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**Chief Executives, NHS Boards
Medical Directors, NHS Boards**

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Colleagues,

PROTOCOL FOR ACCESS TO VARICOSE VEIN SURGERY

This letter is to provide Boards with a Protocol for Access to Varicose Vein Surgery.

By way of background, a small working group of clinicians met at the end of 2018 to consider whether the degree of variation across NHSScotland in the provision of varicose vein surgery was appropriate, and whether a single set of objective criteria could be agreed as the basis of a NHSScotland protocol. The resulting protocol attached draws on but replaces guidelines currently being used in individual health boards.

Varicose vein surgery is a limited resource, and these criteria are based on what can realistically be offered by vascular surgery services across Scotland. The protocol specifies conditions for which treatment is not routinely offered by NHSScotland, and indications for referral and treatment.

I would be grateful if Boards could ensure that this protocol is shared with all Primary Care Practitioners through local integrated arrangements.

Yours sincerely,

Catherine Calderwood
Chief Medical Officer

Varicose vein surgery is a limited resource, and these criteria are based on what can realistically be offered by vascular surgery services across Scotland.

Conditions for which treatment is not routinely offered by NHSScotland

Varicose veins with no skin complications



Thread Veins



NHSScotland will not usually offer treatment for uncomplicated varicose veins or thread veins or where concern is principally cosmetic. Patients should be given the following advice:

- Avoid prolonged standing or sitting still
- Elevate legs when possible
- Use moisturiser if skin is dry, flaky or scaly
- Use support tights or compression stockings (consider if arterial disease assessment is required before using)
- Weight loss and exercise may reduce the risk of further varicose vein formation

Indications for referral (ie. where a referral may be made for assessment for suitability/ requirement for surgery)

Venous pigmentation

Varicose eczema



Lipodermatosclerosis



Venous ulceration



Bleeding

Thrombophlebitis requiring treatment with enoxaparin or demonstrated on ultrasound scanning

Indications for treatment (ie. when intervention may be offered)

Diagnosis of truncal thrombophlebitis
Reducing the progression of skin changes in patients with treatable superficial disease
Aiming to heal venous ulcers
Aiming to prevent recurrence of venous ulcers
Prevention of further bleeding episodes
Prevention of recurrent thrombophlebitis

Considerations for treatment

If BMI is significantly raised consider whether patient is appropriate for surgery: intervention may not be routinely offered to patients with a BMI of 30 or above because of the increased risk.