




■ Liječenje kronične venske insuficijencije u jednodnevnoj kirurgiji Chronic venous insufficiency treatment in one-day surgery

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Uvod: Kronična venska insuficijencija predstavlja veliki javnozdravstveni problem uz prevalenciju 5-30%.¹ Značajan broj zahvata u vaskularnoj kirurgiji predstavljaju operacije varikoziteta koje se sve više izvode u okviru jednodnevne kirurgije uslijed razvoja kirurških, endovenoskih i anestezioloških postupaka.

Metode i rezultati: Predstavljamo protokol, bitne značajke doplerske dijagnostike vena za planiranje samog operacijskog zahvata i rezultate retrospektivne analize 482 bolesnika operiranih od travnja 2014. do listopada 2018. u Specijalističkom zavodu za jednodnevnu kirurgiju Kliničkog bolničkog centra Zagreb. Svi su bolesnici bili operirani u lokalnoj ili lokalno potenciranoj anesteziji. Uz klasičnu kiruršku metodu od travnja 2018. godine izvodi se i endovenska laserska ablacija. Pridržavanje protokola jednodnevne kirurgije, selekcija bolesnika i detaljne postoperativne upute pridonose sigurnosti operiranih bolesnika u okviru jednodnevne kirurgije što pridonosi malom broju postoperativnih komplikacija. Zbog kraćeg vremena čekanja, fiksnog termina operacije i odlaska kući isti dan veće je i zadovoljstvo bolesnika.

Zaključak: Operacije varikoziteta u okviru jednodnevne kirurgije predstavljaju pouzdanu i sigurnu metodu s malim brojem komplikacija, pridonose financijskoj uštedi i oslobađaju termine u višednevnoj kirurgiji za bolesnike s arterijskim bolestima.

Introduction: Chronic venous insufficiency represents a major public health problem with a prevalence of 5-30%.¹ Significant number of interventions in vascular surgery are varicose vein operations that are increasingly being performed in one-day surgery due to the development of surgical and anaesthetic procedures.

Methods and results: We present protocol, essential features of Doppler diagnostic for planning the operations and results of a retrospective analysis of 482 patients operated from April 2014 to October 2018 at the One-Day Surgery Department of University Hospital Centre Zagreb. All patients were operated in local or locally potentiated anaesthesia. In addition to the classic surgical method since April 2018, we also perform endovascular laser ablation. Abiding the protocols of one day surgery, patient selection and detailed postoperative instructions contribute to the safety of operated patients within one-day surgery, this results in a small number of postoperative complications and minimum number of admissions to the hospital. Shorter waiting times, fixed date of operation and going home the same day increases patient's satisfaction.

Conclusion: Varicose vein operations within one-day surgery are a reliable and safe method with a small number of complications, thus freeing the space in hospital for patients with arterial diseases.

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LITERATURE

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