# Physical suffering in patients with venous disease

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
16/07/2019		☐ Protocol		
Registration date	Overall study status Completed	Statistical analysis plan		
23/07/2019		[X] Results		
<b>Last Edited</b> 28/05/2021	Condition category Circulatory System	[] Individual participant data		
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#### Plain English summary of protocol

Background and study aims

Superficial venous disease (SVD) is a very common disease and much research has been done towards finding the ideal treatment and discovering the pathophysiology of SVD. Not much is known about the psychological burden of SVD. Current guidelines and scientific publications tend to focus on clinical and physiological aspects of SVD. The aim of this study was to relate the changes in Quality-of-Life(QoL) after SVD treatment to possible changes in psychic distress (PD).

#### Who can participate?

Patients aged 18 years and older with SVD.

#### What does the study involve?

Patients with SVD are divided into two groups. One group is treated by sclerocompression therapy (SCT), the other using laser ablation (LA), radiofrequency ablation (RFA), or phlebectomy (PHL). Patients complete questionnaires to assess quality of life and mental health at baseline, 6- and 12-months.

What are the possible benefits and risks of participating?

Benefits: No direct benefits, but this research will improve future treatment of the condition.

Risks: None

Where is the study run from?

- 1. Zuyderland Medical Center
- 2. Maastricht University Medical Center
- 3. Centrum Oosterwal
- 4. Westfriesgasthuis
- 5. Braam Kliniek

All in the Netherlands

When is the study starting and how long is it expected to run for? January 2012 to December 2013

Who is funding the study? Investigator initiated and funded

Who is the main contact? Dr Tim Sigterman tsigterman@viecuri.nl

### Contact information

#### Type(s)

Scientific

#### Contact name

Dr Tim Sigterman

#### Contact details

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# Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

11-4-110

# Study information

#### Scientific Title

The relationship between psychic distress and impairment of disease-specific quality-of-life compared between sclerocompression therapy and invasive treatments in patients with superficial venous disease during a one-year follow-up

### Study objectives

We hypothesize that an increased clinical severity and impaired quality of life (QoL) in superficial venous disease (SVD) will also increase psychic distress (PD) and that an invasive intervention (group 2) will improve outcome compared to sclerocompression therapy (SCT) (group 1).

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 30/11/2011, Medical Ethical Committee of the Maastricht University Medical Center (P Debyelann 25, Maastricht, 6229 HX, The Netherlands; +31(0)43-387 65 43; secretariaat. mec@mumc.nl), ref: WMO/METC 11-4-110

#### Study design

Prospective cohort

#### Primary study design

Observational

#### Study type(s)

Quality of life

#### Health condition(s) or problem(s) studied

Varicose veins

#### **Interventions**

A prospective cohort was set up with the assistance of five specialized vein clinics in the Netherlands.

Patients were divided into two groups:

- 1. C1-C3 patients treated by SCT
- 2. C1-C6 patients treated invasively laser ablation (LA), radiofrequency ablation (RFA), phlebectomy(PHL)

Patients completed a disease-specific QoL questionnaire (CIVIQ-20) and a questionnaire to assess PD (HADS) at baseline, 6- and 12-months.

- C1-C6 refer to the visual classification of the severity of the SVD:
- C0 the lowest degree in severity, means that there is no sign of venous disease when looking at the leg
- C1 means that the person has spider or reticular veins when looking at the leg
- C2 means that varicose veins are present when looking at the leg
- C3 denotes the presence of edema (swelling) of the ankle. Best visualized from the back rather than the front.

C4a,b – includes pigmentation (darkening) of the skin, eczema (redness, itching),

lipodermatosclerosis (hardening of the soft tissues), and atrophie blanche (a whitish skin area)

- C5 means that a healed venous ulcer is present when looking at the leg
- C6 is the most severe category, means that an active open venous ulcer is seen on the skin

#### Intervention Type

Procedure/Surgery

#### Primary outcome(s)

Quality of life measured using the CIVIQ-20 questionnaire at baseline, 6- and 12-months

#### Key secondary outcome(s))

Depression and anxiety measured using the HADS at baseline, 6- and 12-months

#### Completion date

# **Eligibility**

#### Key inclusion criteria

- 1. 18 years of age or older
- 2. Fluent in Dutch language
- 3. C1 to C6 (CEAP) class intended to be treated with either laser(LA), radiofrequency ablation (RFA), phlebectomy(PHL) or sclerocompression therapy (SCT)

#### Participant type(s)

**Patient** 

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

18 years

#### Sex

All

#### Total final enrolment

442

#### Key exclusion criteria

Does not meet inclusion criteria

#### Date of first enrolment

01/01/2012

#### Date of final enrolment

31/12/2013

## Locations

#### Countries of recruitment

Netherlands

#### Study participating centre Zuyderland Medical Center

Henri Dunantstraat 5 Heerlen Netherlands 6459

#### Study participating centre Maastricht University Medical Center

Prof Debeyeplein 30 Maastricht Netherlands 6229

#### Study participating centre Centrum Oosterwal

Comeniusstraat 3 Alkmaar Netherlands 1817 MS

# Study participating centre Westfriesgasthuis

Maelsonstraat 3 Hoorn Netherlands 1624 NP

# Study participating centre Braam Kliniek

Zoom 10 Assen Netherlands 9405 PS

# Sponsor information

#### Organisation

Zuyderland Medical Center

#### **ROR**

https://ror.org/03bfc4534

# Funder(s)

#### Funder type

Other

#### **Funder Name**

Investigator initiated and funded

# **Results and Publications**

# Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are available from the general investigator, A. Krasznai akrasznai@zuyderland.nl on reasonable request

#### IPD sharing plan summary

Stored in repository

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		27/05/2021	28/05/2021	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes