



UIP NEWSLETTER

JULY 2024



Following the selection of **International Angiology** Journal as official UIP journal for the upcoming 4 years, the same UIP is delighted to announcing the 10 top many benefits in favor of all the member societies, starting from July 2024.

- 1) Significant cost saving for subscription and World Congress abstract publication
- 2) Free subscription for Tier 2 and 3 members
- 3) Free subscription for ALL member residents of whatever Tier.
- 4) Discount of 75% on printed copies.
- 5) Publication of the "Save the Date" of all meetings under UIP auspices.
- 6) Online sum up of the highlights from all meetings under UIP auspices.
- 7) Newsletter for the member societies, in several languages, containing highlights of the published issue.
- 8) International Angiology Journal award for the best UIP World Congress abstract: 1 k eur to be spent to attend another event under UIP auspices.
- 9) Bimonthly mailblast sent to all Publisher journals including angiology, general and internal medicine, nutrition, radiology, interventional radiology, endocrinology, cardiology, sports medicine to promote UIP desired contents and UIP positioning as THE World Organization dedicated to Vein and Lymphatics.
- 10) Possibility to subscribe individually in case the member Society does not subscribe.

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2. *Honour box:: Prof. Zbigniew Krasiński*
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4. *2025 UIP World Congress*
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INTERNATIONAL ANGIOLOGY: ACCESS

International Angiology, the *Official Journal of the International Union of Phlebology*, provides discount online journal access to members of UIP Member Societies.

- Tier 1* societies - €45.00 per member, including taxes for online access
- Tier 2 and 3 societies* - Free access
- Residents (Tier 1, 2 and 3) - Free access

Requests for access come directly from the Member Society for its members. If the member society does not wish to provide access, requests can come from individuals, providing they can provide proof of their membership status.

Accessing the Journal - UIP Member Societies

1. Download: The membership template spreadsheet from the UIP website:

<https://www.uip-phlebology.org/uip-official-journal>

DOWNLOAD

2. Email your completed spreadsheet to
International Angiology
journals.dept@minervamedica.it

Ensure you include the detail of the Member society requesting access.

EMAIL

3. Payment: The society receives an invoice for Journal Access from International Angiology

PAYMENT

4. Once paid, each individual member receives journal access instructions from *International Angiology*

ACCESS!

* UIP Tiers are defined by the UIP Constitution (Schedule 4), <https://www.uip-phlebology.org/constitution>



PROF. ZBIGNIEW KRASIŃSKI



*Prof. Zbigniew Krasiński,
Head of the Department of Vascular, Endovascular,
Angiological and Phlebology Surgery
Poznan University of Medical Sciences.*

Prof. Krasiński graduated (1993) with honours from the Faculty of Medicine of the Poznan University of Medical Sciences. While still a student, from 1991 to 1992, he was an assistant in the Department of Normal Anatomy. In 1993, he joined the Department of General and Vascular Surgery in Poznań. He holds a specialisation in general surgery (2000), a specialisation in vascular surgery (2003), clinical transplantology (2011) and angiology (2017). He received his PhD degree in 2000 based on a thesis entitled "Research on the pathogenesis of primary

varicose veins of the lower limbs". He and his colleagues were the first in Poland to introduce laser treatment of lower limb varicose veins and the use of deep system veins in arterial reconstructive surgery. He received his postdoctoral degree in 2008 based on a dissertation entitled. "*Studies on the structure and mechanical properties of veins and lower limbs used as material for arterial reconstruction*".

On 7 December 2011, he was awarded the title of Professor of Medical Sciences. He is an authority in the field of mechanical thrombectomy in the interventional treatment of venous thrombosis, CERAB surgery or treatment of carotid artery pathology.

Prof. Zbigniew Krasiński served as Vice-Dean for Science and Academic Degrees of the Faculty of Medicine II of the Poznan University of Medical Sciences from 2008 to 2012. From 2012 to 2019, he was a Dean of this faculty. In 2019-24 he was elected Vice-Chancellor of the Poznan University of Medical Sciences, and after this year's elections, from 1. September 2024 he will hold the honourable office of Rector of Poznan University for the term 2024-2028.

He is a provincial consultant in vascular surgery. He is the author of over 400 publications with a total IF of 340.

Prof. Krasiński is a member of the Society of Polish Surgeons, the Polish and European Societies of Vascular Surgery, the Polish Society of Angiology, and the European Association for Transluminal Surgery. He holds the honour of being President of the Polish Society of Phlebology and President-elect of the Polish Society for Vascular Surgery.

He also serves on the editorial committee of the Polish Surgical Review and sits on the Commission for the Evaluation of Science. He was awarded the Knight's Cross of the Order of Polonia Restituta.

ACADEMIC PHLEBOLOGY THROUGH MY EYES



Prof. Zbigniew Krasiński,
Head of the Department of Vascular,
Endovascular, Angiological and
Phlebology Surgery at the Poznan

I have been an academic teacher for over 30 years and I grew up at the time when the Polish Society of Phlebology and the Polish Society of Vascular Surgery were established. The authorities of these societies included great professors of surgery who created the foundations of modern surgery of the venous and arterial system in Poland. I have full confidence that phlebology and thousands of procedures performed in doctors' offices outside medical schools are very professional and well-conducted. However, I also feel that both scientific and technical progress, as well as the development of modern surgery, especially in the deep system, are related to university phlebology.

Basic research will probably never be conducted in private offices, and let me remind you that it often provides the basis for the development of, for example, modern pharmacology and therapy with phlebotropic drugs. Also, interventional techniques such as thrombolytic treatment, plastics and venous stenting are likely to remain the domain of large academic centres due to cost and technical requirements.

As a former dean of the Faculty of Medicine and currently a Rector of Poznan University of Medical Sciences, I cannot also mention the teaching role of academic units. Knowledge about the physiology and pathology of the venous system, including epidemiology, is and should be provided to students and young doctors.

A commercial approach may result in limited availability of treatment and phlebology teaching. That is why I am proud of the fact that the centre I manage develops this branch of vascular surgery and is recognized in Poland and Europe.

SPEAKER'S CORNER

ARTISTIC VEIN HEALING POWER



Dr Céline Eggen

Franciscus Gasthuis & Vlietland Hospital
De Blaak independent treatment center
both in Rotterdam, the Netherlands

As physicians in phlebology, our goal is to help our patients as good as we ultimately can. Part of that to me is that patients fully understand what the disorder entails, how we can treat it, and what they can do themselves to relieve the disorder.

My dream was to tell my story based on simple illustrations, as a picture literally says more than a thousand words. Since a compilation of these didn't exist yet, and creativeness runs in my family, I started drawing myself. I tried to grasp the main origins, disorders and treatments in our field in simple, plain illustrations. After my drawings were very well received by patients and colleagues, stating that they're very clear and although simple also beautiful, showing my passion for my profession, I decided to comprise these illustrations in a book: the Little Atlas of Phlebology. First only available in Dutch, but shortly thereafter in English as well. And even more translations on the way, so stay tuned! The atlas was my first creative outburst, but afterwards I started painting and loved it right away. Part of my artistic journey is painting legs.

As a phlebologist, it's my job to examine legs all day. It made me learn to see legs in all their beauty, which I also like to portray on a canvas: hommages to the leg.

I love how I can combine my profession with my art, to me it's a perfect way to aid in patient education, engagement of patients and professionals, and to make our beautiful profession more accessible to the public.

The Artistic Vein healing power.



For the vWINDonesia artistic vein project, an amazing initiative I fully support, I submitted a piece I created on varicose veins for the cover design of a friend's PhD thesis.

SPEAKER'S CORNER

OUTREACH FOR PHLEBO-LYMPHOLOGY IN UNDERSERVED AREAS



Dr Gisele Peron,
Vascular and Endovascular Surgeon
Mato Grosso, Brazil

Writing in the International Union of Phlebology (UIP) Speaker Corner is such a privilege and honored for which I'd like to start by thanking for this outstanding opportunity.

I'm Gisele Peron, Vascular and Endovascular surgeon from Mato Grosso, in Brazil, where I practice both arterial and venous work, being therefore exposed to the whole spectrum of the complexity of this region. This is particularly evident in the underserved rural area of our wonderful but also heterogenous country that is as big as a continent. I would like to take this great opportunity to share about the scenario and the work that we are developing in public hospitals and critical care points in the north of the state of Mato Grosso, Brazil.

Due to its large demographic size and incredible preserved natural landscapes, Brazil has rural communities with difficult access to specialized medical care, health information and resources. Getting to these points of care for some patients who live far away can be difficult, since the roads aren't all paved, and sometimes it's necessary to use airplanes and ferries. This takes time and resources, as patients sometimes travel for days to get specialized care. This has a tremendous impact on the management of the most severe stages of

chronic venous disease, as testified by patients suffering the burden of ulceration for decades more than "just" for months.

The epidemiological profile of our patients has some particularities and similarities with the general profile of patients with venous and lymphatic disease. The majority of patients are female, of advanced age, overweight, working all their lives in manual labor, and standing up. We have a birth rate in the state of 2 children per family, but in the rural region this number increases up to 6 kids per family. Due to a lack of education and knowledge, they seek care at an advanced stage or with complications from the disease. We also have a high incidence of secondary infections from diseases prevalent in the region, such as leprosy and leishmaniasis. Further complicating the situation for these patients.

Venous and lymphatic diseases are a health problem with serious social impact, not only for the patient, but for their families, community and public health.

Our specialized services are provided in two central hospitals, with two teams taking turns, one vascular surgeon at a time, draining over twenty cities as well as indigenous reservations, the population covered is around 440.00 habitants. Three hundred appointments that can be made for monthly consultations in Sinop and two hundred in Colíder. Even with the high demand, only 16–20 varicose vein treatment procedures are carried out each month, leading to a waiting list of approximately eighteen months for consultation and 24 months for varicose vein surgery.

SPEAKER'S CORNER

OUTREACH FOR PHLEBO-LYMPHOLOGY IN UNDERSERVED AREAS

by Gisele Peron

If we take an in-depth look at the situation of the population, the health professionals involved and the conditions of the public health system, we can find a number of unmet needs, such as:

- Healthcare misinformation, which leads patients to delay seeking for specialized care or even use incorrect practices to improve their health;
- Limited economic resources
- Availability to find specialized professionals to work in remote areas, causing long lines to access specialized care: whether for consultation, Doppler or surgery;
- Public vein-lymphatic awareness;
- High operating costs of devices to improve treatment;
- Lack of professional knowledge about venous and lymphatic diseases;



We have noticed that these needs are attracting the attention of global organizations, and we can identify projects and actions to help address these needs. For this reasons we look at the upcoming v-HELP Mato Grosso humanitarian and educational mission with great enthusiasm and, on behalf of our professional and patients population I thank once again deeply the UIP for the opportunity of this speaker corner contribution and I hope you won't hesitate to contact me for further information on the topic (dragiseleperon@gmail.com).



Hospital Regional de Colíder, a reference in the region for 6 cities and indigenous reservations in the region, with an average of 200 vein patients per month.

UIP 2025: BUENOS AIRES, ARGENTINA



YOUR WISHES FOR UIP 2025



Planning has begun for the **UIP World Congress in Buenos Aires in 2025.**

Start thinking now about what **YOU** would like to see at the Congress, as we will be releasing our **"Wishing Box"** for your suggestions.



UIP 2025: BUENOS AIRES, ARGENTINA



Host City

Buenos
Aires

UIP 2025: BUENOS AIRES, ARGENTINA

GETTING TO BUENOS AIRES



Buenos Aires 2025

Ministro Pistarini International Airport, (Ezeiza)

Biggest airport in Argentina
32km away from the city

Jorge Newbery Airport (Aeroparque)

Located in the city
Within 25 minutes of the main hotels

Cruise Terminal

One of the most important in the region
Located in the city

Ferry Terminals

Regular services between Buenos Aires -
Montevideo and Colonia (Uruguay)
Located in the city

FLIGHTS FROM **+461** CITIES AROUND THE WORLD

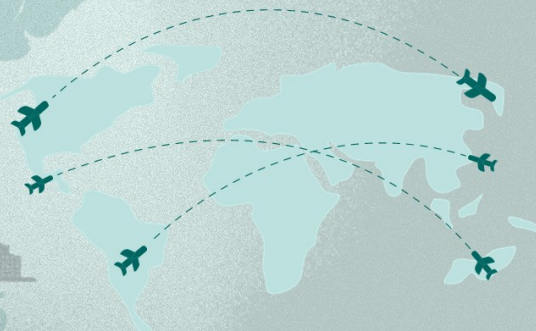
TOP 10 DESTINATIONS

AMERICAS

SANTIAGO DE CHILE
SAN PABLO
RIO DE JANEIRO
LIMA
MIAMI
BOGOTA
PANAMÁ
ASUNCIÓN
MONTEVIDEO
MÉXICO D.F.

EUROPE, AFRICA AND ASIA

MADRID
LONDON
AMSTERDAM
FRANKFURT
PARIS
ROME
BARCELONA
ADDIS ABABA
ISTAMBUL
ZURICH



GETTING AROUND THE CITY



Buenos Aires 2025

Bus Network

+340 different routes

Subway

6 subway lines connecting the whole city
+90 stations
Quickest way to move around the city

Train

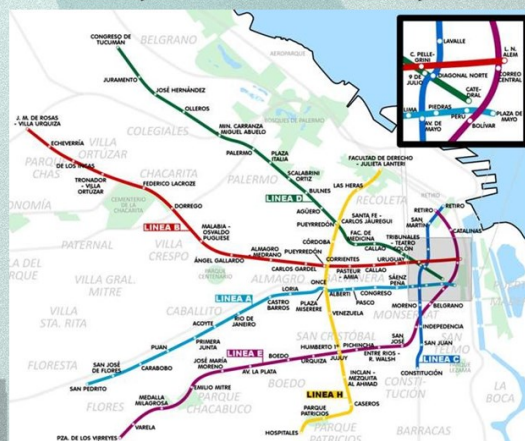
Mostly used to go to Greater Buenos Aires area

Taxi and multi-mobility platforms (Uber, Cabify)

+38.000 taxis
Mobility Apps are available in the whole city

Cycling

Network of cycle lanes all over the city
City bike-share program free



Venous valve hypoxia as a possible mechanism of deep vein thrombosis: A scoping review

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<https://doi.org/10.23736/s0392-9590.24.05170-8>

ABSTRACT

Introduction: The pathogenesis of deep vein thrombosis (DVT) has been explained by an interplay between a changed blood composition, vein wall alteration, and blood flow abnormalities. A comprehensive investigation of these components of DVT pathogenesis has substantially promoted our understanding of thrombogenesis in the venous system. Meanwhile, the process of DVT initiation remains obscure. This systematic review aims to collect, analyze, and synthesize the published evidence to propose hypoxia as a possible trigger of DVT.

Evidence acquisition: An exhaustive literature search was conducted across multiple electronic databases including PubMed, EMBASE, Scopus, and Web of Science to identify studies pertinent to the research hypothesis. The search was aimed at exploring the connection between hypoxia, reoxygenation, and the initiation of Deep vein thrombosis (DVT). The following key words were used: "deep vein thrombosis," "venous thrombosis," "venous thromboembolism," "hypoxia," "reoxygenation," "venous valve," and "venous endothelium." Reviews, case reports, editorials, and letters were excluded.

Evidence synthesis: Based on the systematic search outcome, 156 original papers relevant to the issue were selected for detailed review. These studies encompassed a range of experimental and observational clinical research, focusing on various aspects of DVT, including the anatomical, physiological, and cellular bases of the disease. A number of studies suggested limitations in the traditional understanding of Virchow's triad as an acceptable explanation for DVT initiation. Emerging evidence points to more complex interactions and additional factors that may be critical in the early stages of thrombogenesis. The role of venous valves has been recognized but remains underappreciated, with several studies indicating that these sites may act as primary loci for thrombus formation. A collection of studies describes the effects of hypoxia on venous endothelial cells at the cellular and molecular levels. Hypoxia influences several pathways that regulate endothelial cell permeability, inflammatory response, and procoagulation activity, underpinning the endothelial dysfunction noted in DVT.

Conclusions: Hypoxia of the venous valve may serve as an independent hypothesis to outline the DVT triggering process. Further research projects in this field may discover new molecular pathways responsible for the disease and suggest new therapeutic targets.

(Cite this article as: Shaydakov ME, Diaz JA, Eklöf B, Lurie F. Venous valve hypoxia as a possible mechanism of deep vein thrombosis: a scoping review. *Int Angiol* 2024;43:309-22. DOI: 10.23736/S0392-9590.24.05170-8)

Key words: Venous thrombosis; Venous thromboembolism; Hypoxia; Venous valves; Vascular endothelium.

Risk factors related to venous thromboembolism in pregnant women: A meta-analysis

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<https://doi.org/10.23736/s0392-9590.24.05141-1>

ABSTRACT

Introduction: The aim of this paper was to make a preliminary analysis of the risk factors related to venous thromboembolism (VTE) in pregnant women by Meta-analysis.

Evidence acquisition: Three databases including PubMed, Web of Science, and The National Library of Medicine (NLM) were systematically searched from their establishment to January 1, 2023, and the obtained data were statistically analyzed using RevMan5.3 software.

Evidence synthesis: A total of 10 studies were included, involving 22 risk factors, of which 16 were included for further analysis. Meta analysis showed that cesarean section (OR=2.05, 95%CI: 1.71, 2.47, P=0.007), gestational diabetes (OR=1.17, 95%CI: 1.09, 1.27, P<0.001), eclampsia or preeclampsia (OR=1.88, 95%CI: 1.42, 2.49, P< 0.001), obesity (OR=1.19, 95%CI: 1.04, 1.86, P=0.028), twin or multiple pregnancy (OR=2.34, 95%CI: 1.46, 3.76, P<0.001), chronic heart disease (OR=3.59, 95%CI: 3.28, 3.92, P<0.001), and blood transfusion history (OR=3.20, 95%CI: 2.78, 3.68, P<0.001) were risk factors for VTE in pregnant women.

Conclusions: Existing evidence suggests that cesarean section, gestational diabetes, eclampsia or preeclampsia, obesity (body mass index ≥ 30 kg/m²), twin or multiple pregnancy, chronic heart disease, and blood transfusion history may be risk factors for VTE in pregnant women. In clinical practice, the evaluation and management of VTE should be strengthened, and a model for clinical prediction of VTE can be established to provide a reference for the prevention of VTE.

(Cite this article as: He L, Liu J, Sun R, Qiu L, Tang L, Gao Y. Risk factors related to venous thromboembolism in pregnant women: a meta-analysis. *Int Angiol* 2024;43:323-30. DOI: 10.23736/S0392-9590.24.05141-1)

Key words: Pregnant women; Venous thromboembolism; Risk factors; Meta-analysis.

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Comparative analysis of VenaBlock and VenaSeal Systems for catheter-guided endovenous cyanoacrylate closure in treating chronic venous insufficiency of the lower extremity: effectiveness and feasibility

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<https://doi.org/10.23736/s0392-9590.24.05143-5>

ABSTRACT

Cyanoacrylate adhesive closure (CAC) systems are widely used to treat varicose veins. In terms of efficacy and safety, these nonthermal, non-tumescent methods are noninferior to endovenous thermal ablation techniques. However, no published studies have compared products that use CAC systems. VenaSeal® (Medtronic, Santa Rosa, CA, USA) and VenaBlock® (Invamed) are the most commonly used CAC-based products worldwide. This study aimed to focus on the efficacy of these two commonly used products, with little emphasis on safety. Published full-text articles on the VenaBlock® and VenaSeal® systems were searched. Data for each product were evaluated by comparing them with each other in terms of effectiveness. In total, 1882 extremities from 11 studies using VenaBlock® and 524 extremities from eight studies using VenaSeal® were included and compared. Both devices were effective, and their cumulative recanalization-free survival rates were similar ($P=0.188$) at the 6-, 12-, 24-, 36-, and 60-month follow-ups. Both products improved the venous clinical severity score (VCSS) and quality of life (QoL) scores. VenaBlock® and VenaSeal® are effective in terms of cumulative recanalization-free survival rates, and no significant difference was found between the two groups ($P=0.188$). Both significantly improve the VCSS and QoL scores. CAC is feasible for the treatment of varicose veins.

(Cite this article as: Bozkurt AK, Balkanay OO, Dinc R. Comparative analysis of VenaBlock and VenaSeal Systems for catheter-guided endovenous cyanoacrylate closure in treating chronic venous insufficiency of the lower extremity: effectiveness and feasibility. *Int Angiol* 2024;43:331-41. DOI: 10.23736/S0392-9590.24.05143-5)

Key words: Varicose veins; Ablation techniques; Quality of life.

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Relationship between body figure and stump length in cyanoacrylate closure of varicose veins

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<https://doi.org/10.23736/s0392-9590.24.05174-5>

ABSTRACT

Background: Recurrence of incompetent saphenous veins after treatment is associated with remnant reflux to the branches close to the saphenofemoral or saphenopopliteal junctions, which originate from the residual patent stump after saphenous vein treatment. This study aimed to determine the factors affecting residual stump length after cyanoacrylate closure.

Methods: This retrospective study used prospectively collected data of patients who underwent cyanoacrylate closure. Postoperative Duplex scanning was performed to evaluate occlusion of the target vein, stump length, and the presence of endovenous glue-induced thrombosis. The clinical outcomes and patient characteristics were also evaluated.

Results: Seventy procedures for incompetent saphenous veins were performed in 67 limbs of 47 patients. The average patient age was 43 (range, 43-89) years; 34 (72%) were female patients. Target vein occlusion was achieved in all patients and endovenous glue-induced thrombosis occurred in 1.5 % of patients. The mean stump length was 18.3 mm. Total occlusion from the junction was observed in 13 vessels (19%). Particularly, higher total occlusion rate was found in treatments of the small saphenous vein compared with those of the great saphenous vein (GSV). In 6 GSV treatments, longer stumps (>45 mm) remained. Those with a stump >45 mm were all female patients, with significantly shorter height and higher Body Mass Index compared with those with stump lengths <45 mm.

Conclusions: Body figure should be considered when performing cyanoacrylate closure to treat insufficient saphenous varicose veins. However, further investigations are to be warranted.

(Cite this article as: Akagi D, Murase K, Tabuchi A. Relationship between body figure and stump length in cyanoacrylate closure of varicose veins. *Int Angiol* 2024;43:342-7. DOI: 10.23736/S0392 9590.24.05174-5)

Key words: Varicose veins; Cyanoacrylates; Saphenous vein; Somatotypes.

INTERNATIONAL ANGIOLOGY ABSTRACTS

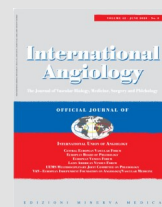


Click on the link to
access the abstract!

Contemporary open surgical approaches for the management of carotid stenosis: a comprehensive review

Authors: Jácome F, Costa-Pereira T, Dionísio A, Sousa J, Coelho A, Mansilha A

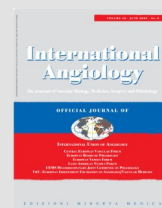
<https://doi.org/10.23736/S0392-9590.24.05228-3>



Femoro-popliteal bypass versus remote endarterectomy: a propensity matched analysis

Authors: Shoraan SB, Gostev AA, Osipova OS, Cheban AV, Ignatenko PV, Starodubtsev VB, Karpenko AA

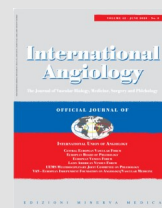
<https://doi.org/10.23736/s0392-9590.24.05216-7>



Specificities of primary and secondary prevention of lower extremity artery disease: introduction to a series of reviews

Authors: Poredoš P, Paraskevas KI, Mikhailidis DP, Stanek A, Jawien A, Antignani PL, Blinc A

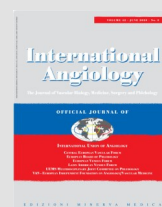
<https://doi.org/10.23736/s0392-9590.24.05241-6>



Mid-term outcomes of sartorius flap reconstruction in groin infection following vascular procedures or intravenous drug injections

Authors: Troisi N, Bertagna G, Artini V, Dalla Caneva P, Scarati V, Adami D, Michelagnoli S, Berchiolli R

<https://doi.org/10.23736/s0392-9590.24.05263-5>



UIP MONTH 24



an **OPEN TO EVERYONE** zoom @
10 am NYC time - 4 pm Rome time – 9 pm Bangkok time
to hear **YOUR vision, YOUR ideas, YOUR needs**
and to remember that

UIP starts with «U»



for YOUR topic reservation please write to president@uipmail.org.

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>

Meeting ID: 889 1360 5824

Passcode: 916415

YOU



YOU

On behalf of all the International Union of Phlebology (UIP), I'd like to bring to all the healthcare professionals and the public attention the **UIP March 24 initiative**.

UIP was founded on March 24, 1959 and in the following 64 years it has been surely succeeding in bringing the vein & lymphatic world together, counting now on 81 Scientific Societies from all continents.

In order to honor **UIP March 24, 1959** birthday, every 24 of the month at 4 pm Rome time, myself and eventually available Executive Committee members will have an open to everyone zoom call where all the vein-lymphatic world and the public are invited to join to present their vision, ideas and eventual needs.

This glimpse of the current Phlebo-Lymphology around the world will provide the opportunity to analyze how the UIP can serve at best its member societies, while advocating for both colleagues and patients independently by their belonging or not to the UIP.

It's the UIP hope that you will like to take part in this initiative, so to develop together "present actions" while looking together at the brightest future.

Pre-submitted topics for discussion will have precedence in the hour dedicated to this initiative: in case, feel free to send yours at president@uipmail.org.



UIP MONTH 24

The zoom call will be recorded so to allow everyone to enjoy the content on demand in case.

Looking forward for demonstrating together that **UIP starts with “U”**, UIP looks forward for **listening to “U”** at this zoom link:

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>

Meeting ID: 889 1360 5824 Passcode: 916415

Whatever need, do not hesitate to reach out to me (gnssrg@unife.it ; t. +393498012304)



UIP Executive Committee 2022-2025



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UIP 2023-2027 president



EVENTS UNDER THE AUSPICES OF THE UIP

4TH KAZAKHSTAN VENOUS FORUM

IV KVF

ҚАЗАҚСТАН ВЕНОЗДЫҚ ФОРУМЫ
КАЗАХСТАНСКИЙ ВЕНОЗНЫЙ ФОРУМ
KAZAKHSTAN VENOUS FORUM

9-10

тамыз | августа | august 2024
Kazakhstan, Almaty

Организатор:
Organizer:

Генеральный спонсор:
General Sponsor:

Золотой спонсор:
Golden Sponsor:

Серебряный спонсор:
Silver Sponsors:

Конференс-оператор:
Conference operator:



The **4th Kazakhstan Venous Forum (KVF)** is held on the initiative of the Kazakh Society of Phlebology and will take place on **August 9-10, 2024** in Almaty, Kazakhstan. The Kazakhstan Venous Forum is held once every two years.

The goal of the KVF is to increase the scientific, educational and practical level of Kazakhstani doctors in the field of phlebology, conduct training in new methods of diagnostics of surgical and endovascular treatment, pharmacotherapy, compression therapy for venous diseases, exchange scientific and practical experience with phlebologists from many countries.

Program issues addressed at the conference: Venous thrombosis and pulmonary embolism, prevention of venous thromboembolic complications, treatment of chronic venous diseases, congenital venous pathology, pelvic venous disorders, lymphedema, drug therapy of CVD, thermal ablation of varicose veins, non-thermal ablation of varicose veins, sclerotherapy, compression therapy, aesthetic phlebology. 12 scientific and educational sessions are planned.



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4TH KAZAKHSTAN VENOUS FORUM

Организатор



Конгресс-оператор



IV KVF

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Kazakhstan, Almaty



The city where the Forum is held is Almaty - the largest city and the most important cultural, historical, financial and economic center of Kazakhstan with a population of more than 2 million people.

The name of the city, from the Kazakh language, sounds like the Father of Apples. And all because Almaty, almost from the beginning of its existence, was surrounded and filled with apple orchards. And to this day the apple is considered an unrivalled symbol of the city.

The mountains in the vicinity of Almaty are a real pearl of Central Asia and are only 15-20 minutes away from the city by car. After all, wherever you look, there are majestic mountains and magnificent Tien Shan spruce trees all around... Ski resorts, high-mountain hotels, and restaurants welcome lovers of active recreation all year round. Many hiking routes, climbing mountain peaks, rafting on mountain rivers, all this is possible if you find yourself in the mountains. In Almaty, not only the mountains fascinate... Everyone who comes to the "Southern Capital" of Kazakhstan cannot help but admire its unique appearance - its green outfit, cascades of fountains of various types, straight and wide streets, numerous parks and squares, unique buildings and fantastically hospitable residents.

Enjoy the magnificent mountains and wonderful atmosphere of Almaty!



EVENTS UNDER THE AUSPICES OF THE UIP

ANOTHER PHLEBOLOGY 4TH INTERNATIONAL WORKSHOP

and

13th Balkan Venous Forum meeting

With the support of **UIP**

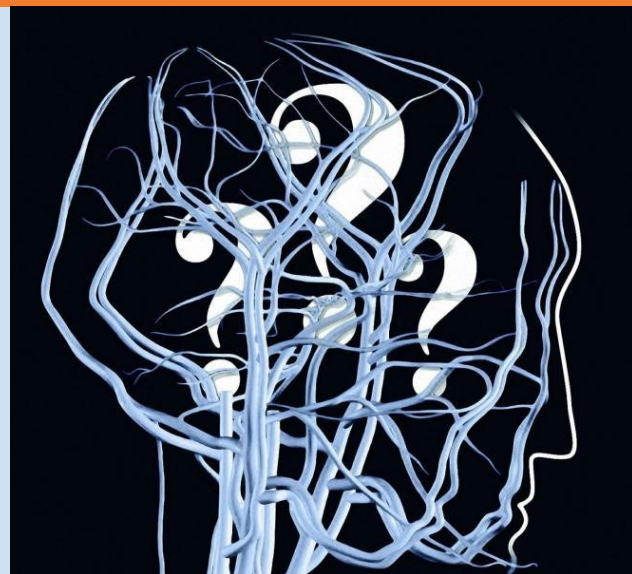
4-5 October 2024

Hotel Mercure Budapest Castle Hill, Budapest, Hungary

New observations and modifications in the field of phlebology

Prof. Imre Bihari and Prof. Sergio Giancesini

Chairs of the Workshop



Dear Colleagues,

It is our great pleasure **to invite** you to *Budapest* to participate in the 4th International Workshop called *Another Phlebology*.

This title dates back to times when new methods like ultrasound diagnostics and endovenous interventions were introduced. These techniques made significant changes in our discipline so it has become *another phlebology*. We stick to this title because the development hasn't stopped.

We are focusing on *new observations and personal modifications* than repeating well-known results. *We welcome your own ideas, instruments, diagnostic and treatment techniques, tips, experience and surveys* in everyday practice. The aim is to encourage you to develop and show *your new or alternative ideas and techniques*, not to denigrate them, because there have been too many misjudgments in the history of science. *Preliminary reports* can also be accepted for presentation. Discussions are important parts of our meetings.

We, the audience together with each presenter will introduce a new evaluation score system the **novelty factor**. This will help us to find the best paper which will be **awarded by a prize**.

Main topics: Open, CHIVA and ablative surgery (laser, radiofrequency, steam, glue, microwave, cryo and any other techniques), sclerotherapy, foam sclerotherapy, aesthetic phlebology, conservative treatment, valve issues and solutions, VTE, post thrombotic issues, crural ulcer.



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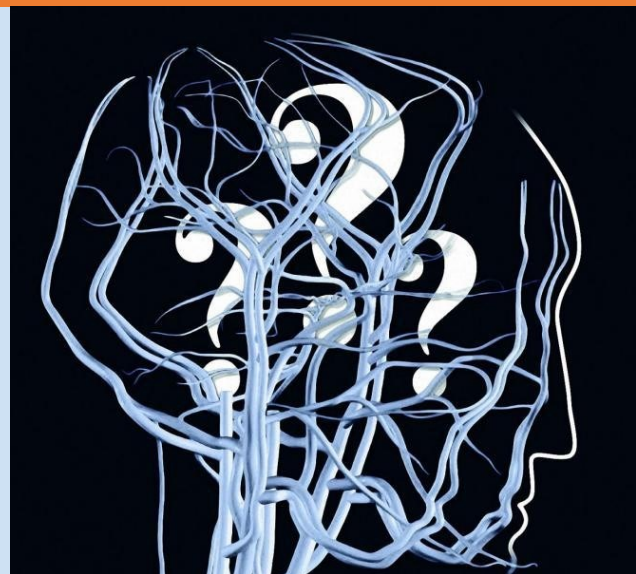
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Experiences of our former meetings: friendly atmosphere, we know each other (or will by the end of the meeting). Colleagues are present who like to *teach and learn* new ideas. Many of us are from Hungary or from surrounding countries. Not as expensive as other international meetings.

We look forward to seeing you in Budapest, which is a busy city with several faces, so you will find some ways to relax. Usually the Parliament, the Gellert hill, the Castle district, the Opera house and the Rock Hospital are recommended, but you can find several other interesting places.

Abstract deadline 15 June 2024

Please send your email address if you are interested in the meeting. We welcome to receive the title of your presentation(s) if you have one.

imre.bihari.dr@gmail.com

Further information: www.phlebology.hu



OTHER UPCOMING EVENTS

One of the main UIP visions is to **promote productive relationships among societies**. With this vision, we report both **events with UIP auspices and events without**, so to inform everyone about possible educational activities. The hope is also to offer a tool useful for the colleagues organizing future meetings, so to avoid overlapping among events.

For more information about events visit: <http://www.uip-phlebology.org/events>

If you would like your event to appear in the UIP Newsletter, contact us at communications@uipmail.org

EVENTS CALENDAR

AUGUST 2024

4th Kazakhstan Venous Forum

9-10 AUGUST 2024

ALMATY, KAZAKHSTAN

OCTOBER 2024

Another Phlebology

4th International Workshop & 13th Balkan Venous Forum meeting

4-5 OCTOBER 2024

BUDAPEST, HUNGARY

OCTOBER 2024

XVI International Congress of Phlebology and Lymphology and 3° National Wounds Congress AMFYL 2024

16 - 19 OCTOBER 2024

LEON, GUANAJUATO, MEXICO

OCTOBER 2024

vWINDONESIA Congress

22-26 OCTOBER 2024

BALI, INDONESIA

NOVEMBER 2024

AFLIPBA IV Provincial Conference

15-17 NOVEMBER 2024

CARILÓ, ARGENTINA

APRIL 2025

World of Phlebology in Prague

22-25 APRIL 2025

PRAGUE, CZECH REPUBLIC

UIP SOCIETY MEMBERSHIP: BENEFITS

Did you know that as a member of UIP Society you can have access to different benefits?

- ✓ Access to **International Angiology** -
(Free access for medical residents and for Tier 2 and 3 society members)*
- ✓ Access to **UIP Education Modules** (Free access for Tier 2 and 3)*
- ✓ Access to **latest news, UIP Newsletter**
- ✓ Access to **UIP Discussion Forums**

**Tier: refers to the category of membership. If unsure about the classification of your country, please check on our website.*

Accessing the Member Portal

1. Contact your society and ask them to add your name to the members of the UIP website.
2. The society uploads a membership list through their society page (Instructional Videos available online).
3. You will receive an email confirming your username and password.

International Angiology

The Journal of Vascular
Biology, Medicine, Surgery &
Phlebology



Let your society know if you
require International Angiology
access*.

**fees apply for Tier 1 countries*

UIP Education Modules

Accessing the UIP Education
Modules



1. Go to the **Online Education page**.
2. Click "**Enrol Now**".
3. Complete the forms with the information requested.

UIP Discussion Forums

Accessing the UIP Discussion
Forums



1. Log in the UIP website with your username and password.
2. Access the Discussion Forum through the member portal.



UIP ANNOUNCEMENTS

INVITATION FOR NEWSLETTER CONTENT

UIP SPEAKER BOX

The UIP is delighted to offer all its members to report a comment in future editions of the UIP newsletter. Topics can be related to evidence based science, phlebology advancement, problem solving in clinical practice. If you are interested in submitting a comment, send a 300 word summary to:

communications@uipmail.org

SPONSORSHIP OPPORTUNITIES

The UIP welcomes sponsorship for its newsletter from Industry. If you are interested in placing and advertisement or sponsoring the UIP newsletter, please contact us at:

execdirector@uipmail.org

ABOUT US



The UIP Newsletter has been produced and distributed from Australia and Argentina, with the contribution of the members of the UIP.

The UIP Newsletter Editor is Gabriela Sfarcich from Argentina.



SOCIAL MEDIA

Keep in touch!

Follow our social media accounts and make sure you will be notified of updates, deadlines and important news!

Advertising opportunities are available, and contributions and enquiries are welcome!

