

A DISCUSSION WITH:

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A TRANSCRIPTION OF THE VIDEO:

## Diagnosing Concurrent CVI and Lymphedema: Phlebolymphe<sup>d</sup>ema

*If you look at a patient who has chronic venous insufficiency, who comes new to the office, and I am doing an evaluation of swelling, typically that is where it is. Now they may have overt varicose veins and they may not. So the way I approach the patient is the symptom and the signs. So the symptom is pain maybe, or heaviness and swelling. So that's where you start, right? Then you're going to evaluate, do they have chronic venous insufficiency and do they have concurrent lymphedema. And you'll look for the signs and symptoms of both of those. In terms of chronic venous disease, there's going to be hyperpigmentation, pitting edema, overt large varicose veins, coronal at the ankle, those kinds of things. In terms of lymphedema, you're going to see initial pitting; you may or may not see a stem or ??? ready. That might relate to some fibrosis that's going on. You may see a start of some exhibitus changes that can let you know that there's excess fluid in the interstitium. So, these are sort of the early signs where I think okay, it's worth evaluating you more than just prescribing initial compression, leg elevation, etc. And that's where I start in terms of the evaluation both for treatable venous disease as well as treatable lymphedema.*