Venas perforantes tibiales posteriores</td>
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<td>Venas perineales superficiales</td>
<td>Superficial perineal veins</td>
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<td>Venas profundas</td>
<td>Deep vein</td>
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<td>Venas profundas del clitoris o venas dorsales profundas del clítoris (hembra)</td>
<td>Deep veins of the clitoris or deep dorsal veins of the clitoris (female)</td>
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<td>Venas profundas del pene (varón)</td>
<td>Deep veins of the penis (male)</td>
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<td>Venas púbicas</td>
<td>Pubic vein</td>
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<td>Middle rectal veins</td>
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<td>Venas sacras laterales</td>
<td>Lateral sacral veins</td>
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<td>Venas safenas</td>
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<td>Venas suprapúbicas</td>
<td>Suprapubic veins</td>
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<td>Venas suprarrenales o adrenales</td>
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<td>Venas testiculares</td>
<td>Testicular veins</td>
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<td>Venas tibiales anteriores</td>
<td>Anterior tibial veins</td>
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<td>Venas tibiales posteriores</td>
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<td>Uterine veins (female)</td>
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<td>Vaginal veins (female)</td>
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<td>Venas varicosas residuales o varices residuales</td>
<td>Residual varicose vein or residual varice</td>
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<td>Venas varicosas sintomáticas</td>
<td>Symptomatic varicose veins</td>
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<td>Venda adhesiva</td>
<td>Adhesive bandage</td>
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<td>Venda de poca elasticidad, ver venda rígida</td>
<td>Short-stretch bandage. See inelastic bandage</td>
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<td>Venda externa de la vena poplítea</td>
<td>Popliteal vein external banding</td>
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<td>Venda poco flexible</td>
<td>Inelastic bandage</td>
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SP

Venda, ver además vendas de compresión
Venda/manguito venoso externo
Vendas de compresión
Vendas elásticas de compresión
Vendas elásticas multicapas
Venectasia, ver flebectasia o varice, vena varicosa, varicosidad
Venoconstricción
Venografía basada en gadolinio
Venografía de tomografía computerizada o tomografía computarizada espiral para embolia pulmonar
Venografía por resonancia magnética
Venografía por resonancia magnética optenciada con contraste
Venografía, ver además flebografía/venografía ascendente y flebografía/venografía descendente

EN

Bandage. See also compression bandages
External venous banding/cuff
Compression bandages
Elastic compression bandages
Multilayered compression bandages
Venectasia. See also phlebectasia or varice, varicose vein, varicosity
Venoconstriction
Gadolinium-based venography
Computed tomography venography or spiral computed tomography venography
Magnetic resonance venography
Contrast-enhanced magnetic resonance venography
Venography. See also ascending phlebography, venography and descending phlebography/venography
Venoplasty
Venepuncture or venipuncture
Venesuture
Venotomy (phlebotomy, venesection)
Thread vein. See telangiectasia
Ejection volume
Working venous volume
Foot volumetry
Wallstent™
Warfarin
Ximelagatran
X-vein
Gaiter zone
Z-stent™
Figure 1 • Great saphenous vein above the knee

\[ a=\text{superficial circumflex iliac vein}; \ b=\text{superficial epigastric vein}; \ c=\text{external pudendal vein}; \ d=\text{posterior accessory saphenous vein}; \ e=\text{anterior accessory saphenous vein}; \ f=\text{great saphenous vein}; \ g=\text{common femoral vein} \]

Figure 2 • Great saphenous vein below the knee

\[ a=\text{great saphenous vein}; \ b=\text{posterior venous arch}; \ c=\text{anterolateral vein of the leg}; \ d=\text{venous dorsal arch} \]

Figure 3 • Small saphenous vein termination

\[ a=\text{popliteal vein}; \ b=\text{small saphenous vein}; \ c=\text{communicating vein of the calf} \]

Figure 4 • Lower limb deep veins

\[ a=\text{common femoral vein}; \ b=\text{femoral vein}; \ c=\text{deep femoral vein}; \ d=\text{popliteal vein}; \ e=\text{anterior tibial veins}; \ f=\text{fibular veins}; \ g=\text{posterior tibial veins} \]
Figure 5 - Pelvic veins

a=internal iliac veins; b=common femoral vein; c=external iliac vein; d=common iliac vein; e=inferior vena cava; f=iliolumbar vein

Figure 6 - Upper limb superficial veins

a=cephalic vein; b=basilic vein; c=median cubital vein; d=median antebrachial vein; e=brachial vein; f=axillary vein

Figure 7 - Upper limb deep veins

a=internal jugular vein; b=brachiophalic vein; c=subclavian vein; d=brachial vein; e=uolar vein; f=interosseous vein; g=radial vein; h=deep palmar venous arch; i=superficial palmar venous arch

Figure 8 - Bicuspid venous valve

a=free border cusps; b=valvular commissures; c=valvular agger; d=valve cornua; e=valve cusps; f=valve sinus
**Figure 9** • Duplex scan of the great saphenous vein: the Egyptian eye

Duplex scan of the great saphenous vein at the proximal thigh in a transversal cut. The upper eyelid is the hyperechoic linear saphenous fascia, the hyperechoic lower eyelid arises from the muscle fascia, and the iris represents the great saphenous vein.

*a* = great saphenous vein; *b* = deep fascia; *c* = saphenous fascia

**Figure 9b** • Duplex scan of the great saphenous vein: the Egyptian eye

Duplex scan of the great saphenous vein at the mid thigh in a transversal cut. The Egyptian eye describes the ultrasound appearance of the great saphenous vein in the saphenous compartment. The vein is enclosed in a division of the superficial fascia.

*a* = great saphenous vein; *b* = saphenous fascia

**Figure 10** • Duplex scan of the saphenopopliteal junction

Duplex scan of the saphenopopliteal junction in a longitudinal cut showing reflux in the small saphenous vein after a Valsalva maneuver.

*a* = popliteal vein; *b* = small saphenous vein

**Figure 11** • Duplex scan of an occlusive thrombosis of the femoral vein

Duplex scan showing an occlusive thrombosis of the femoral vein, which is hyperechogenic and noncompressible.

*a* = femoral artery; *b* = femoral vein
**Figure 12** Descending venography with Valsalva maneuver: axial reflux due to primary incompetence

**Figure 13** Descending venography with Valsalva maneuver: axial reflux due to a postthrombotic lesion

**Figure 14** Ascending venography with iliac vein obstruction related to postthrombotic lesion

**Figure 15** Ascending venography. Same patient as Figure 14 after balloon expanded stenting
Figure 16 • Deep vein. Incompetent bicuspid valve with symmetrical cusps

Figure 17 • Deep vein. Incompetent bicuspid valve with asymmetrical cusps

Figure 18 • Postthrombotic aspect of the lumen of a deep vein
**Figure 19** - Intravascular ultrasound catheter in the iliac vein of a patient showing complete obstruction of the iliac vein

**Figure 20** - Intravascular ultrasound study in the same patient as in Figure 19 after angioplasty and stenting

**Figure 21** - Different types of venous aneurysms according to the Maleti classification

- **A** = fusiform
- **B** = sacciform
- **CI, CII, CIII, and CIV** = different shapes of eccentric aneurysms.

REFERENCES

**REVAS:**

**Nomenclature of the veins:**

**CEAP classification:**

**Duplex ultrasound investigation of the veins**

**VEIN-TERM**

**SYM Vein**