



REVIEWER'S REPORT

Manuscript No.: IJAR- 50487

Date: 28/02/2025

Title: "A Study of Clinical Features, Evaluation, and Surgical Management of Varicose Veins of Lower Limbs"

Recommendation:

- ✓ Accept as it is
- Accept after minor revision.....
- Accept after major revision
- Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality	✓			
Techn. Quality		✓		
Clarity		✓		
Significance		✓		

Reviewer Name: Dr. S. K. Nath

Date: 02/03/2025

Reviewer's Comment for Publication:

This study successfully evaluates the clinical features, surgical management, and short-term outcomes of varicose veins of the lower limbs, confirming that surgical interventions provide excellent results with minimal complications. The findings align with global research on varicose veins, supporting the use of subfascial perforator ligation and stripping as effective surgical treatments.

However, long-term follow-ups, comparisons with non-surgical treatments, and expanded multi-center studies are needed to validate these results on a larger scale. Addressing recurrence rates, socioeconomic impacts, and alternative treatments will provide a more comprehensive understanding of varicose vein management.

This research provides valuable insights for vascular surgeons, general practitioners, and policymakers in improving varicose vein treatment protocols. Future studies should incorporate long-term patient monitoring, cost analysis, and technological advancements (e.g., laser therapy, radiofrequency ablation) to further enhance treatment efficacy and patient outcomes.

Reviewer's Comment / Report

This research paper presents a prospective interventional study on varicose veins of the lower limbs, conducted at Basaveshwar Teaching and General Hospital, attached to Mahadevappa Rampure Medical College, Kalaburagi. The study spans from August 2022 to January 2024, evaluating 50 patients diagnosed with primary varicose veins.

The study aims to:

- Assess clinical presentations of varicose veins, including pain (86%), edema (52%), and ulceration (10%).
- Identify risk factors, with prolonged standing occupations (52%) being the most significant.
- Analyze surgical management outcomes, with the most common procedures being subfascial perforator ligation (94%) and saphenofemoral flush ligation (50%).
- Evaluate postoperative complications, where 18% of patients experienced minor complications (wound infection, thrombophlebitis, hematoma), but no life-threatening events were recorded.

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Key Strengths of the Study

- 1. Well-Structured Clinical Evaluation:** The study provides detailed data on clinical symptoms, risk factors, and diagnostic findings (e.g., ultrasound results showing perforator incompetence in 92% of cases). The male-to-female ratio (7.3:1) aligns with previous literature indicating higher prevalence in males due to occupational hazards.
- 2. Comprehensive Analysis of Surgical Techniques and Outcomes:** The study compares different surgical procedures, such as saphenofemoral flush ligation, vein stripping, and subfascial perforator ligation, to assess efficacy. Postoperative complications were minimal, with no recurrence or mortality within the three-month follow-up period.
- 3. Comparison with Existing Literature:** The study includes comparative analyses with previous research, such as studies by Malhotra, Callam, and Labropoulos, confirming similar trends in age distribution, clinical presentation, and surgical outcomes.
- 4. Use of Doppler Ultrasound for Diagnosis:** The study emphasizes the role of Doppler ultrasound in identifying venous incompetence, making it a crucial tool for preoperative planning and recurrence prevention.

Limitations of the Study

- 1. Limited Sample Size and Single-Center Data:** The study only includes 50 patients from a single hospital, limiting its generalizability to a broader population. A multi-center study with a larger sample size would provide stronger statistical significance.
- 2. Short Follow-Up Duration:** The three-month follow-up period is too short to evaluate long-term recurrence rates or chronic complications. Future studies should include long-term follow-ups (1-5 years) to assess vein recurrence and post-surgical quality of life.
- 3. Lack of Non-Surgical Management Comparisons:** The study focuses primarily on surgical interventions but does not compare outcomes with conservative treatments such as compression therapy, sclerotherapy, or endovenous ablation. Including non-surgical treatment outcomes would enhance the study's clinical applicability.
- 4. Limited Discussion on Socioeconomic Impact:** While prolonged standing occupations were identified as a major risk factor, the study does not explore the economic burden of varicose veins on affected individuals (e.g., lost workdays, reduced productivity). Future research should include quality-of-life assessments and cost-effectiveness analyses.