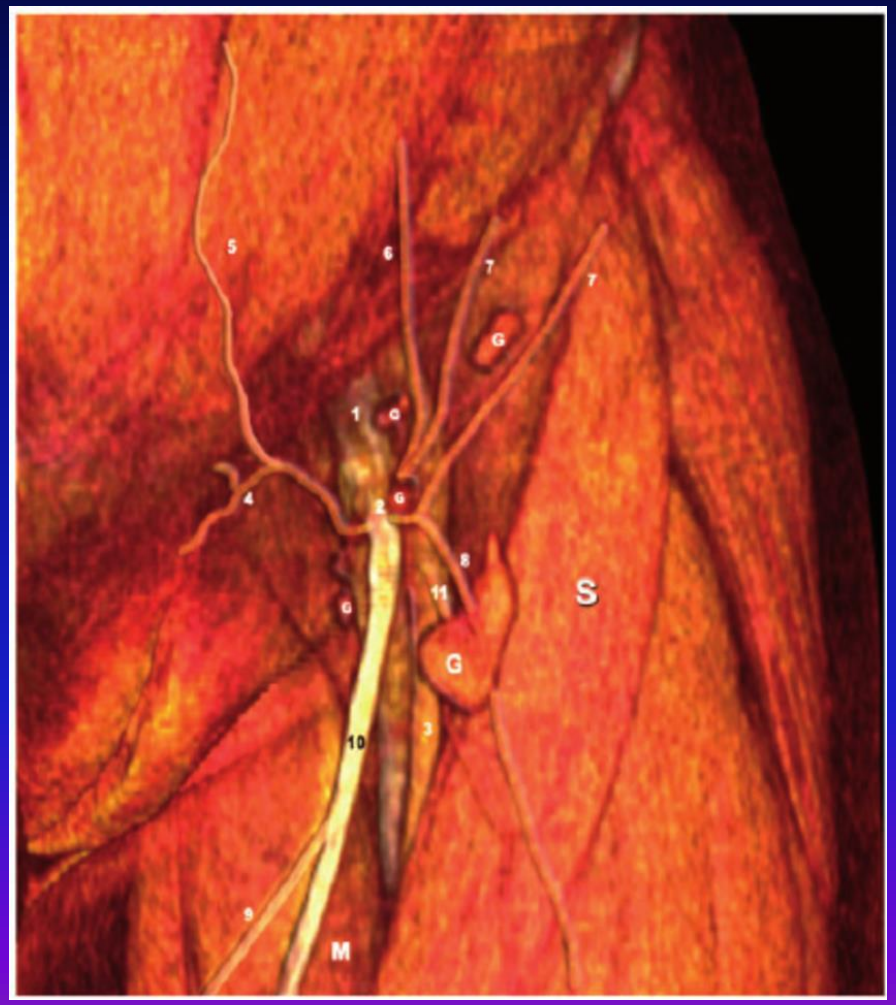
Anatomia normale e varianti della SFJ e della SPJ:

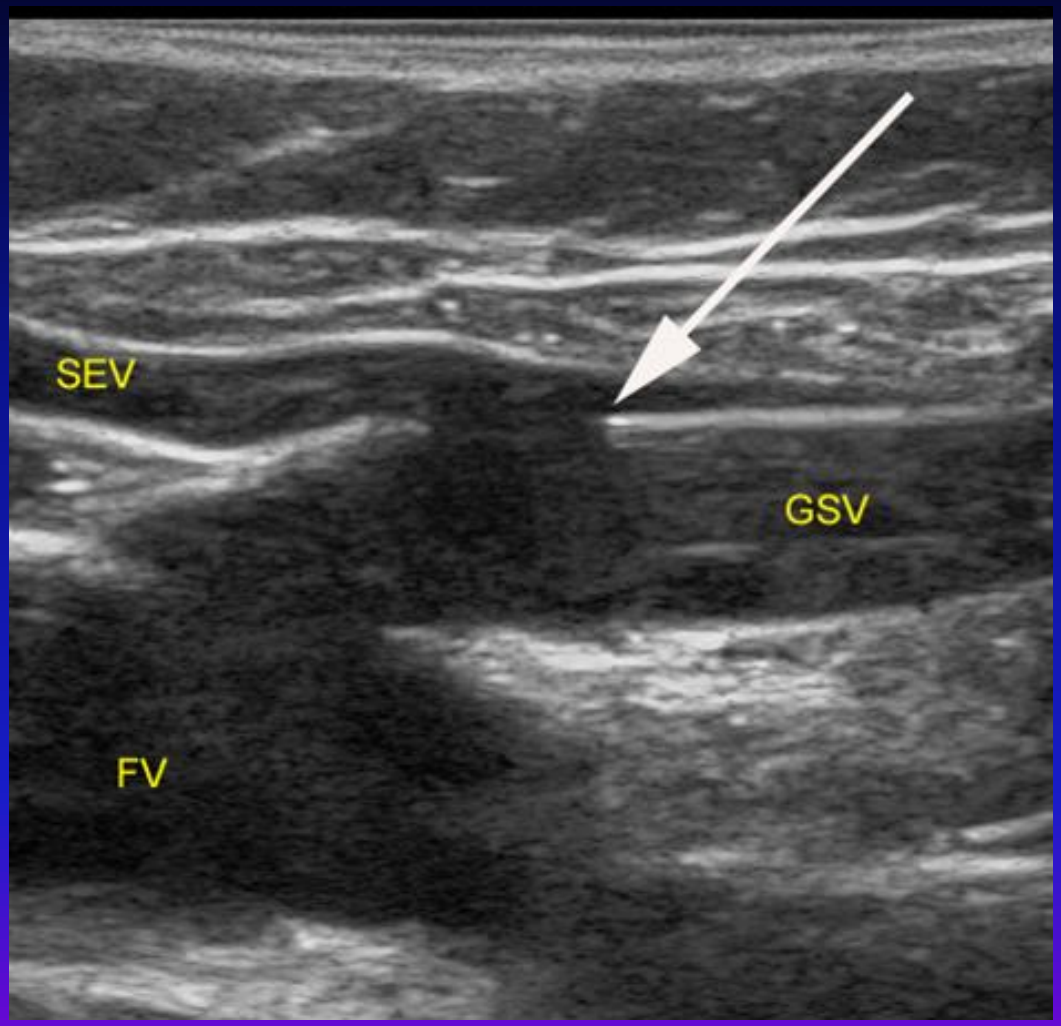
ricadute pratiche cliniche

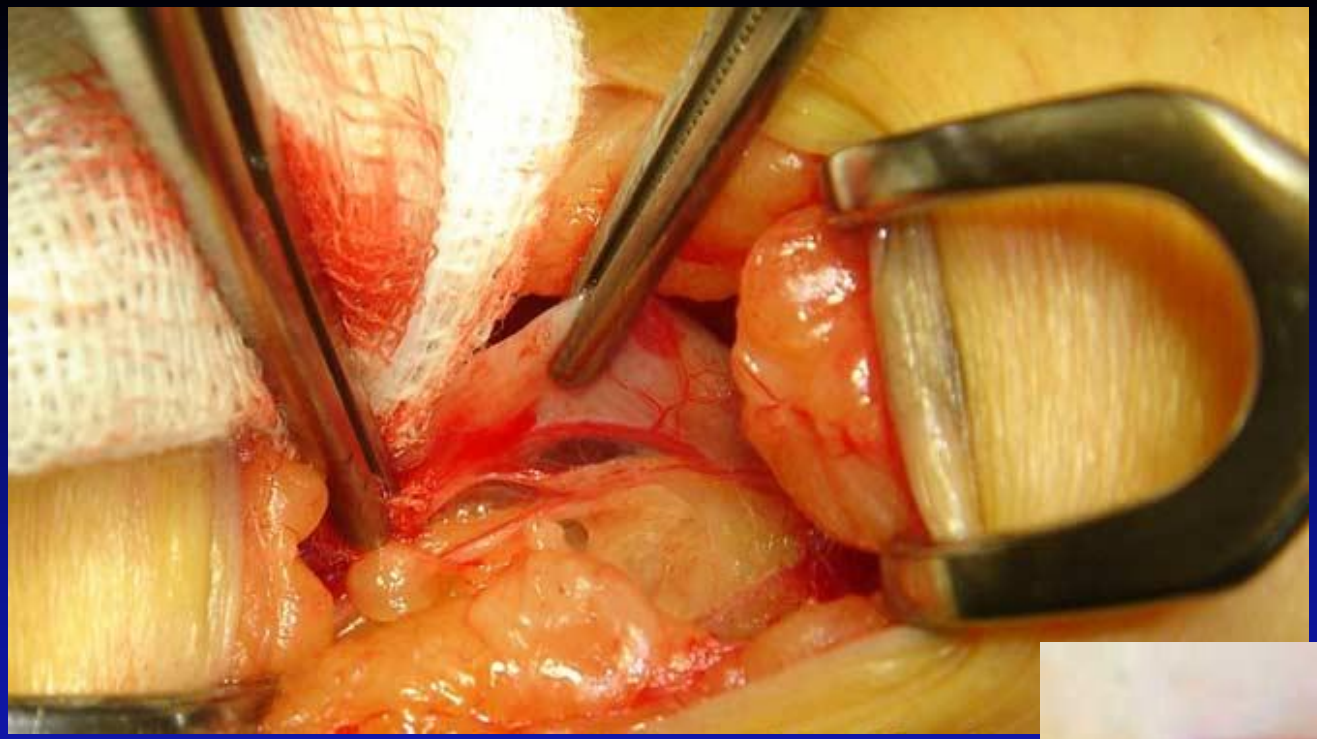


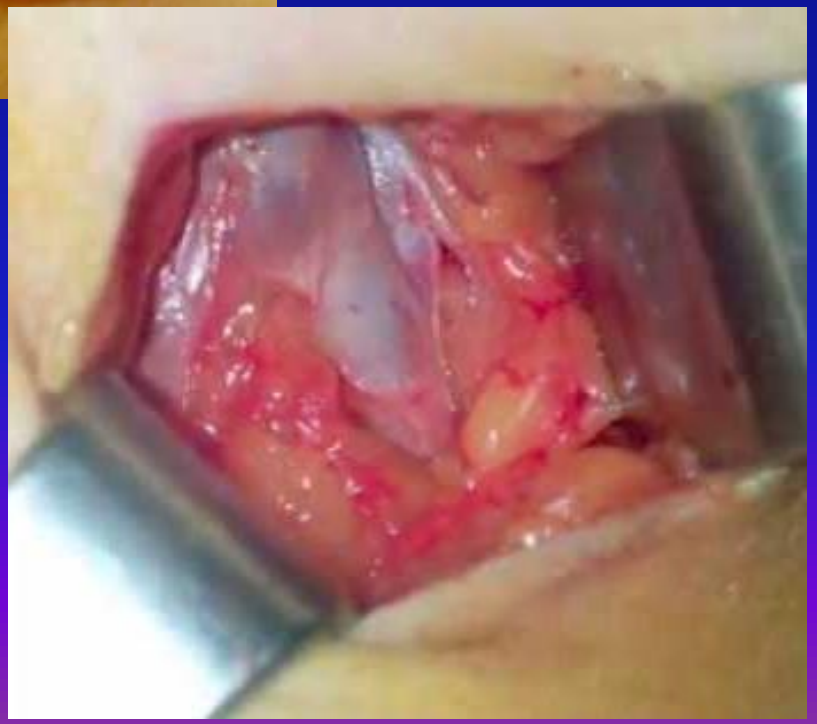
alberto.caggiati@uniroma1.it


ΠΑΝΤΟΚΡΑΤΩΡ

Grazie al LASER



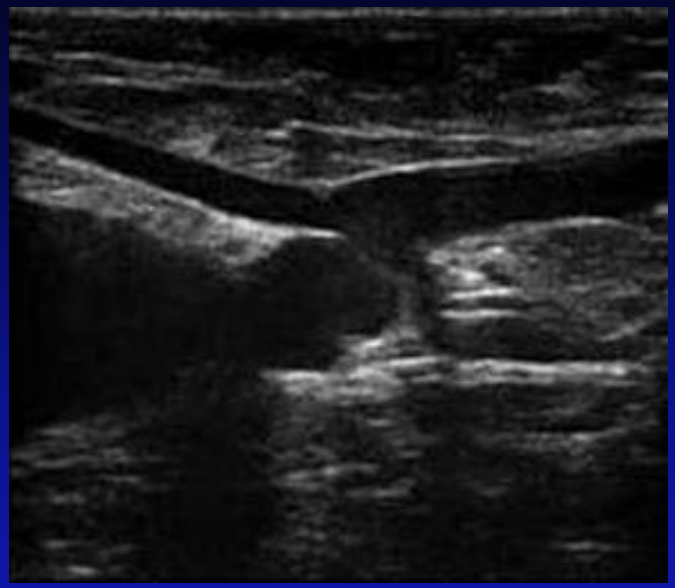




Non più crossectomie

Non più crossectomie. Ma se serve la crossectomia..

Grazie all'ECOGRAFIA..



Grazie all'ECOGRAFIA..è possibile studiare l'anatomia della SFJ in ogni singolo caso. Rendendo superfluo ricorrere alle splendide tavole anatomo-chirurgiche di qualche decennio fa..

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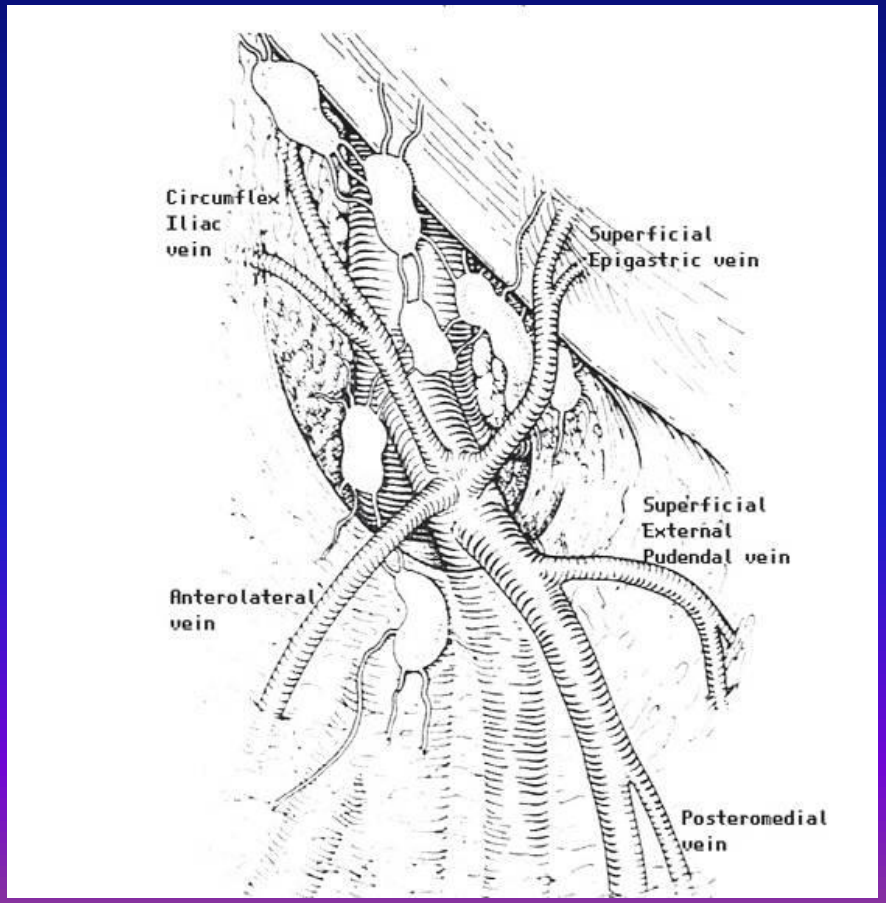
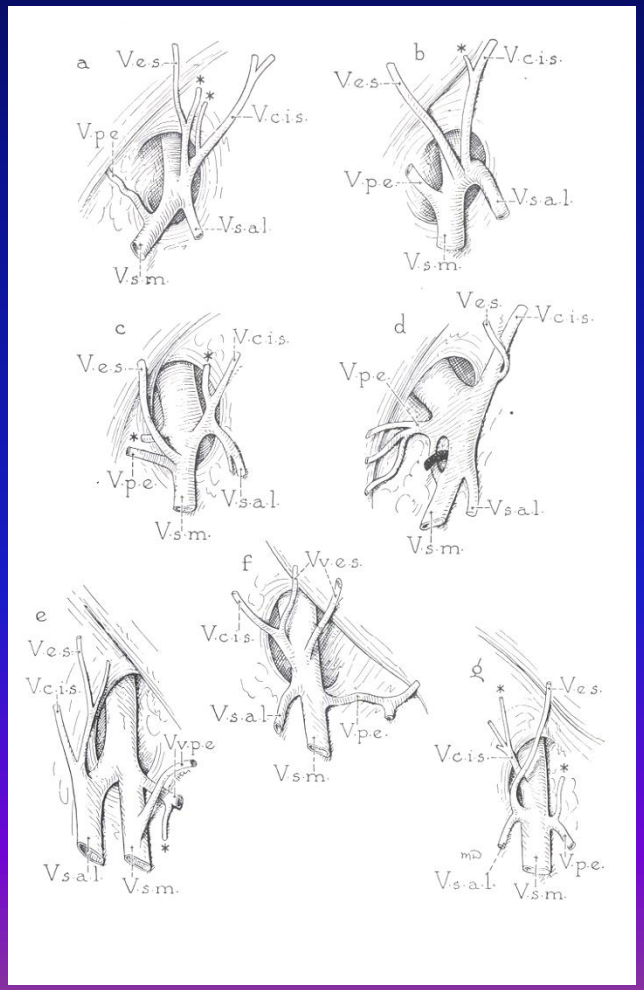
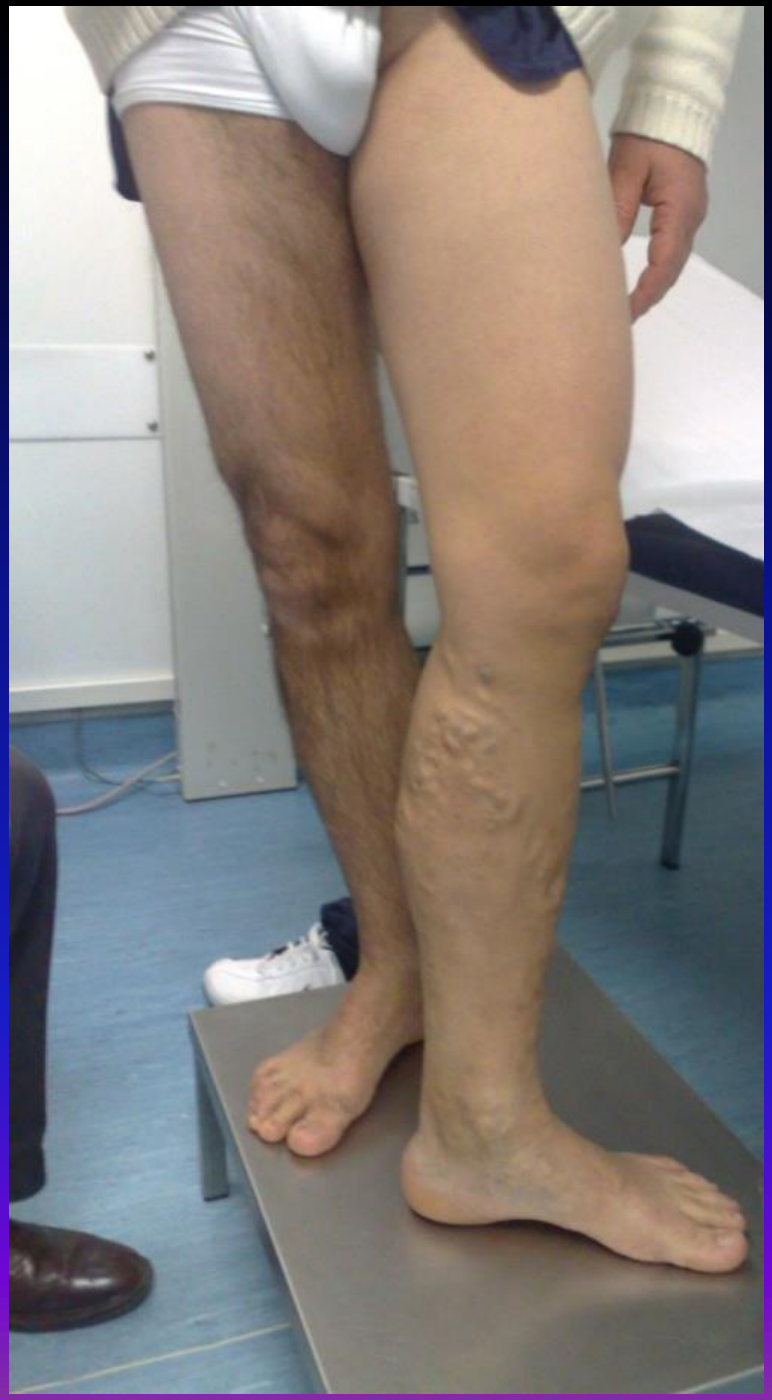


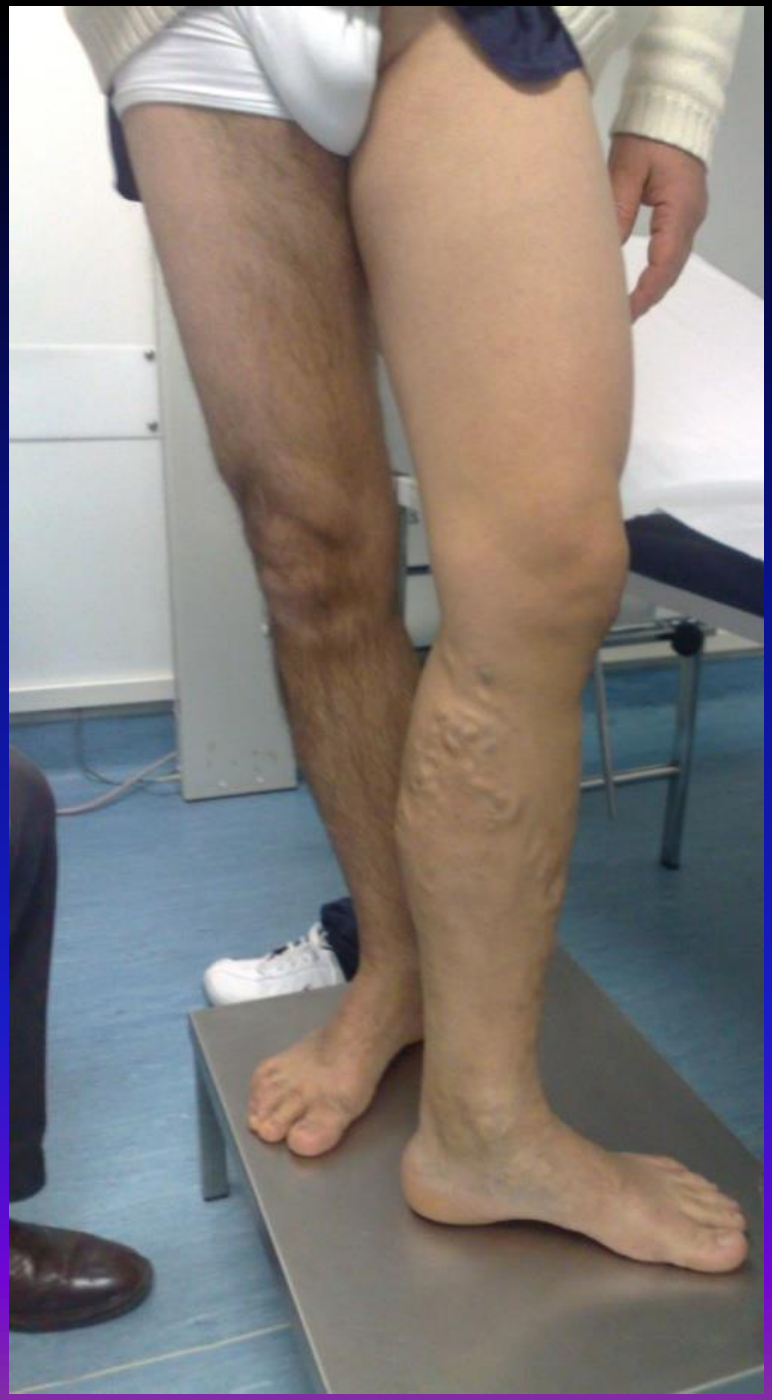


Cosa ci può dire in più la ecografia

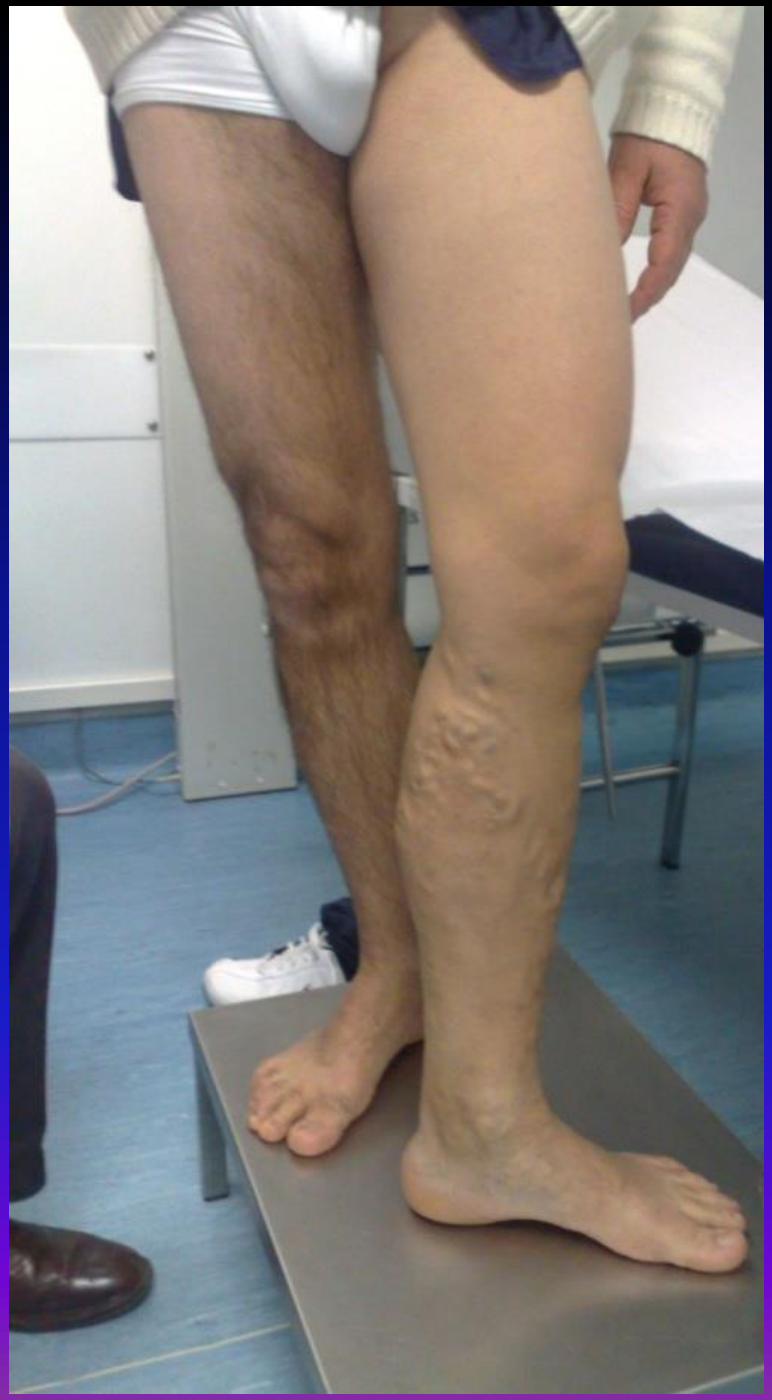
Cosa ci può dire in più la ecografia negli arti varicosi C2?



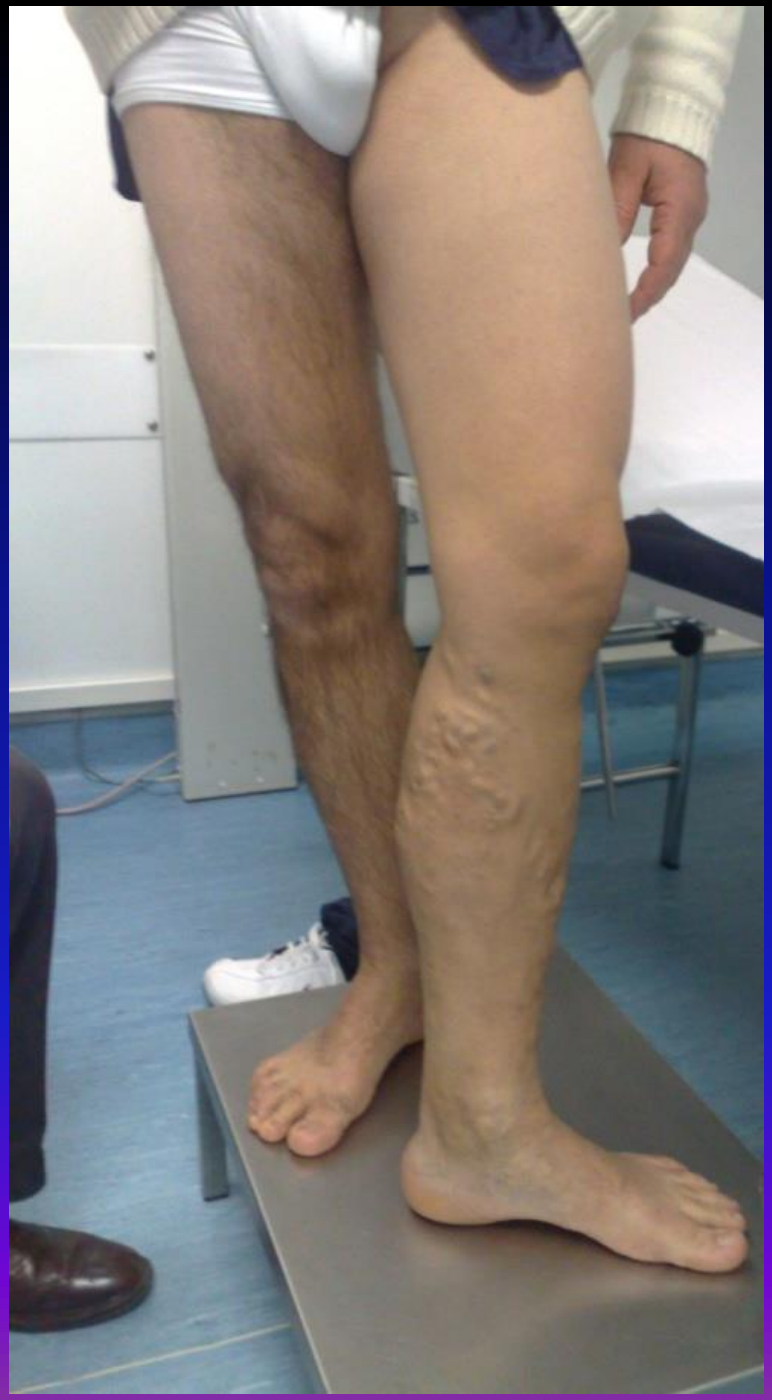
Classificazione CEAP: “C” grade 2



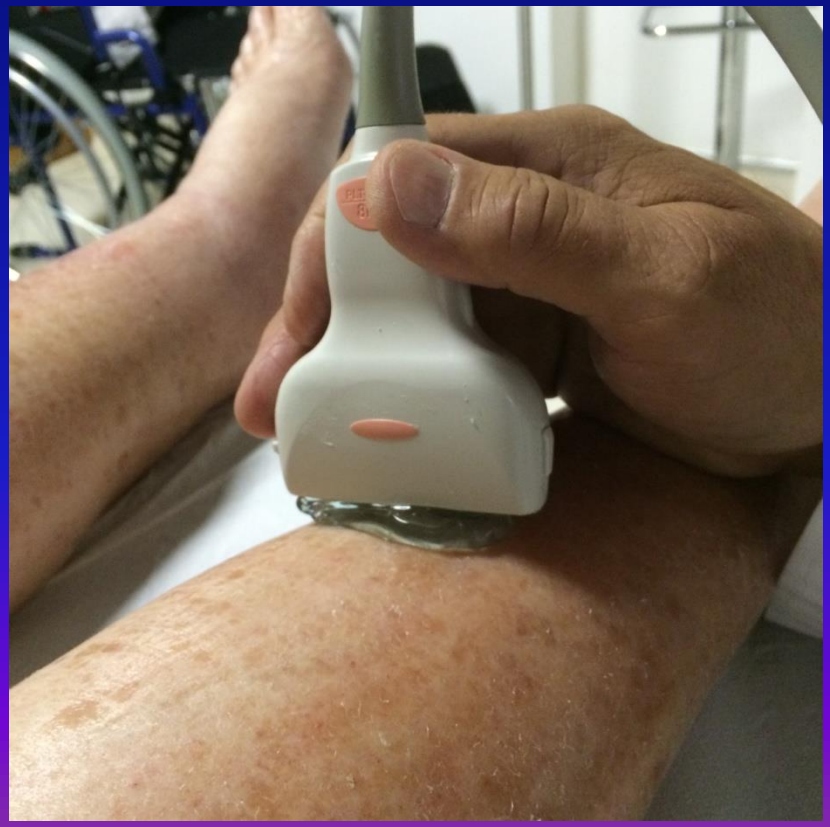
Cosa ci può dire in più la ecografia



Cosa ci può dire in più la ecografia **cutanea?**

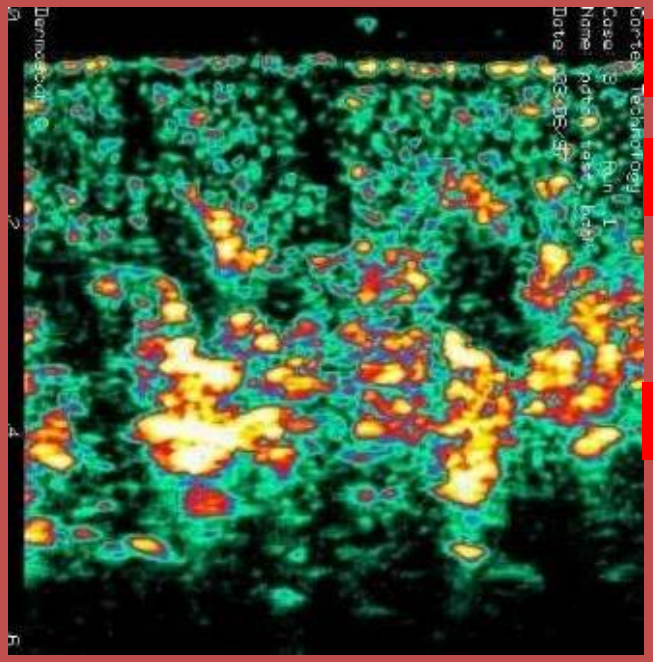


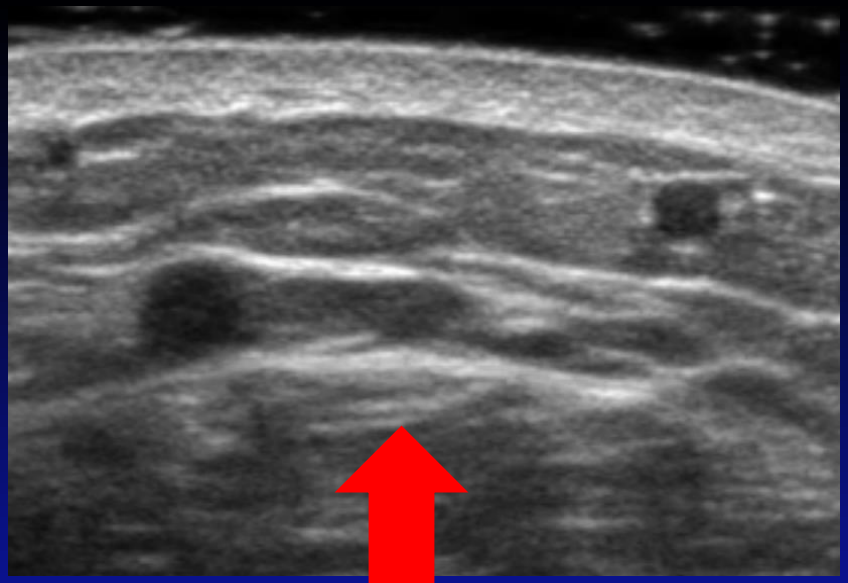
Anzitutto, cos'è la ecografia cutanea?

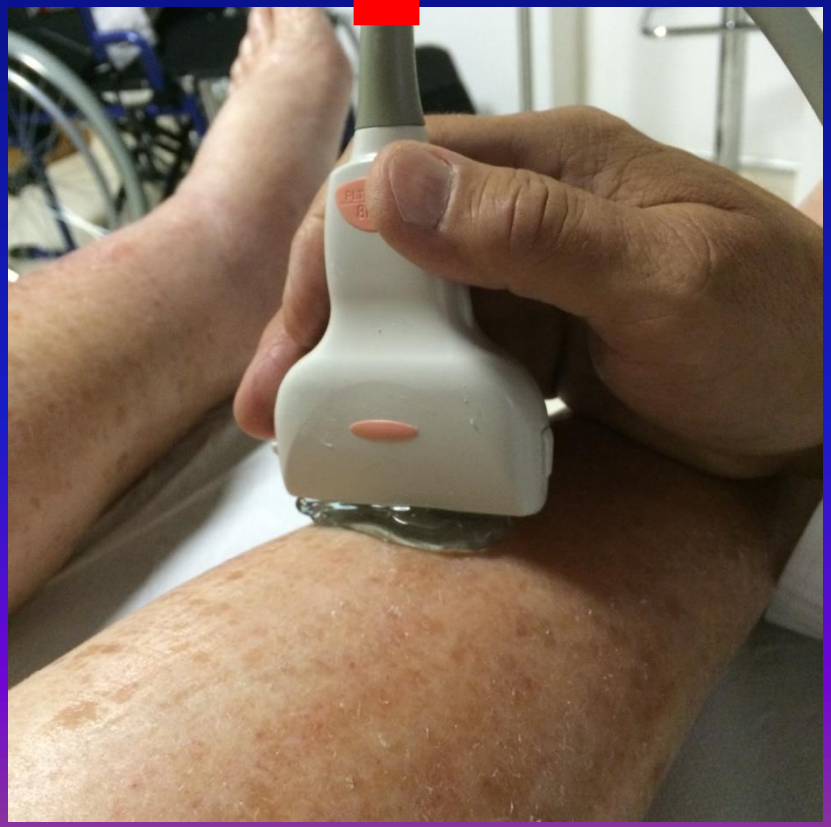


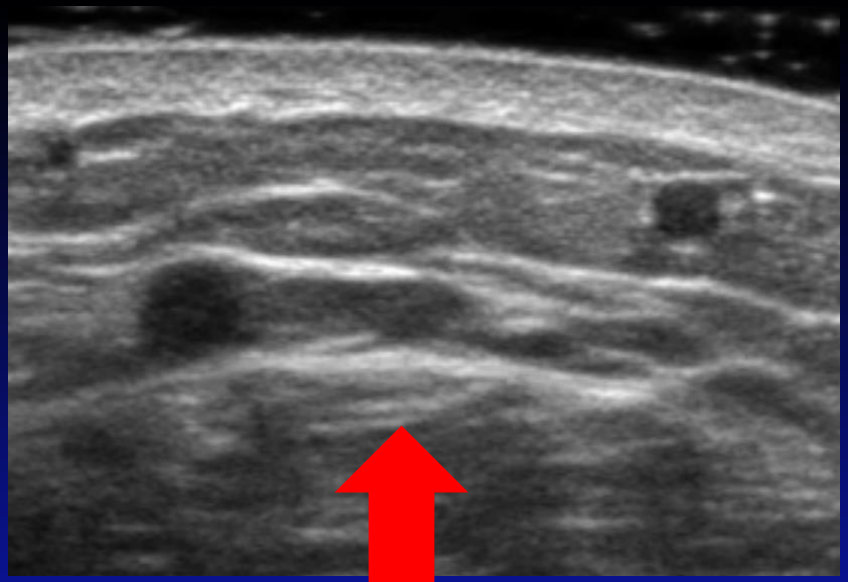
Costosissimo hardware ..

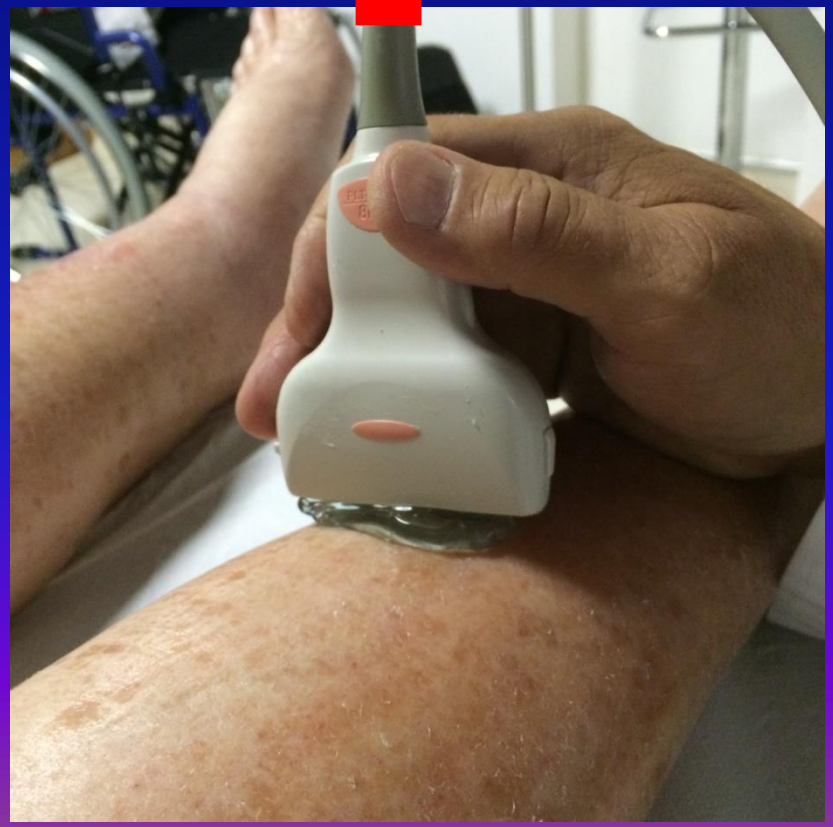
Costosissimo hardware e
Risultati limitati al derma >>

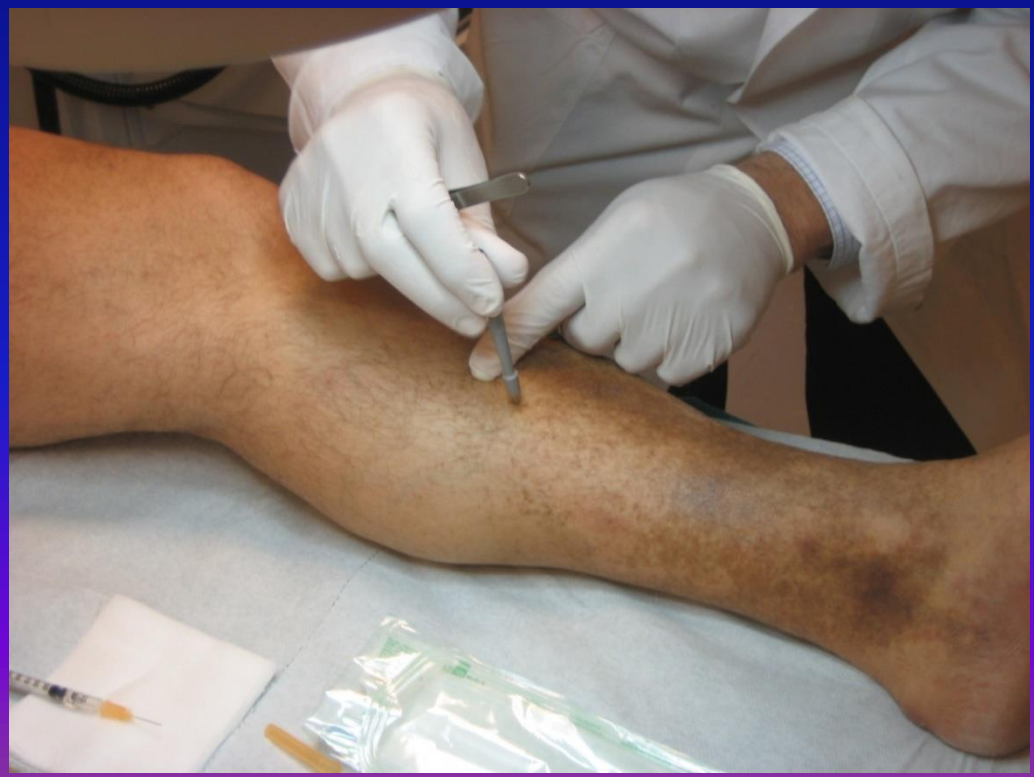




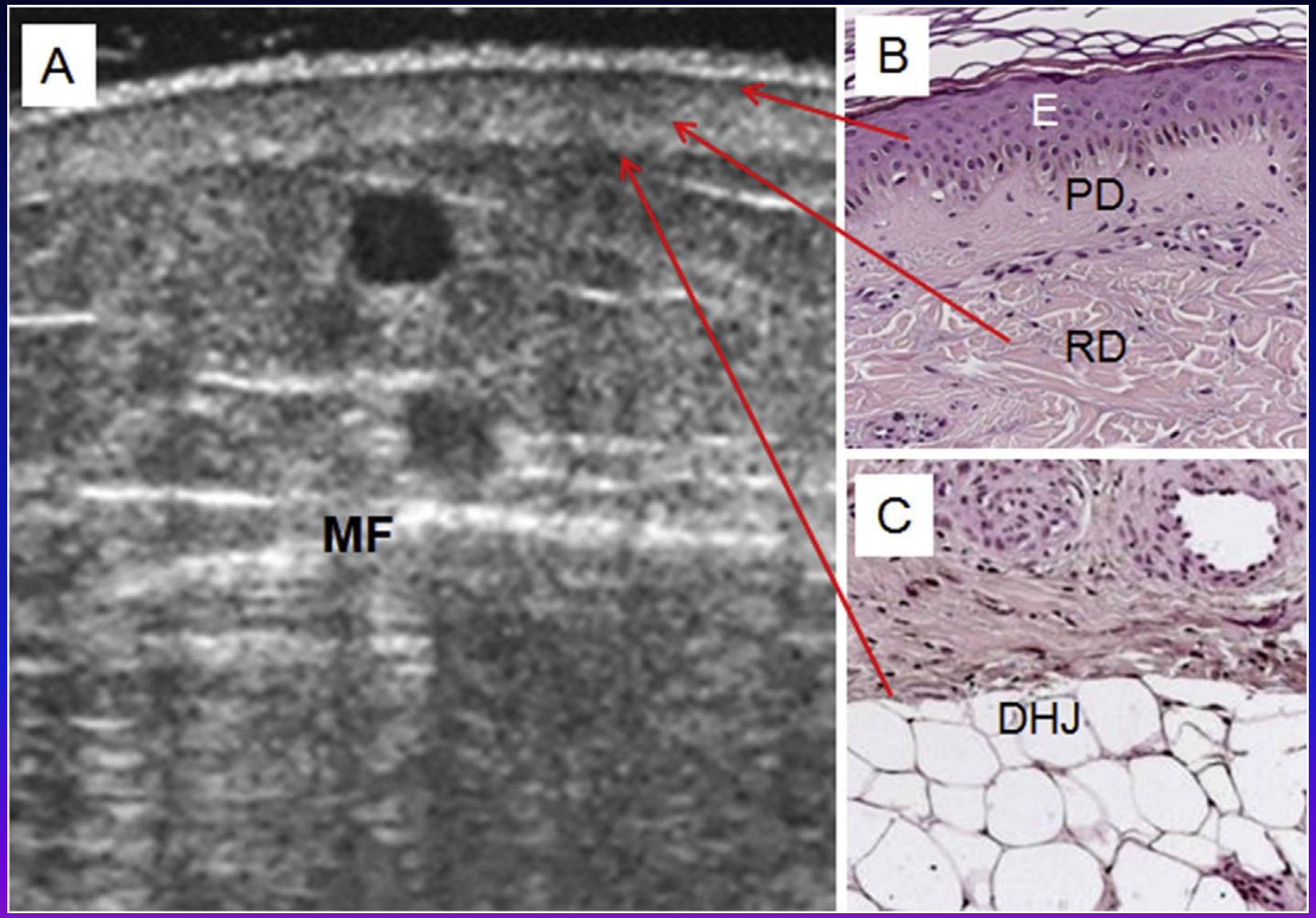






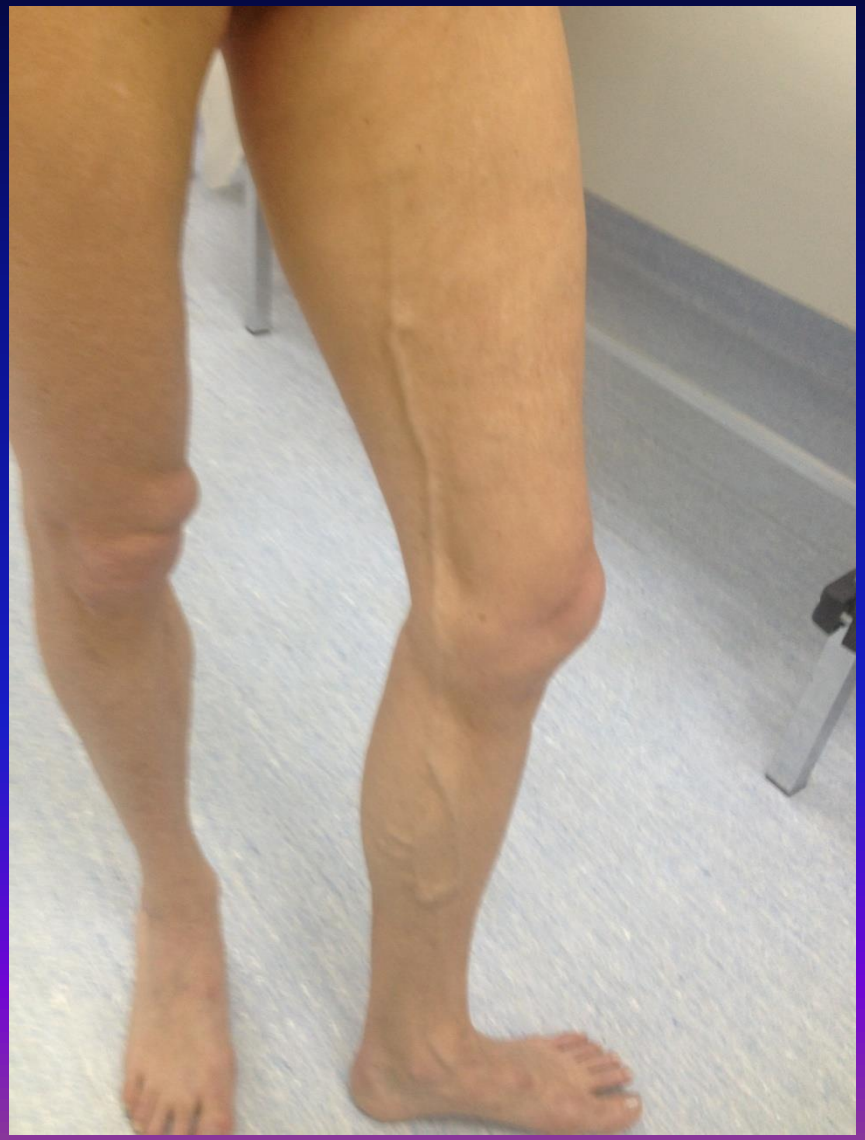


Ecografia cutanea normale

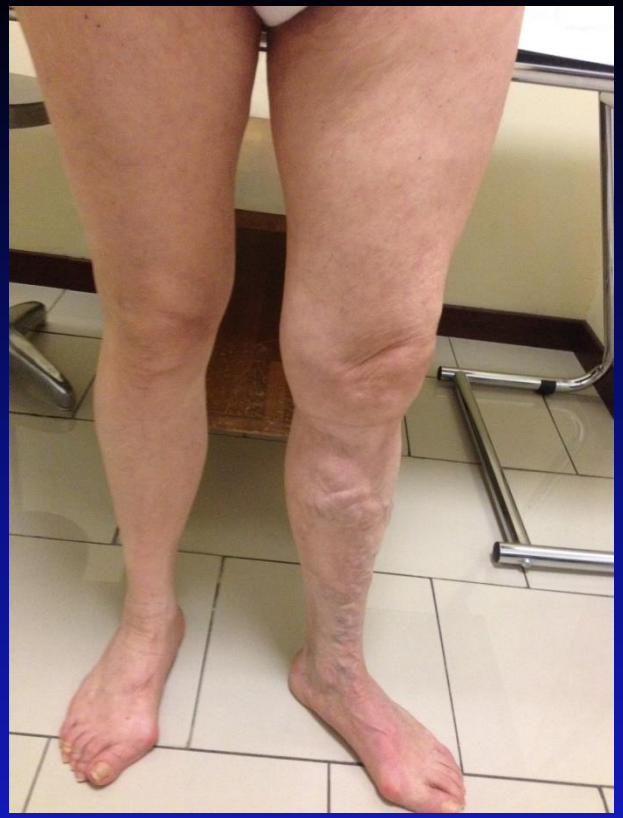


..ma cosa ci dice in gamba C2?

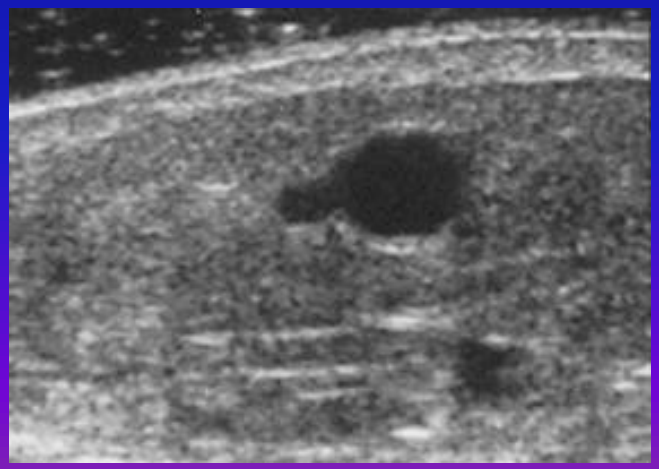
ARTI VARICOSI CON CUTE NORMALE, SENZA EDEMA EVIDENTE

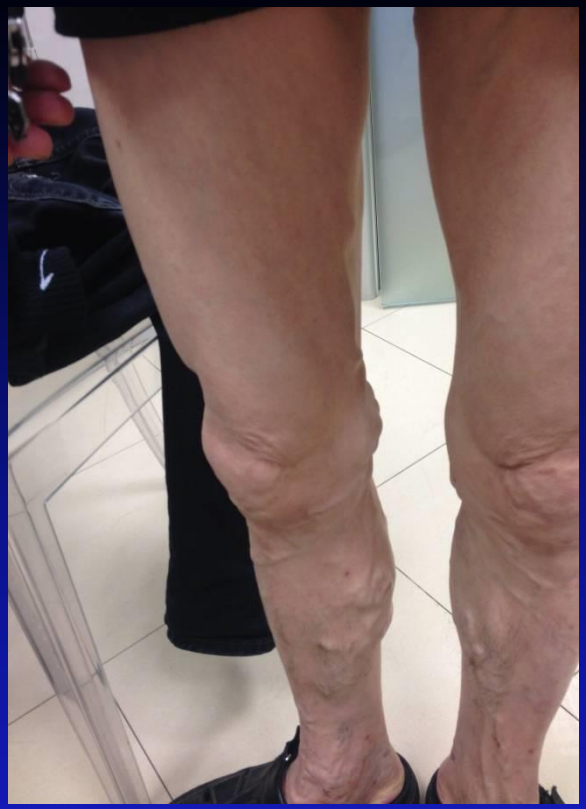


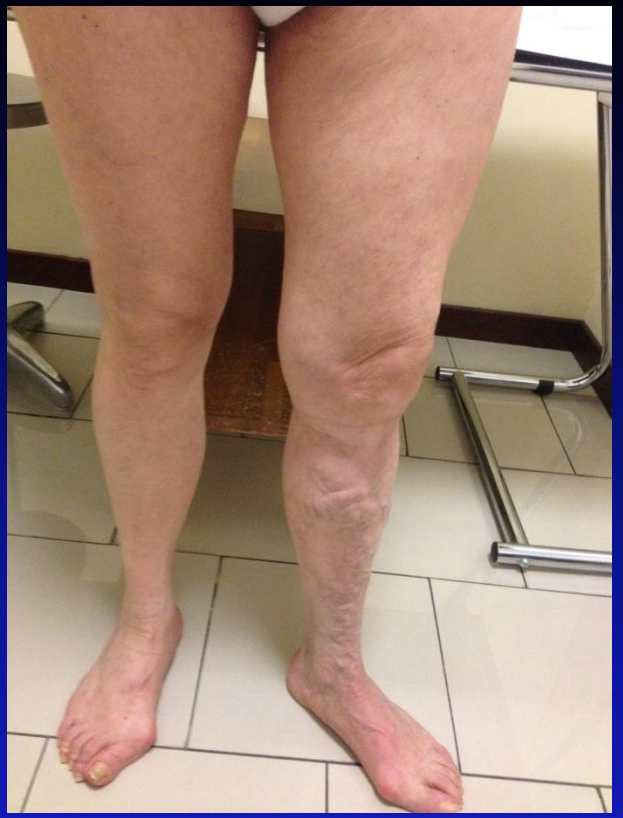
ARTI VARICOSI CON CUTE NORMALE, SENZA EDEMA EVIDENTE

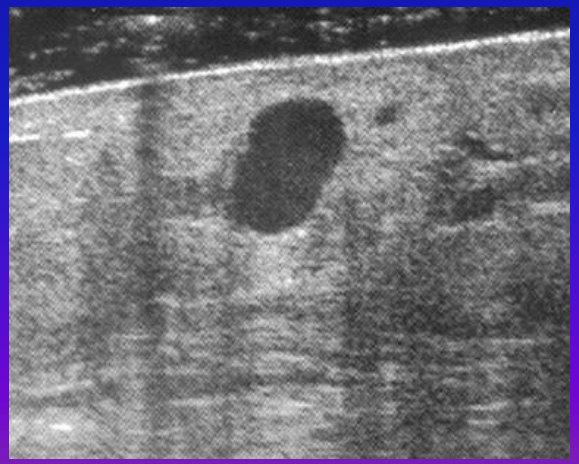


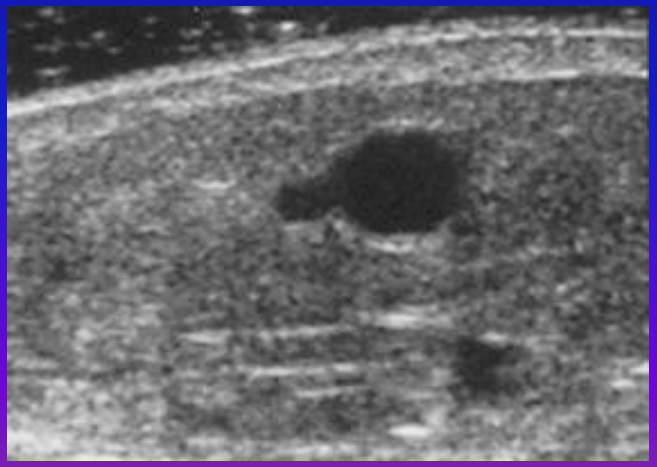
Aspetto normale della cute e del sottocute

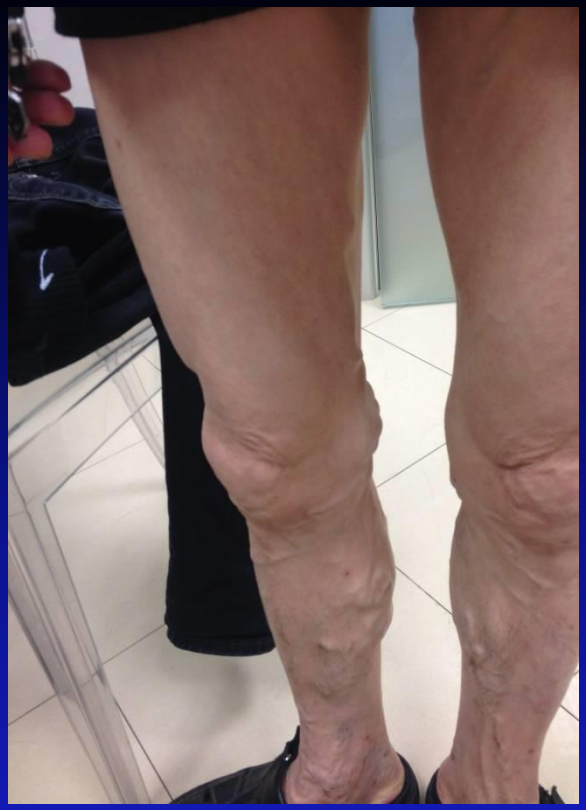




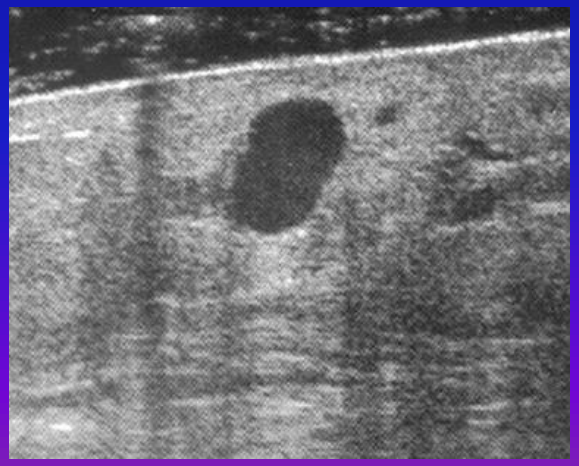


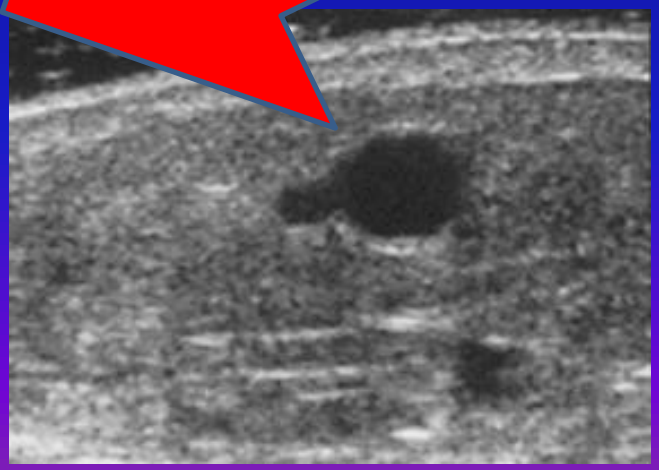




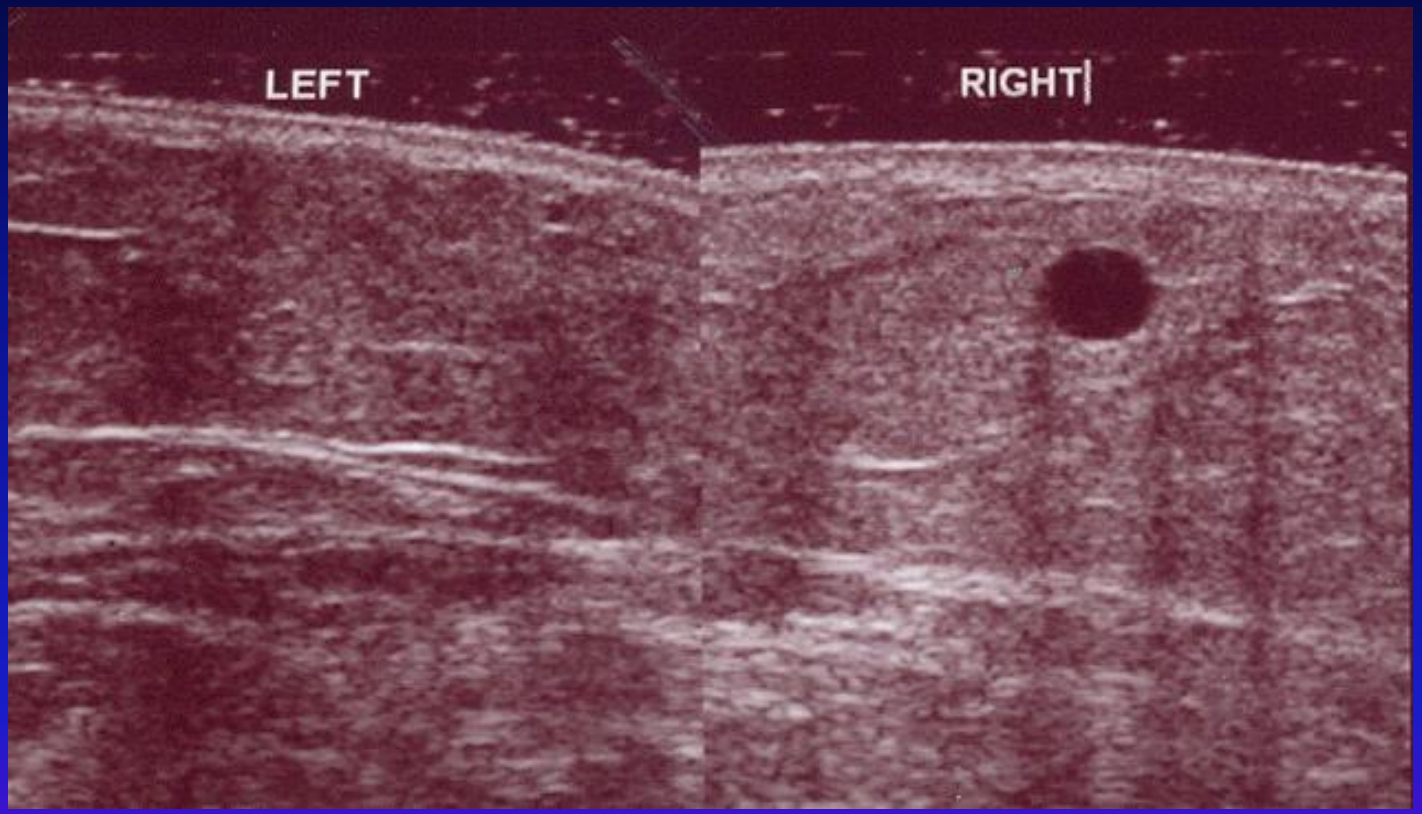


Iperecogenicità del derma e dell'ipoderma





Cosa significa iperecogenicità?



Iperecogenicità significa infiammazione dei tessuti

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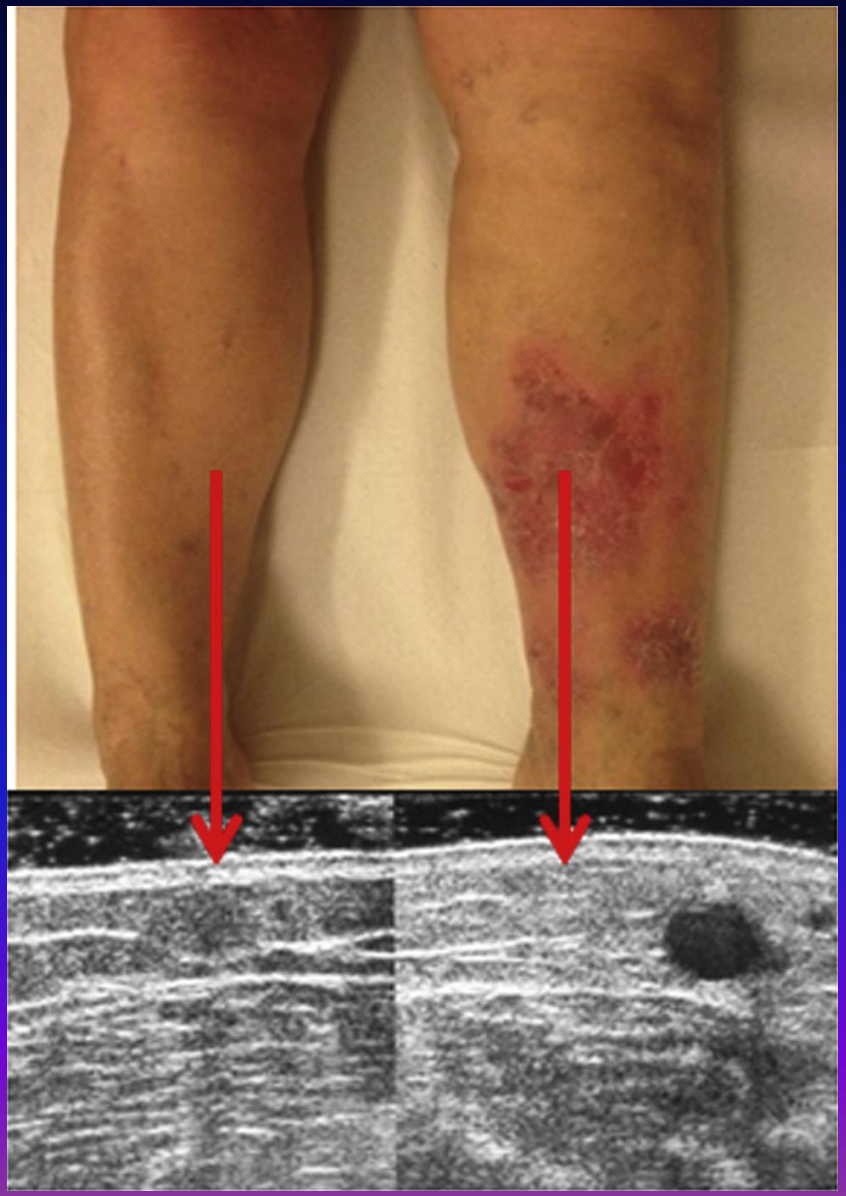
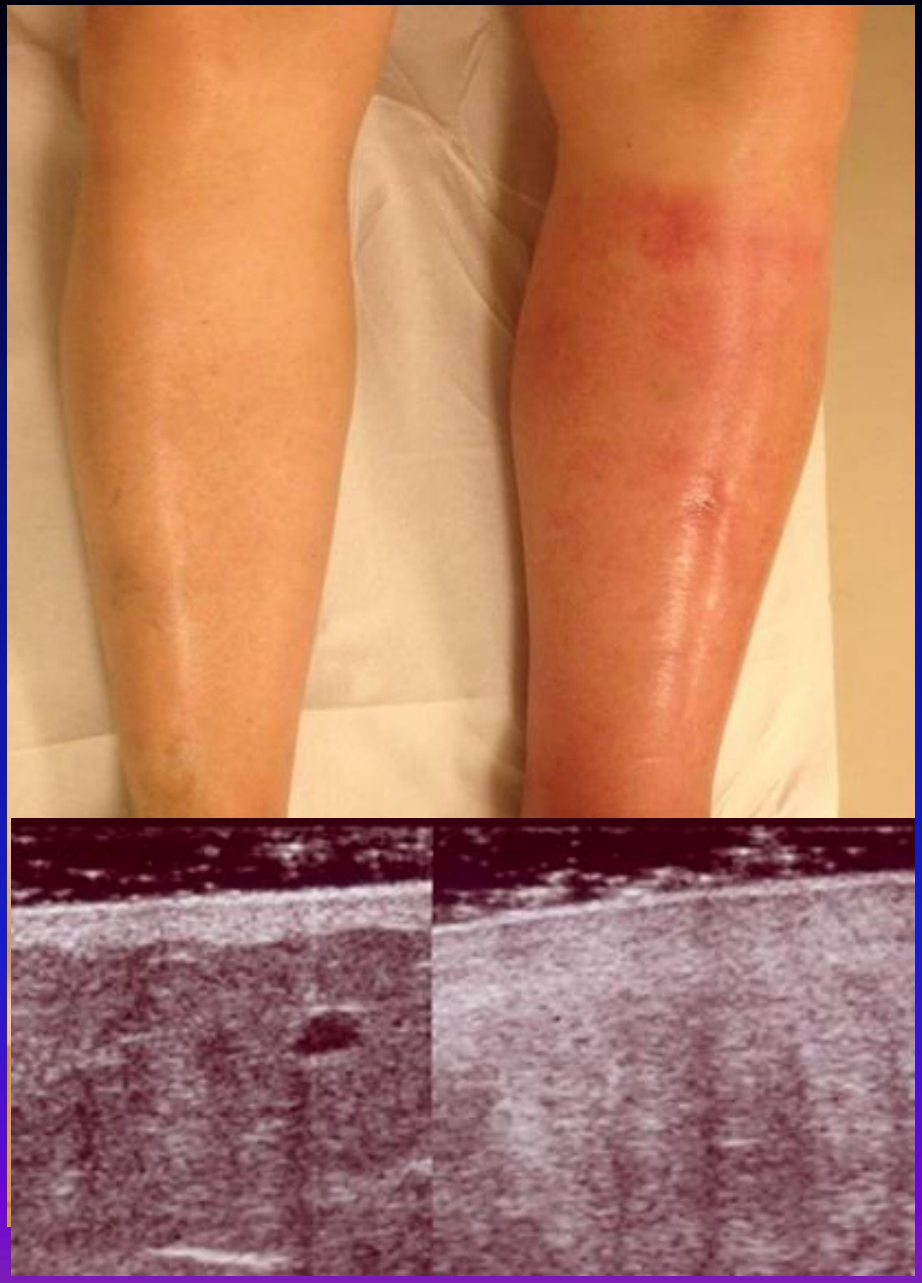
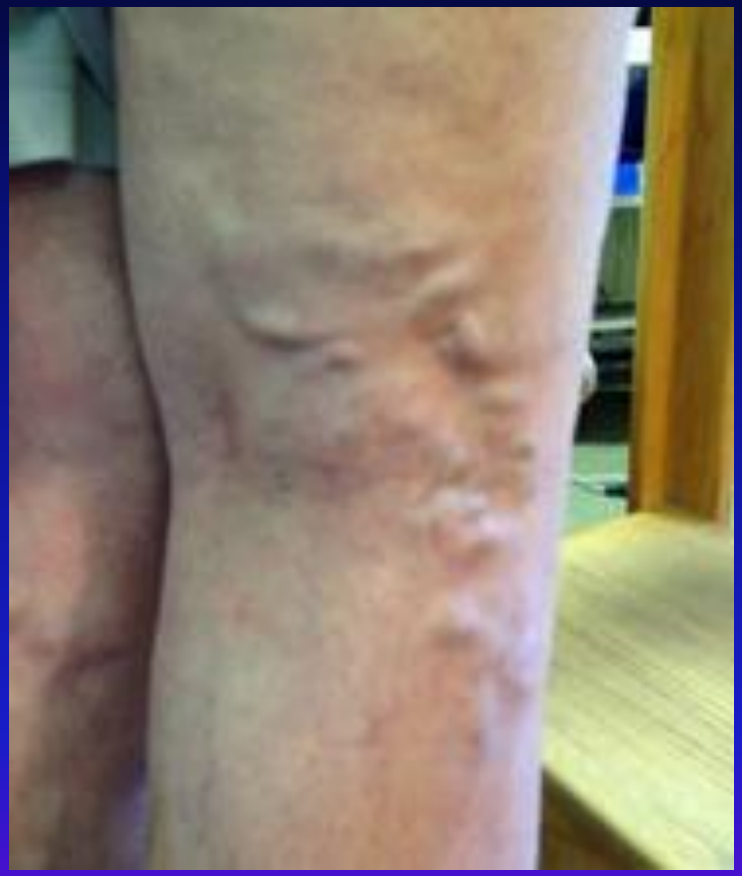
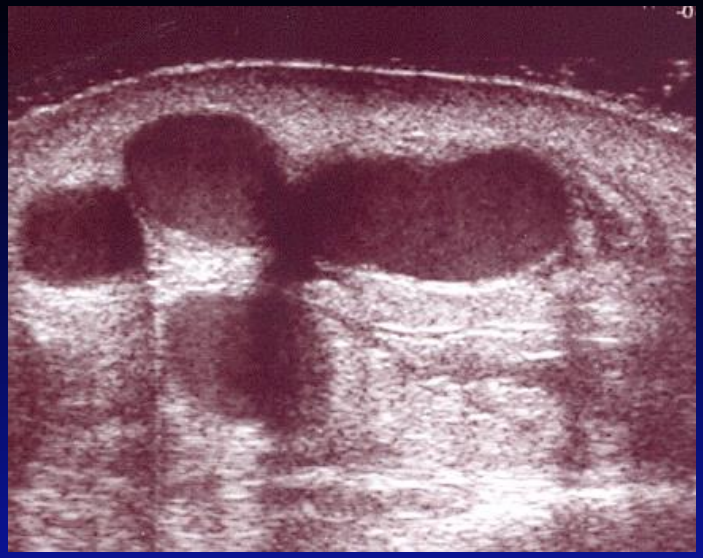
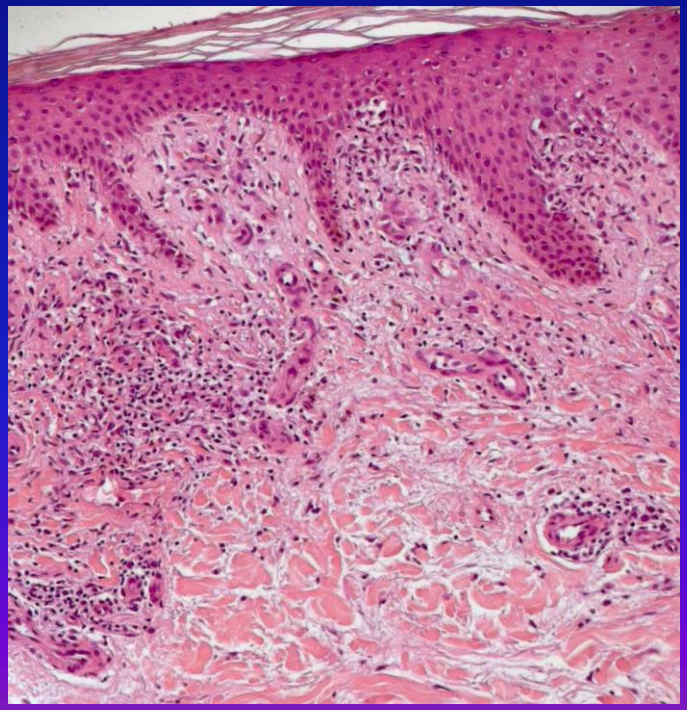




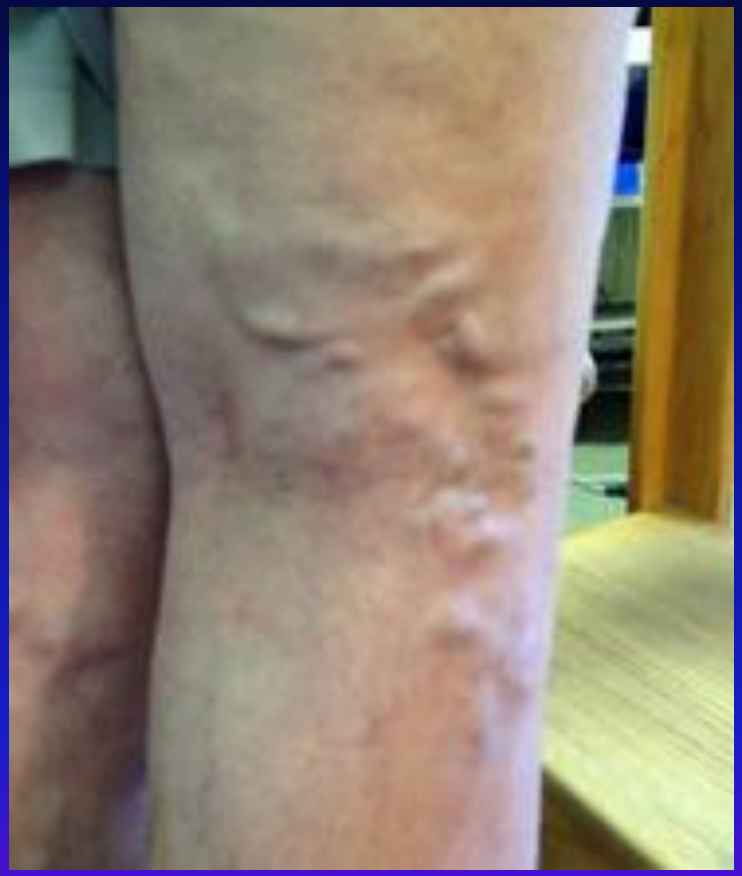
Conferma istologica:

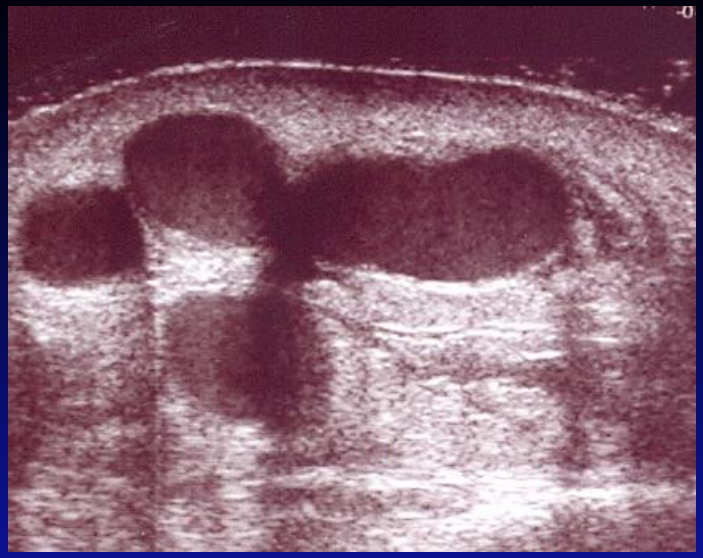


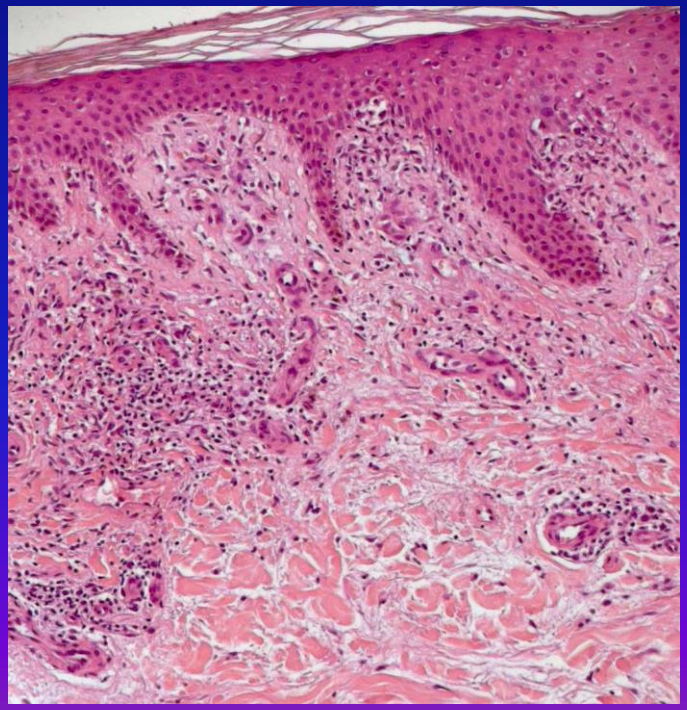




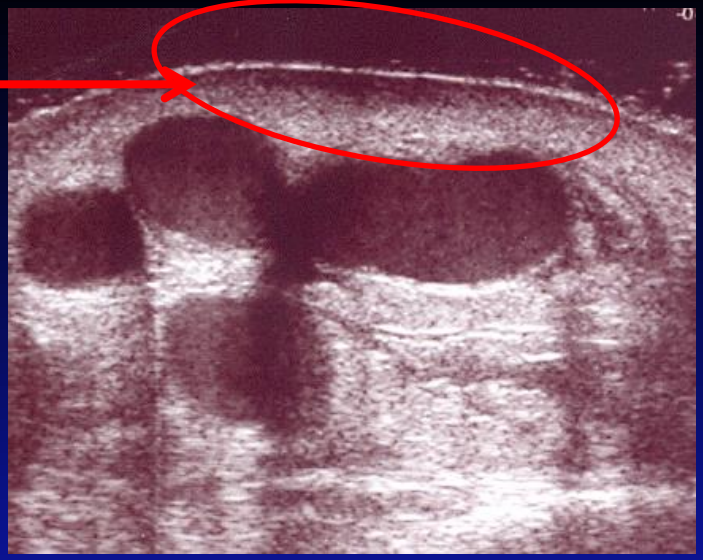
MA,

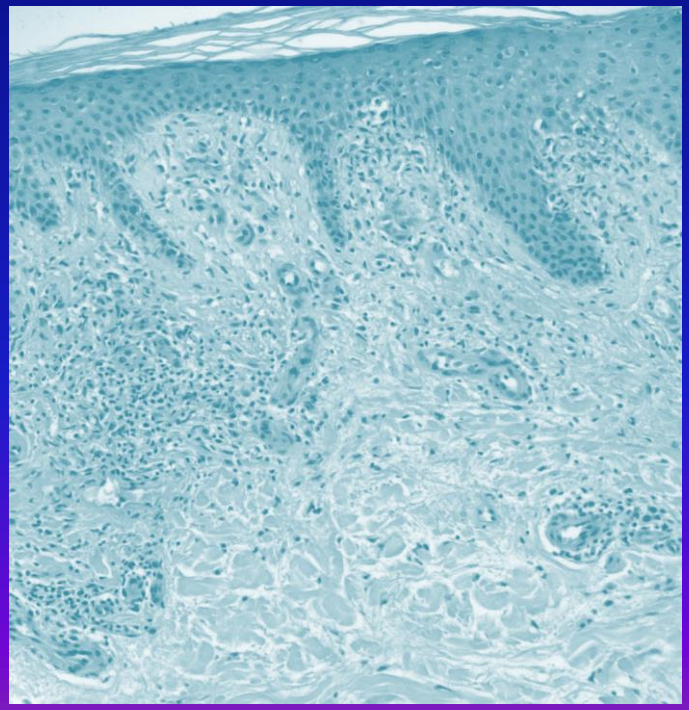


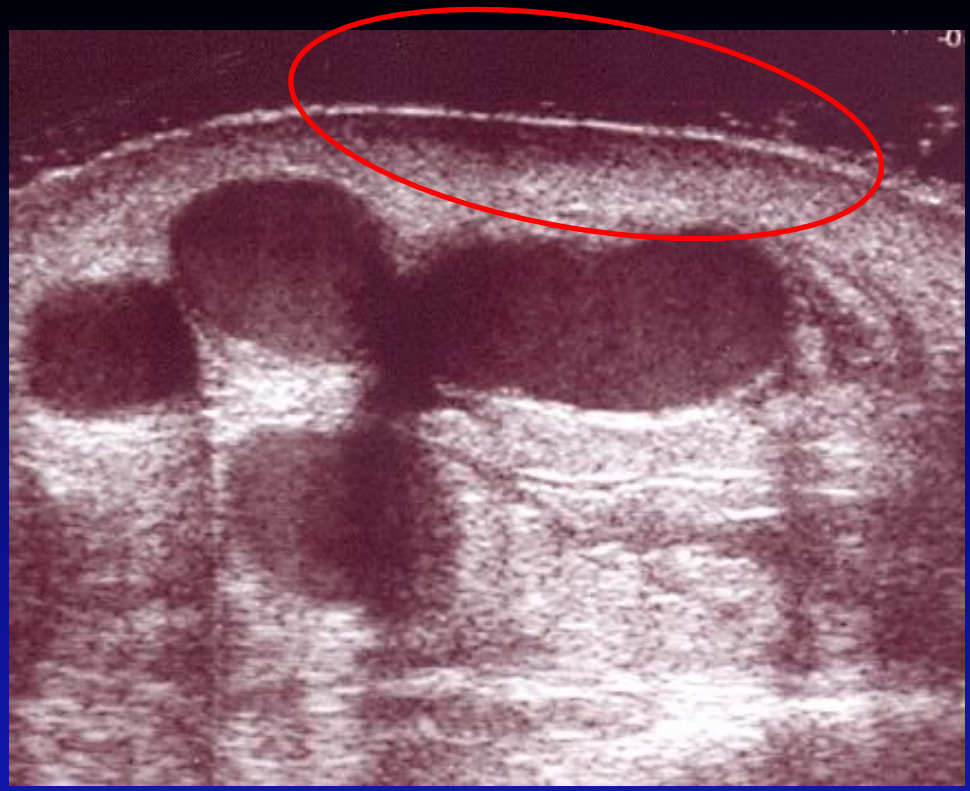




MA, cos'è questo?

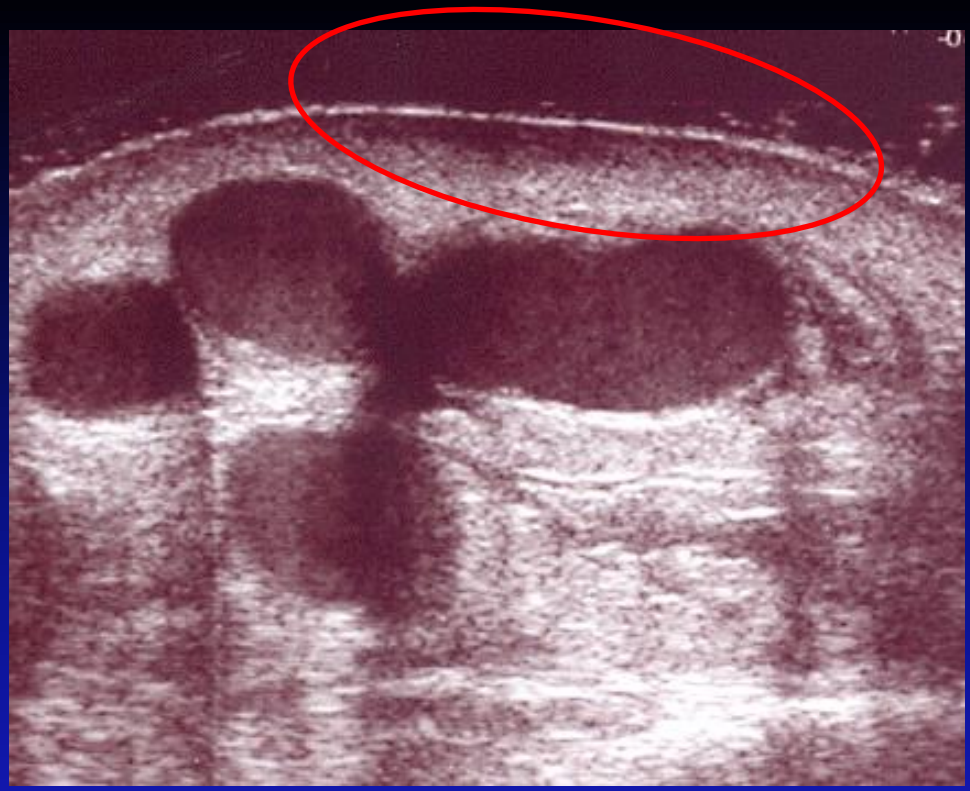






“ipoecogenicità del derma papillare”
alias:
“ispessimento dello SLEB*”

* SLEB: Subepidermal Low Echogenic Band



“ipoecogenicità del derma papillare”
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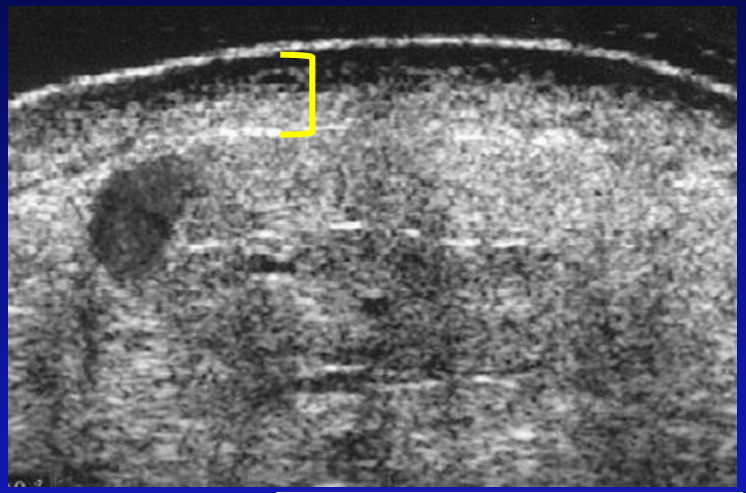
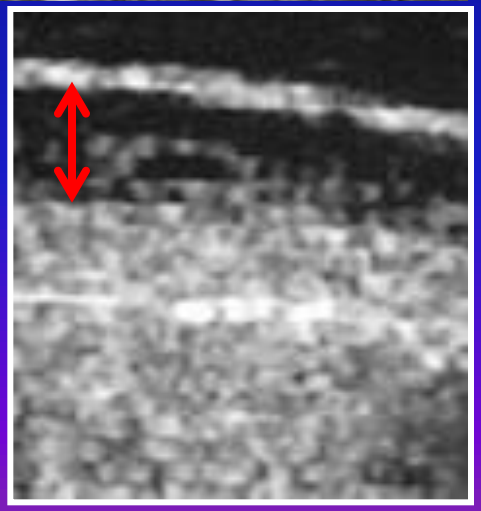
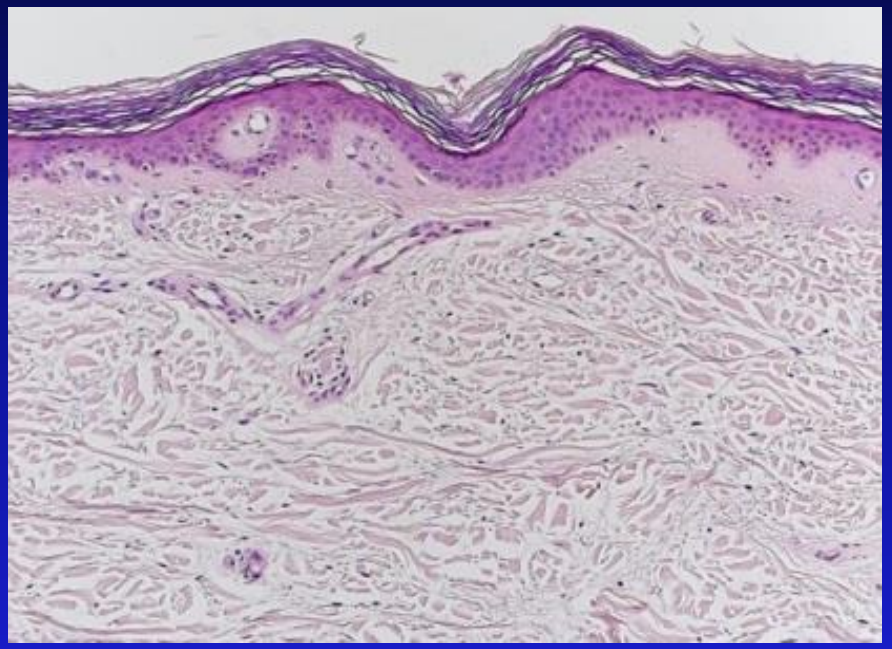
DERMAL EDEMA

* SLEB: Subepidermal Low Echogenic Band

Conferma istologica:





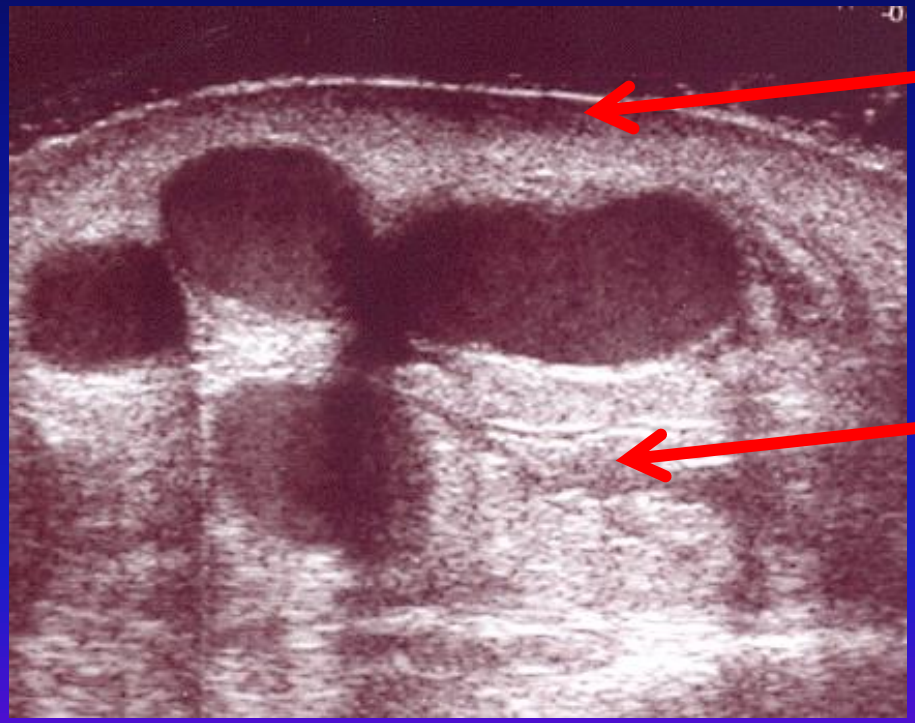


DERMAL EDEMA

A subclinical dermal change, well known in other pathologies (SSc, lupus erithematosus, diabetic neuropathy, lymphedema, lipodermatosclerosis, exposure to sun, cutaneous adverse reactions, a number of inflammatory diseases of the skin).

In SSc, dermal edema is the first change occurring in the preclinical phases of the disease

Edema del derma e infiltrazione sono ambedue segni di infiammazione



Dermal edema

infiltrazione tessutale

Prevalenza di segni infiammatori tessutali in 48 gambe C2 (varicose veins grade: 1-2-3 of VCSS)

Dermal edema was found in 11/48 C2 legs with apparently normal skin. In these 11 legs the mean VCSS scores for "varicose veins" and "pain or other discomfort" were, respectively, ***2.0 and 2.25 (VS 1.8 and 1.55).***

Eur J Vasc Endovasc Surg (2016) 52, 534–542

Ultrasonography of Skin Changes in Legs with Chronic Venous Disease

A. Caggiati *

Department of Anatomy, Sapienza University of Rome, Rome, Italy

Oct 6, 2016

WHAT THIS PAPER ADDS

Currently, ultrasonography is used only to designate the location and pattern of venous lesions. In turn, modern echotomographs allow excellent morphological evaluation of the cutaneous and subcutaneous layers. Ultrasonography refines visual evaluation of skin changes in legs with venous disorders and may reveal changes not highlighted by clinical examination. Accordingly, skin sonography may contribute to better grading of the severity of venous diseases. In particular, in C2 legs US evidence of skin changes should be considered to identify those legs in which varicose veins are more than just a cosmetic problem.

Dati non pubblicati..

Prevalenza di segni infiammatori in arti varicosi (grade 3 of VCSS)

3 siti di esplorazione US

*Considering only C2 legs with varicose veins scored 3 (to the leg), hyperechogenicity of the skin surrounding or overlying varicose clusters at the leg was found in **11/18**. "Pain and other discomfort" score was 2.4 (vs 1.7)*

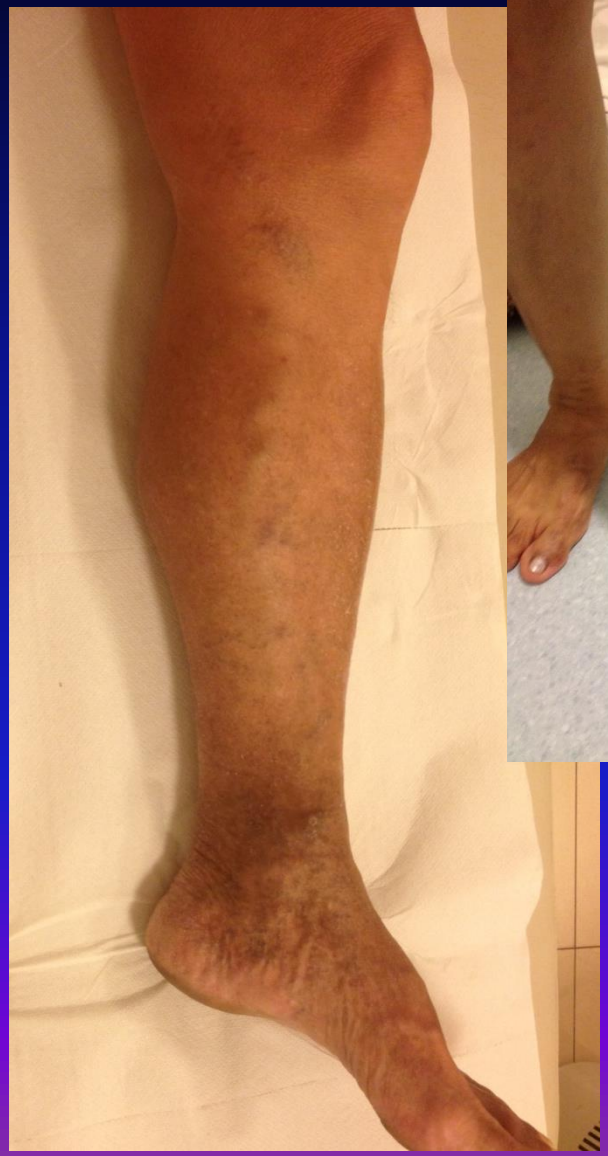
In conclusione:

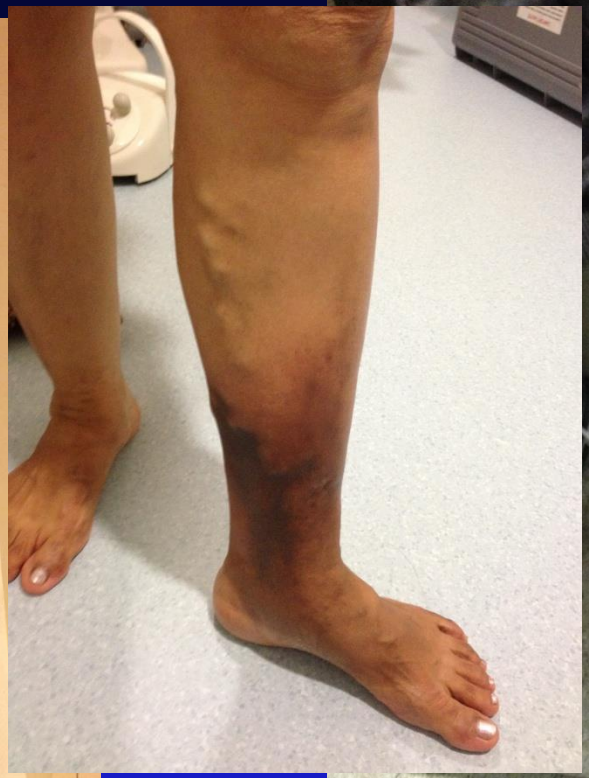
1. Le nostre sonde sono più sensibili dei nostri occhi e dimostrano fenomeni infiammatori in arti classificati C2.

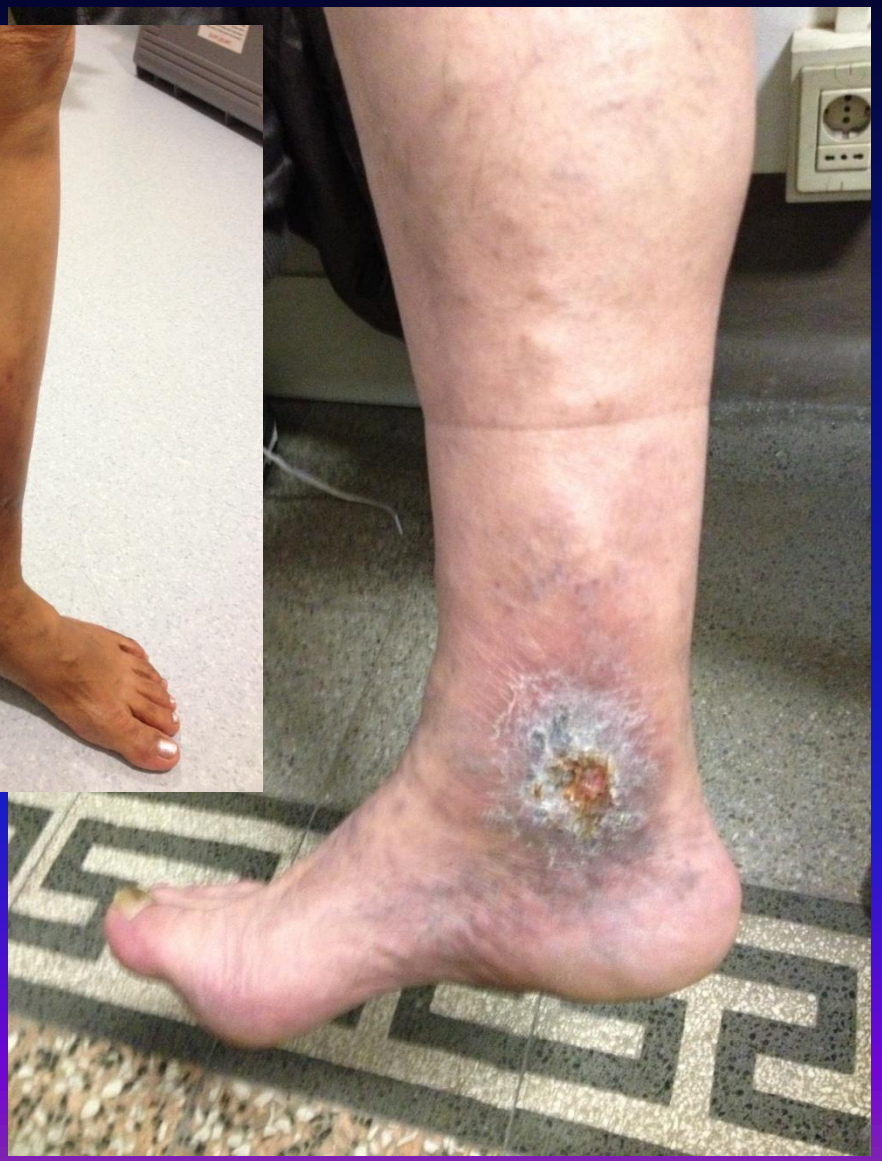
2. Questi correlano con sintomi più gravi

3. Ampi studi longitudinali sono necessari per definire il destino degli arti con e senza segni di flogosi tessutale

L’ecografia non è necessaria x stabilire la presenza di lesioni cutanee (C4-C6 legs)



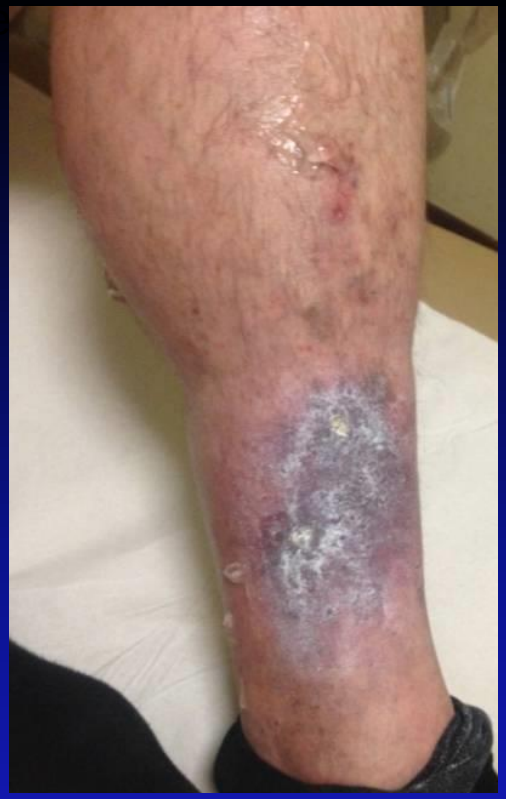


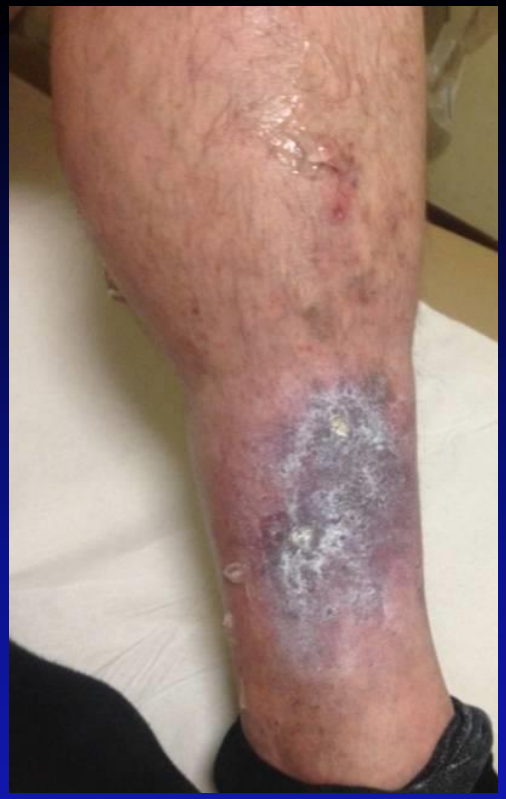


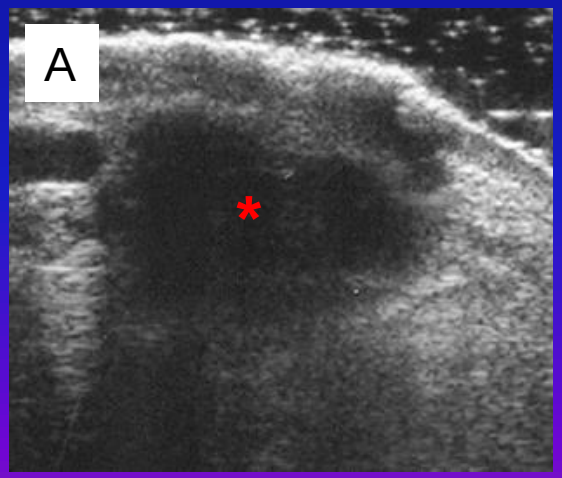
Può l'ecografia aiutarci a evidenziare segni Pre-ulcerativi?

Può l'ecografia aiutarci a evidenziare segni Pre-ulcerativi? Si, in arti C4b (lipodermatosclerotici)

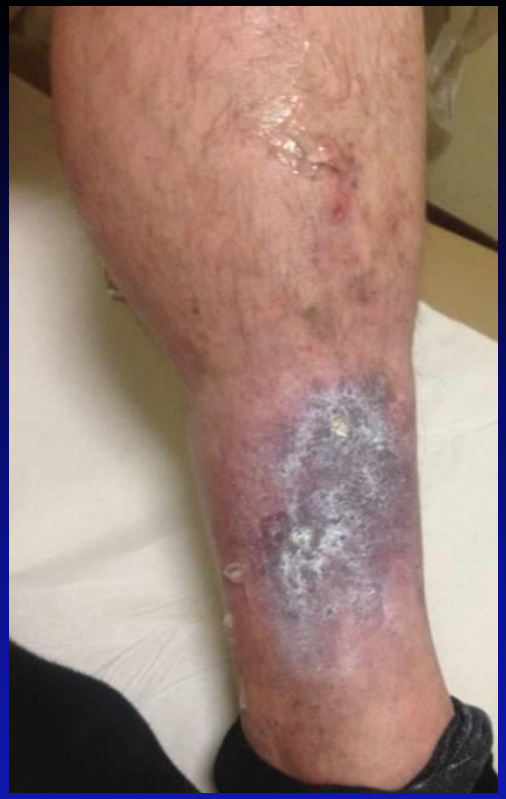
Figure





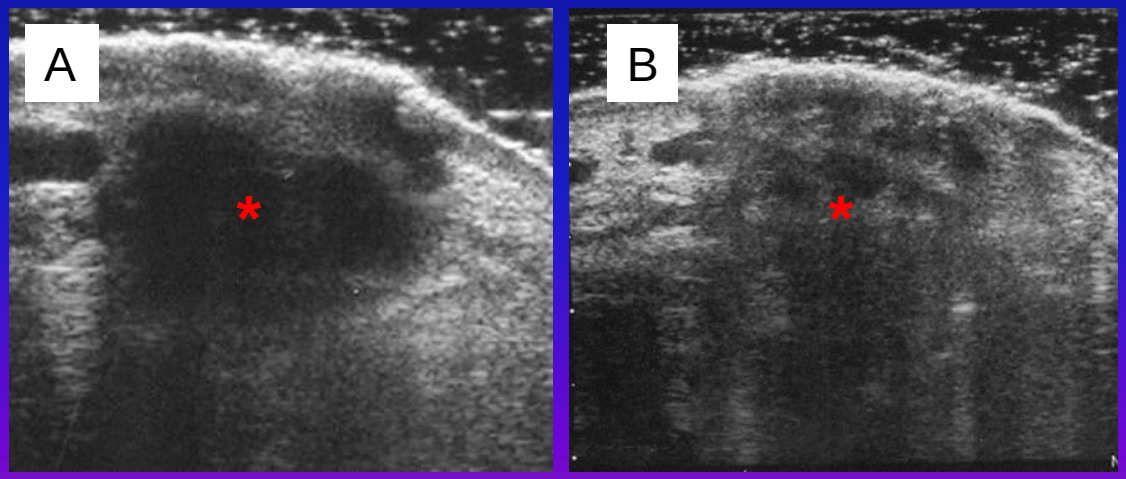


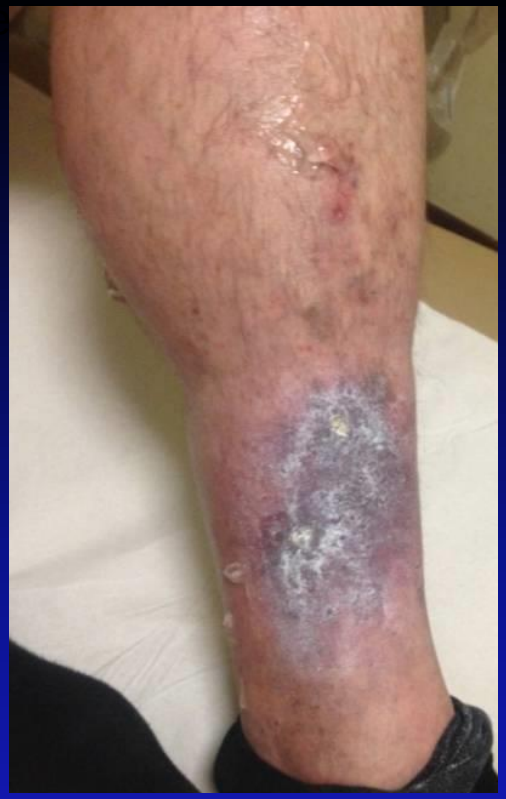
A) Subcutaneous rarefaction (hypoechogenicity) seems to precede ulcer opening.



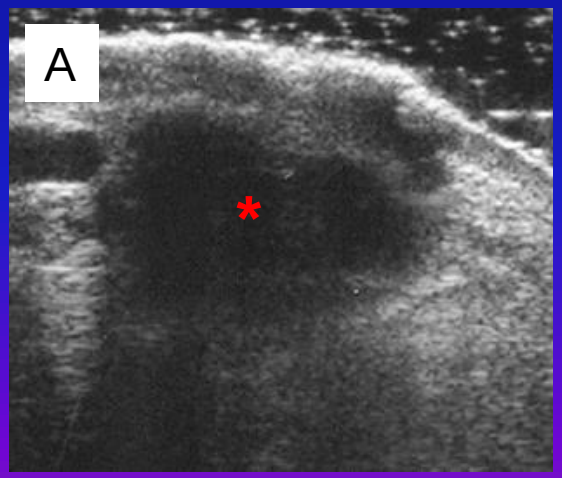
A) Subcutaneous rarefaction (hypoechogenicity) seems to precede ulcer opening.

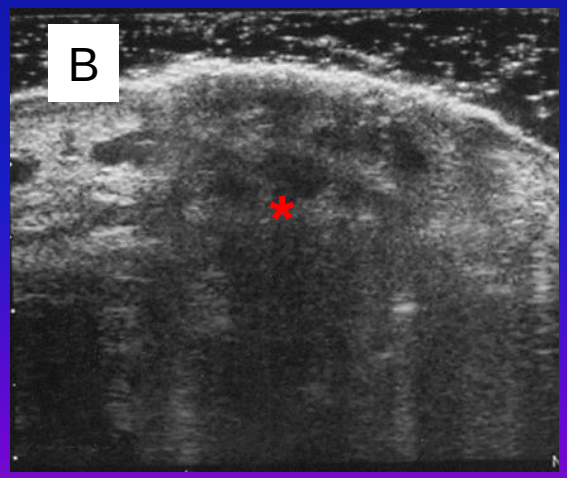
B) Compression reduces hypoechogenicity..





A) Subcutaneous rarefaction (hypoechogenicity) seems to precede ulcer opening.
B) Compression reduces hypoechogenicity..
C) ..preventing ulcer opening





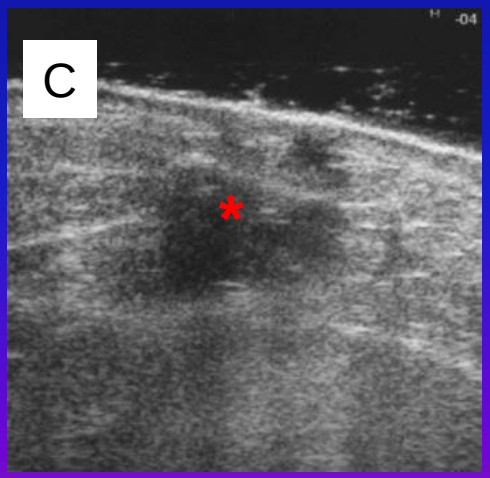
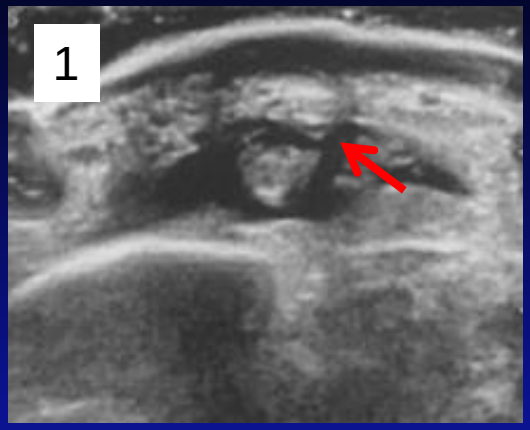


Figure 8: inserire frecce ed asterischi

Altro caso:

Figure 8: inserire frecce ed asterischi

Anechogenic subcutaneous folds!



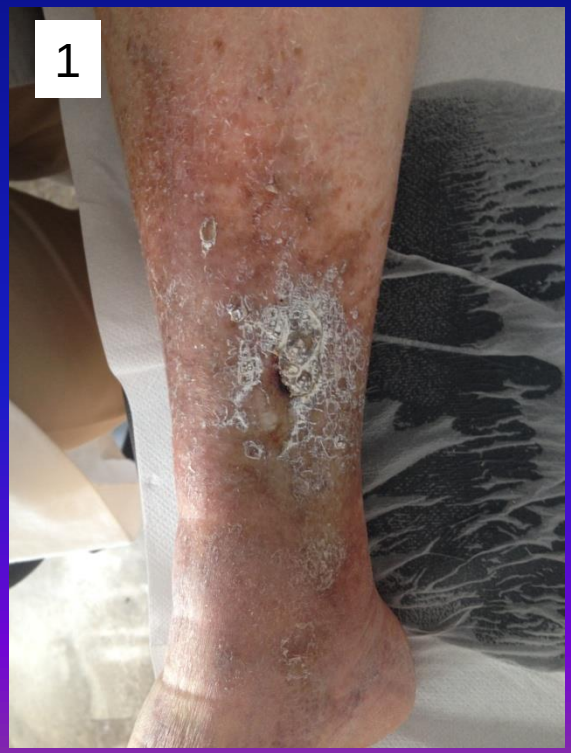
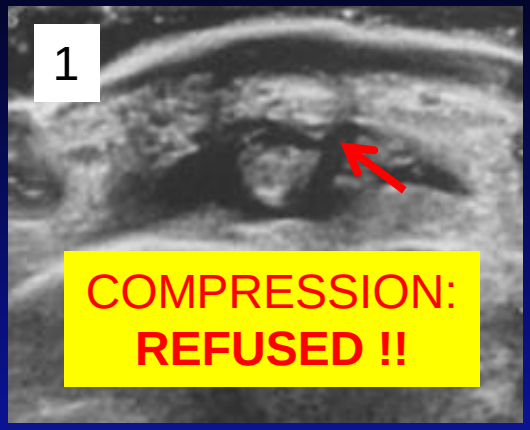


Figure 8: inserire frecce ed asterischi

Anechogenic subcutaneous folds!



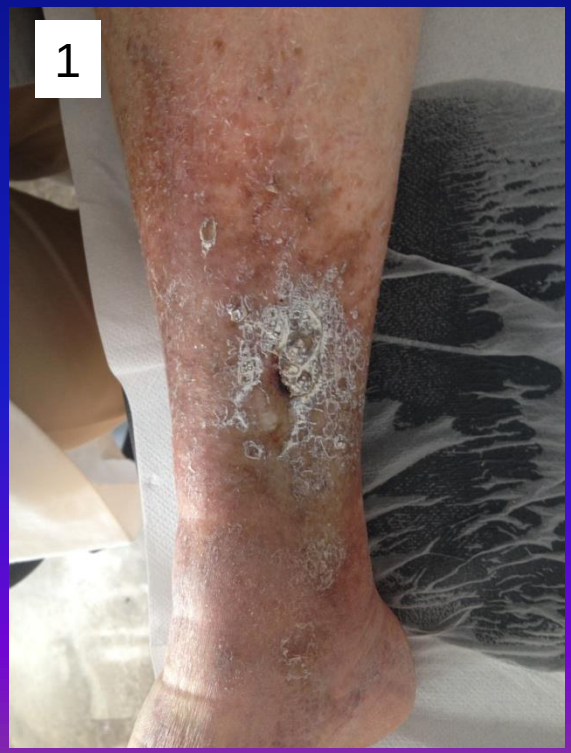
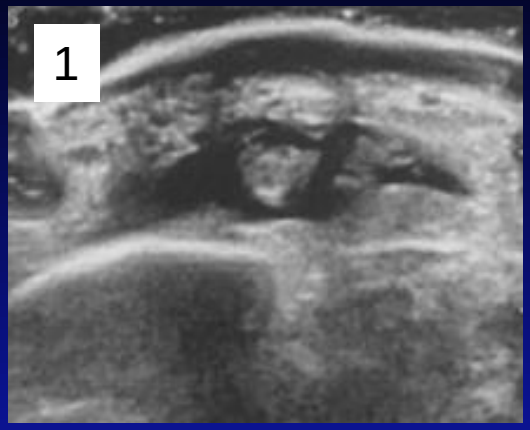
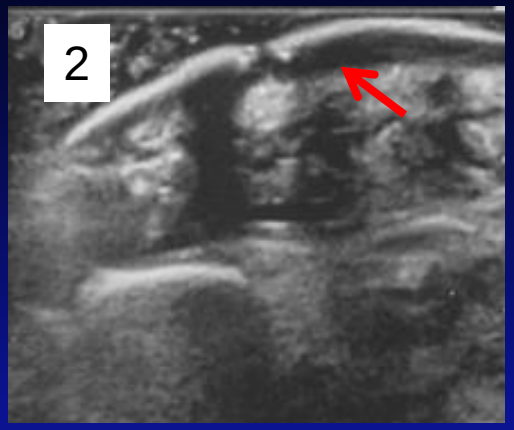


Figure 8: inserire frecce ed asterischi

One week later..





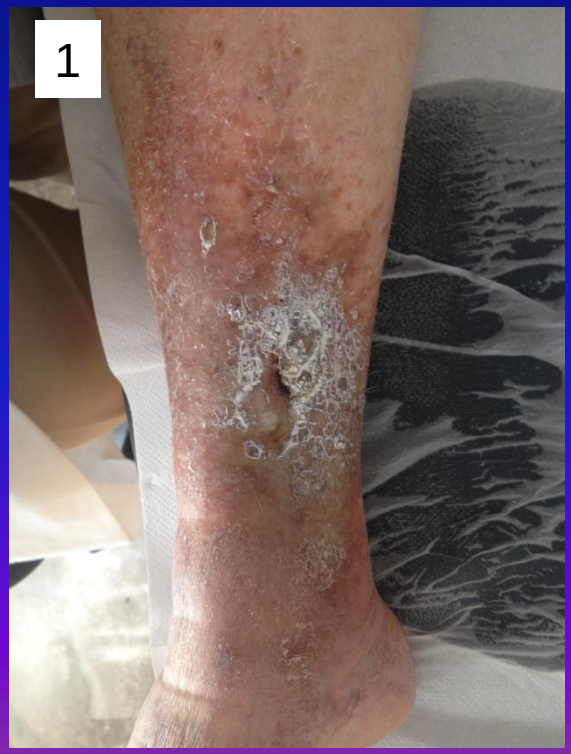
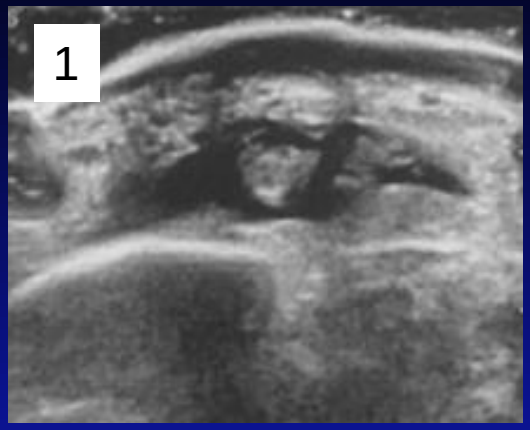
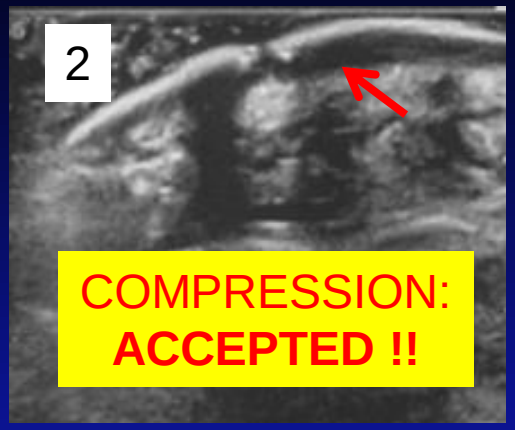


Figure 8: inserire frecce ed asterischi





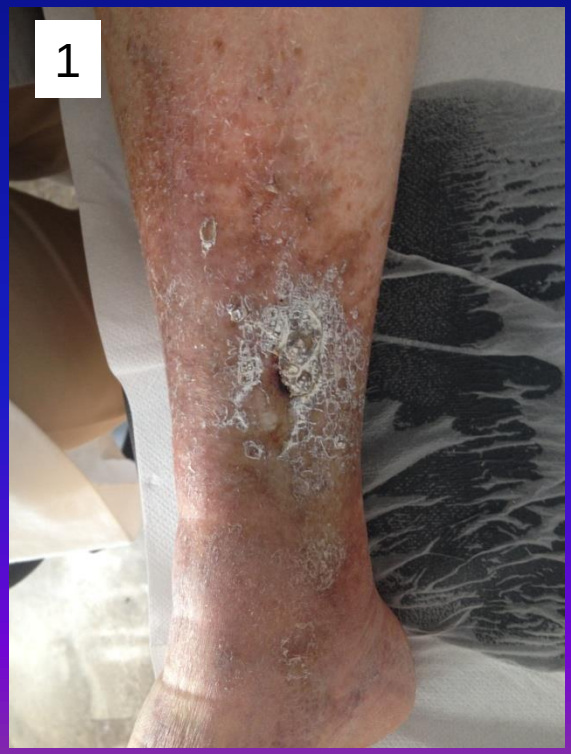
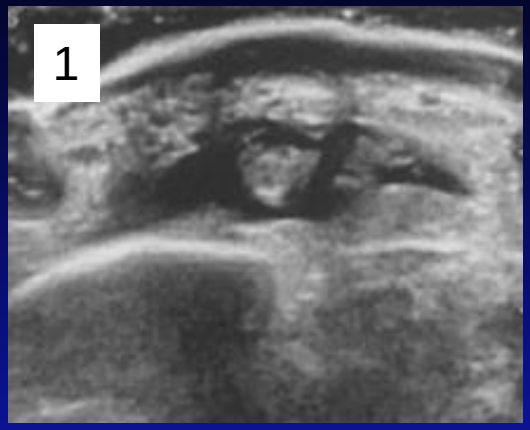
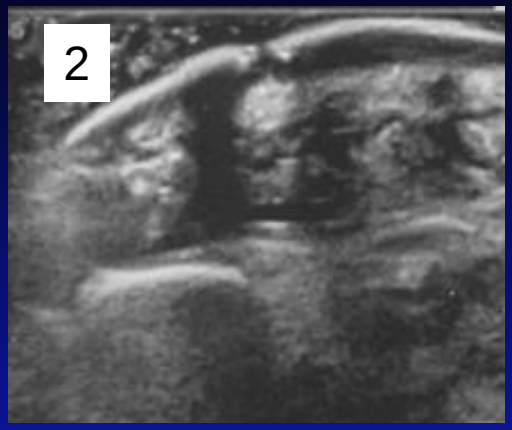
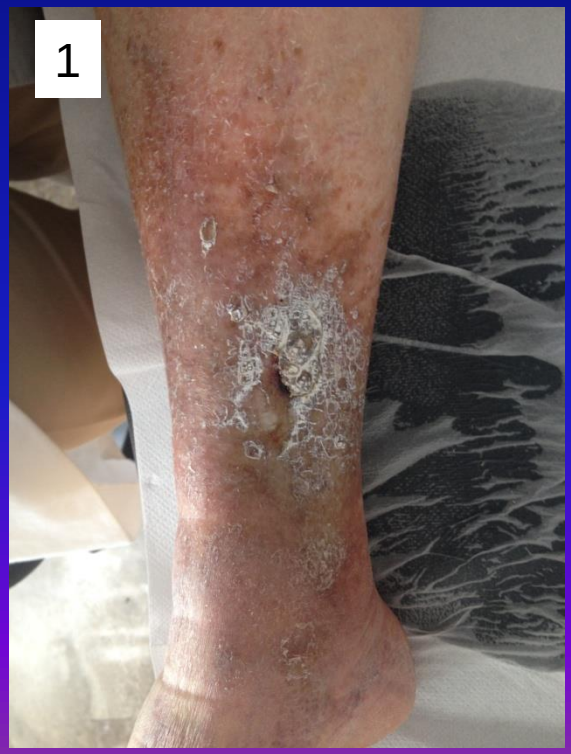


Figure 8: inserire frecce ed asterischi







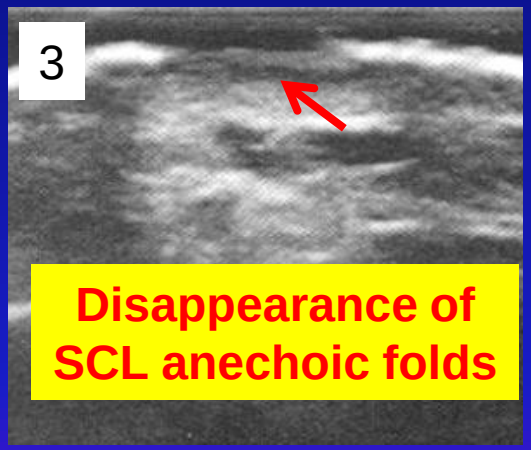
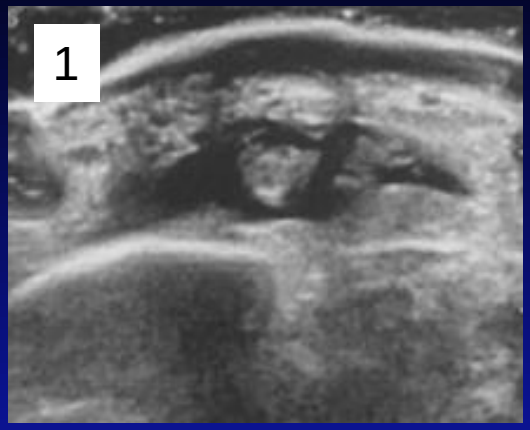
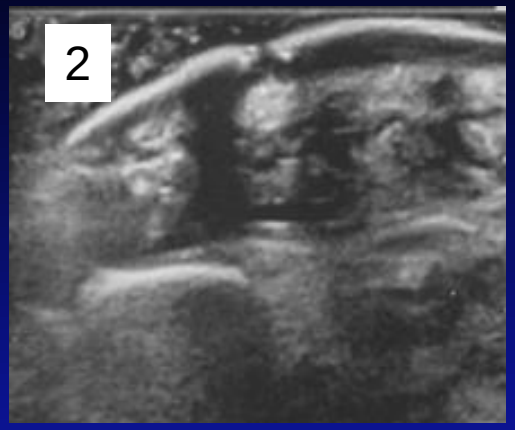
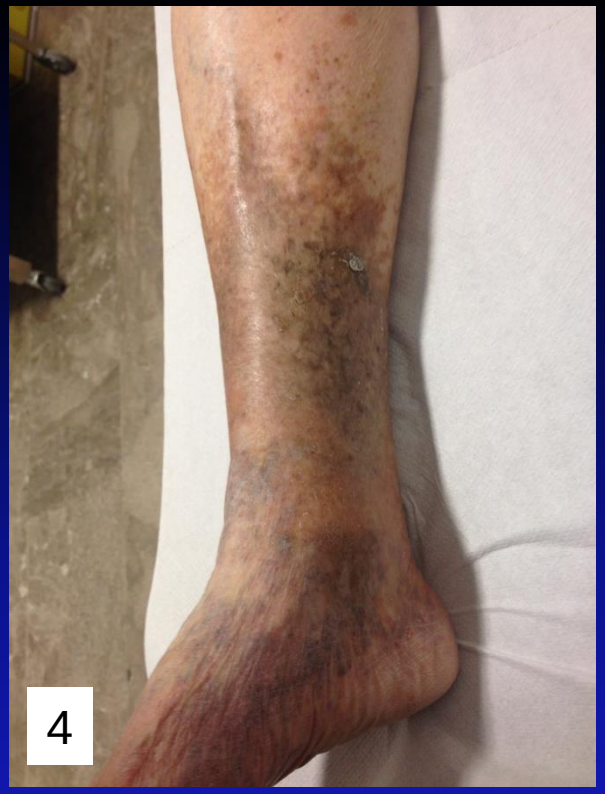
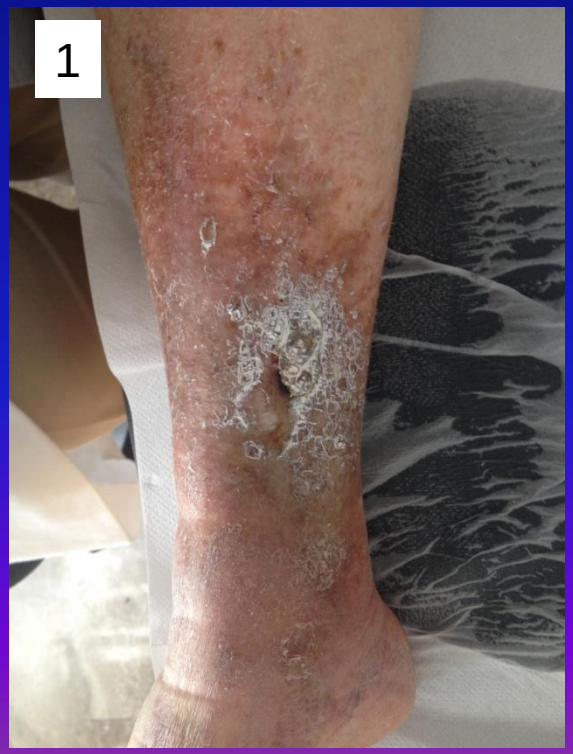


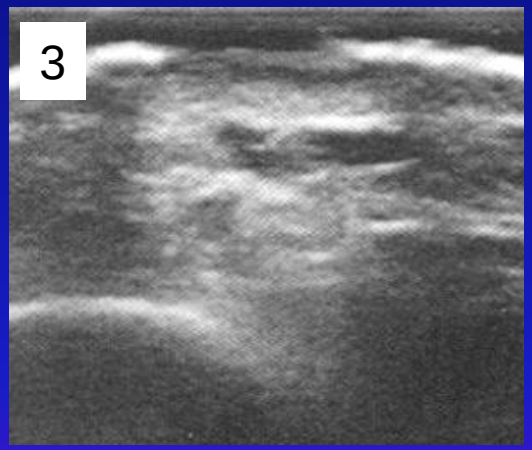
Figure 8: inserire frecce ed asterischi











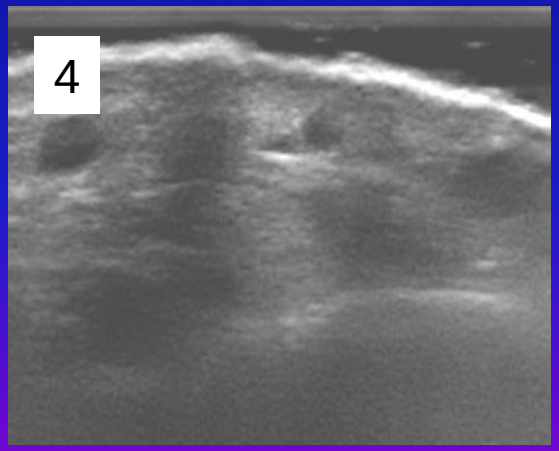
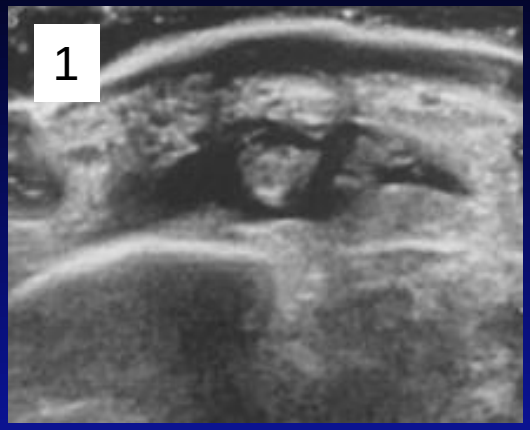
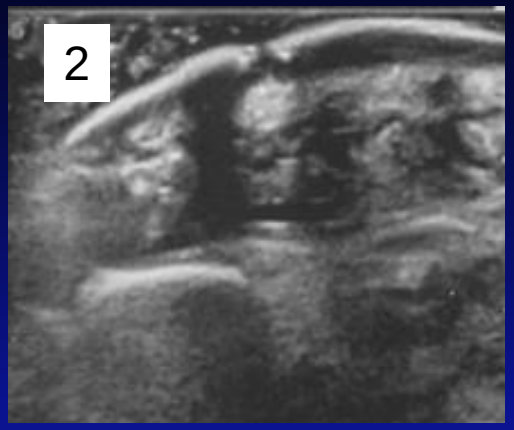
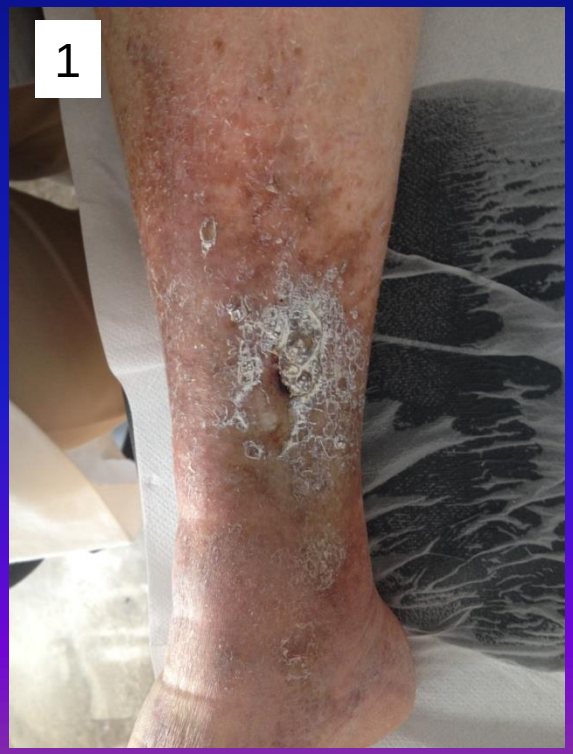
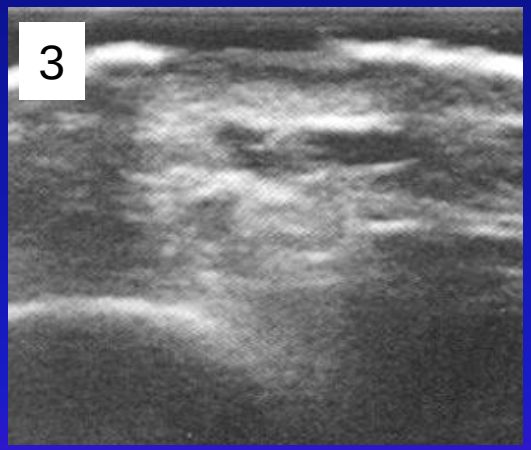


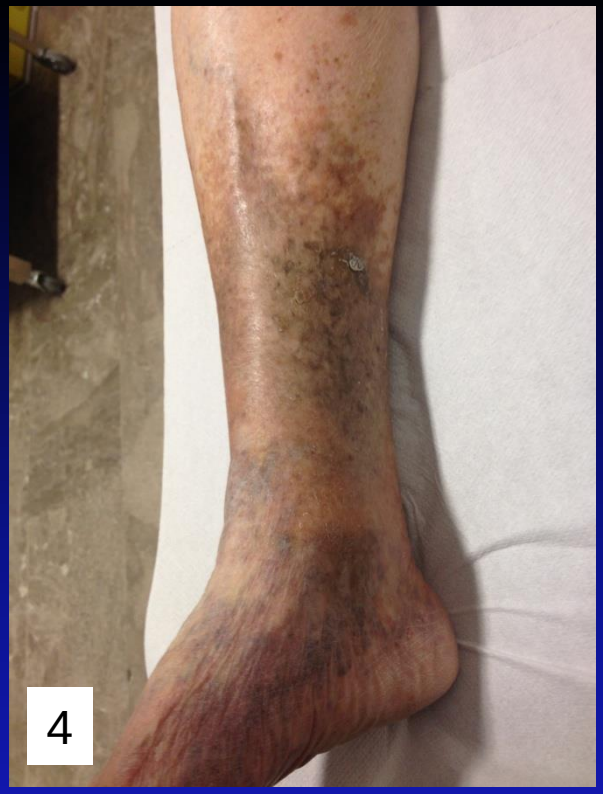
Figure 8: inserire frecce ed asterischi

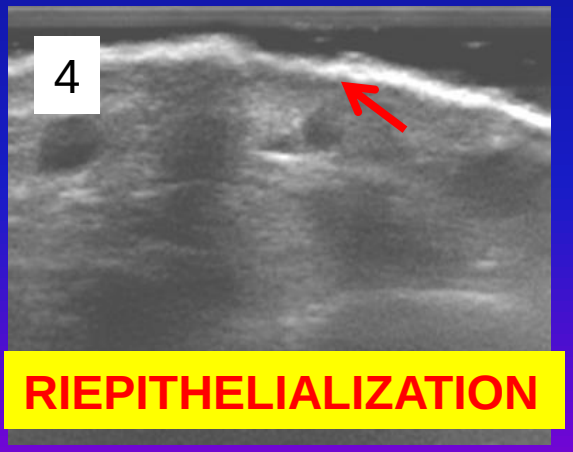












Conclusive remarks

Improvements in ultrasound technology allow to possibly consider sonography a "non-invasive skin biopsy".

It may reveal changes not visible at clinical inspection.

These need further investigation to explain their pathophysiology, prognostic significance and therapeutic implications.

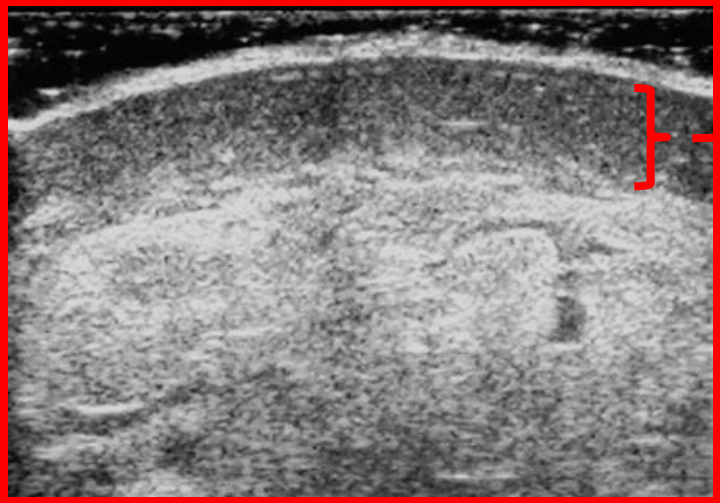
alberto.caggiati@uniroma1.it

Let you try skin sonography in your patients

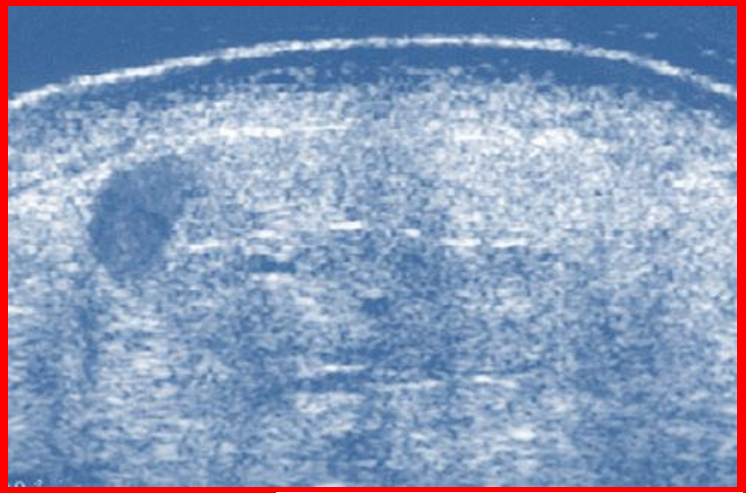
Thanks

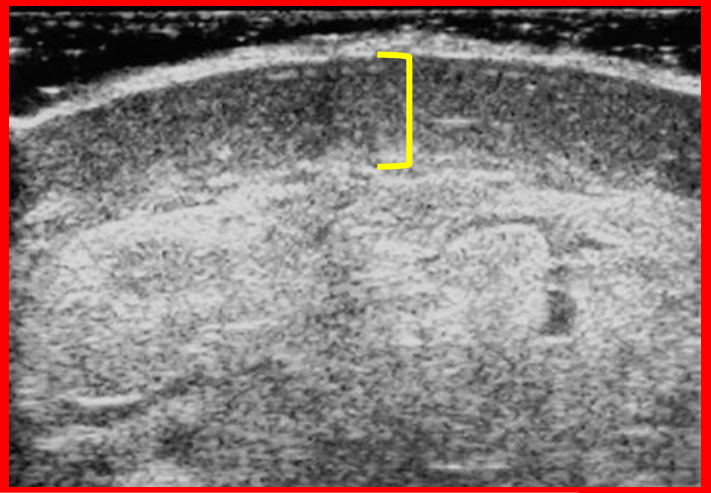
alberto.caggiati@uniroma1.it

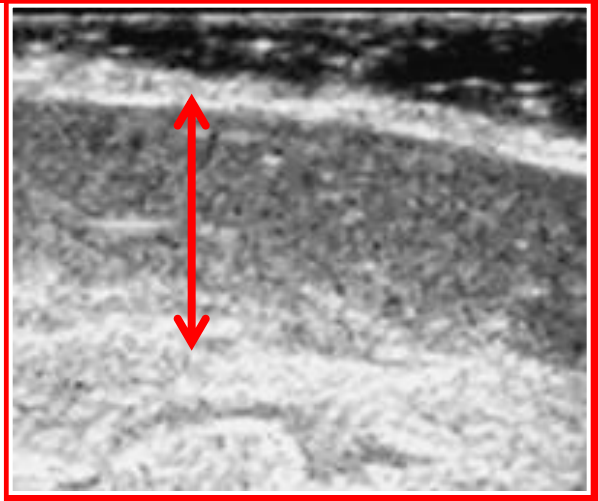
Two US patterns of “dermal edema”:



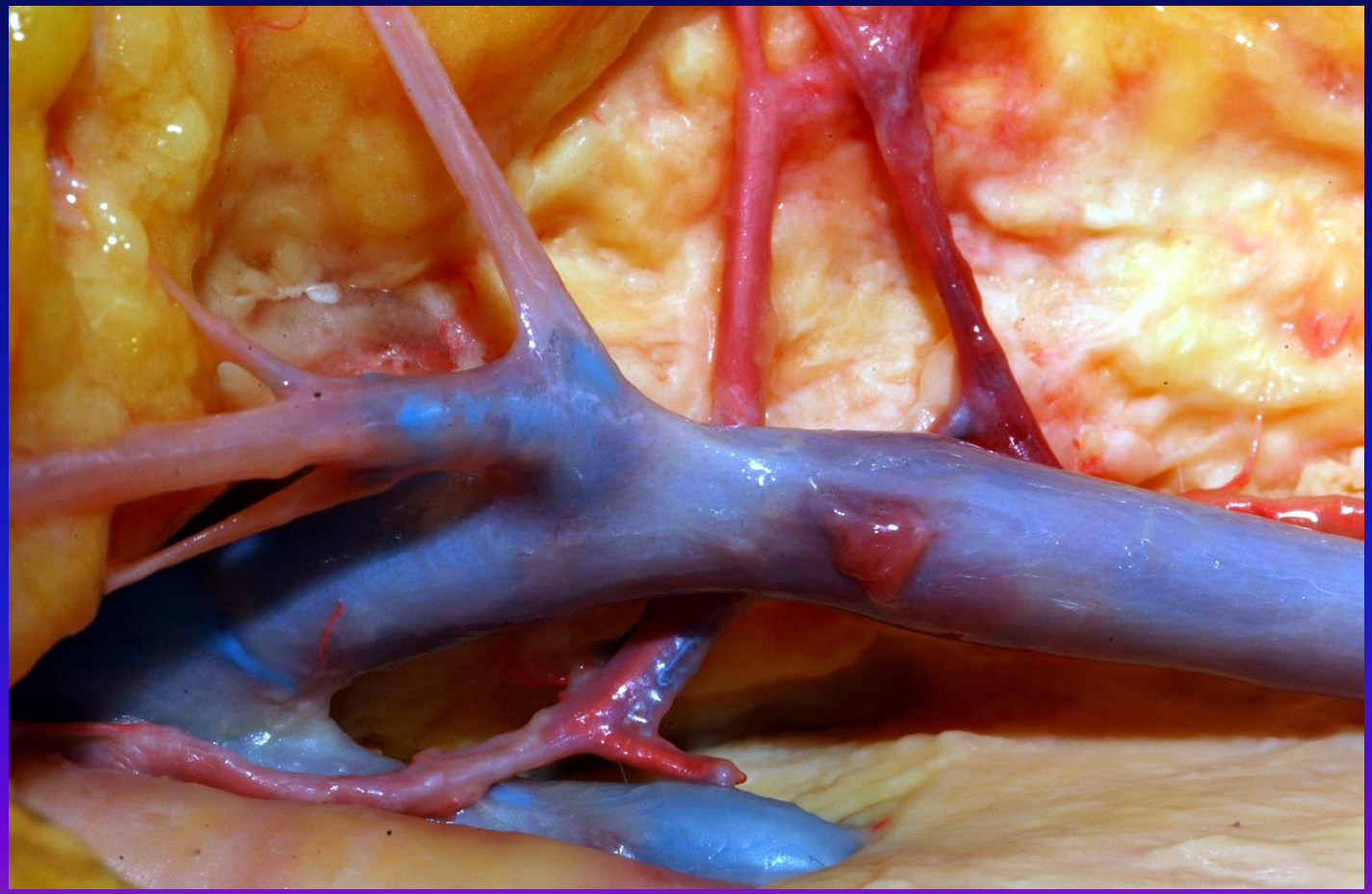
2. Reduced echogenicity of the whole dermis (not in C2 legs)







Valves and Saphenous Junctions



BY COURTESY OF G. GENOVESE

Giacomini’s anastomosis