

Accuracy of Transvaginal Duplex Ultrasound Compared to Catheter Venography for the Identification of Pelvic Vein Incompetence in Patients with Chronic Pelvic Pain

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Background

Chronic Pelvic Pain

Pelvic Vein Incompetence

Current Diagnostic Methods

Study Objective: To establish the diagnostic accuracy of TVD in women with suspected PVI compared to catheter venography.

Methods

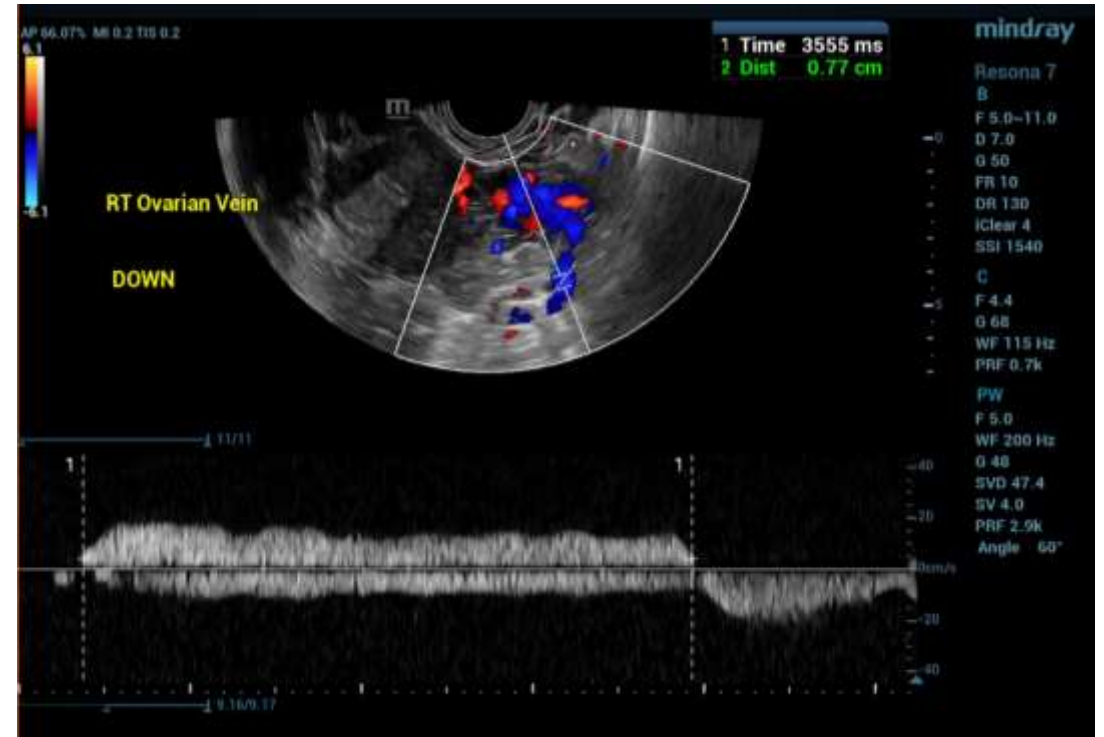
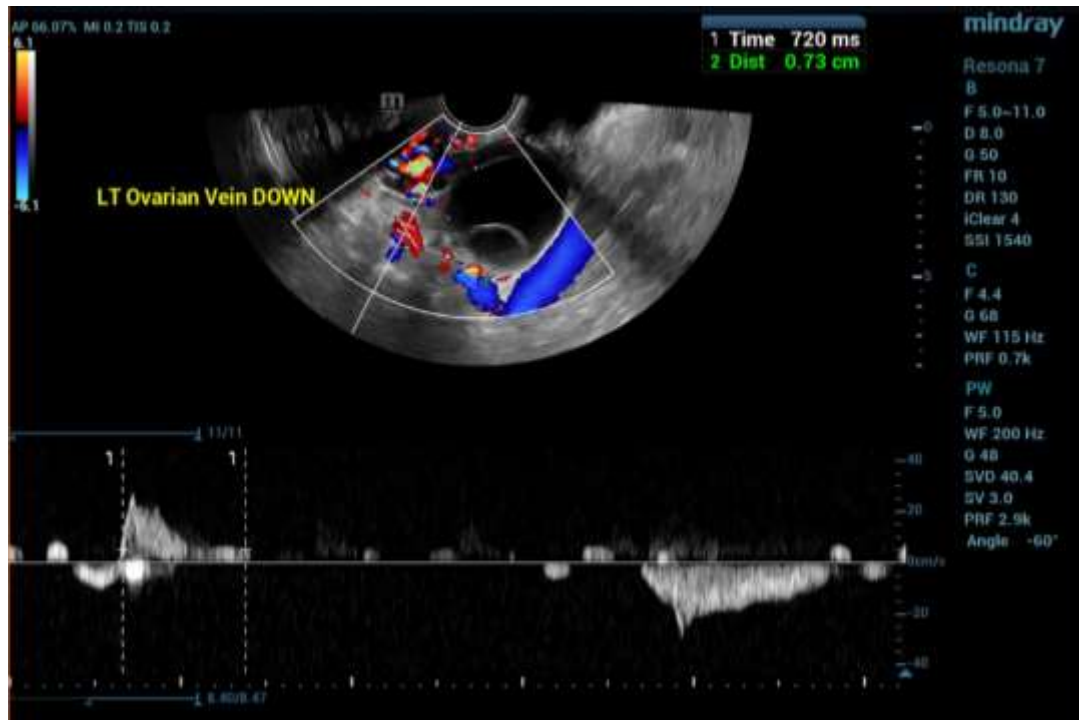
Transvenous occlusion of incompetent pelvic veins to treat chronic pelvic pain in women: A randomised controlled trial

Vivak Hansrani ✉, David Riding, Mourad W. Seif, Ann-Louise Caress, Katherine Payne, Jonathan Ghosh, Charles N. McCollum

- RCT sub-analysis
- Venogram / TVD
- Randomised to no treatment group
 - 32 women
 - 124 pelvic veins
- Reflux time



TVD



Catheter Venogram



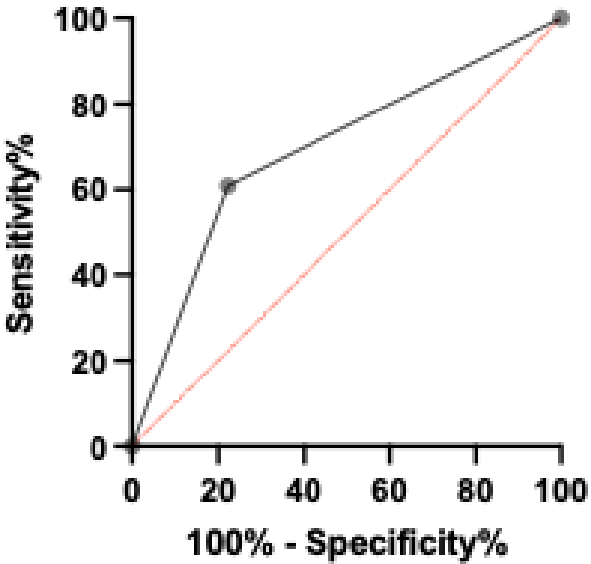
Methods

- **Outcome Measures**

- Primary outcome: reflux in ovarian and internal iliac veins (binary outcome)
- Secondary outcome: pelvic reflux times in supine and semi-standing positions.

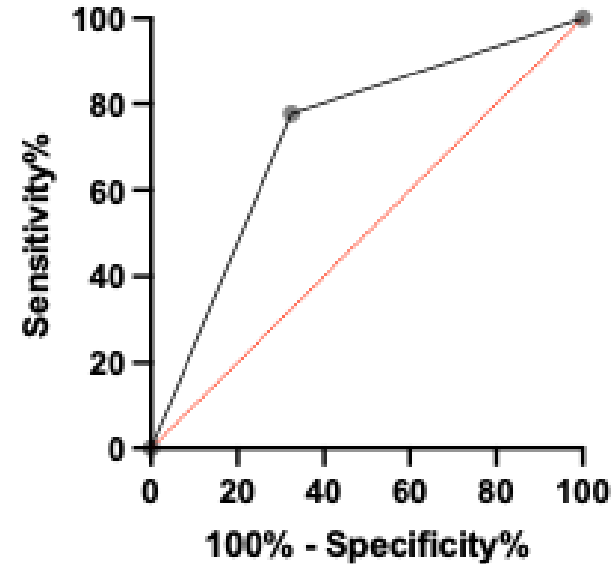
Results

500ms SUPINE



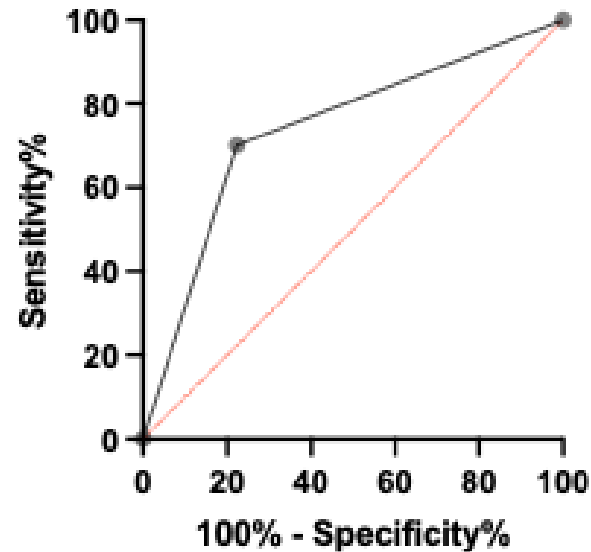
500ms SUPINE				
AUC	95% CI	P Value	Sensitivity %	Specificity %
0.6926	0.62 to 0.76	<0.0001	60.83	77.68

500ms SEMI-STANDING



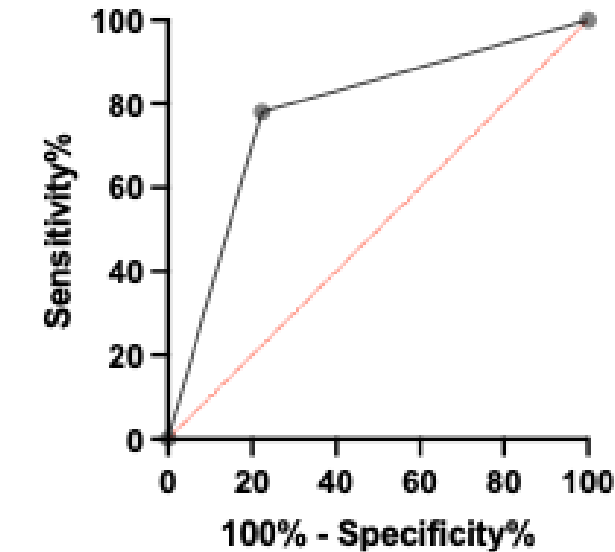
500ms SEMI-STANDING				
AUC	95% CI	P Value	Sensitivity %	Specificity %
0.7259	0.66 to 0.79	<0.0001	77.68	77.68

700ms SUPINE



700ms SUPINE				
AUC	95% CI	P Value	Sensitivity %	Specificity %
0.7388	0.67 to 0.81	<0.0001	70.09	77.68

700ms SEMI-STANDING



700ms SEMI-STANDING				
AUC	95% CI	P Value	Sensitivity %	Specificity %
0.7787	0.72 to 0.84	<0.0001	78.07	77.68



Conclusion

- **Key Findings**
 - 700ms reflux time threshold + semi-standing position
- **Clinical Implications**
- **Future Directions / Limitations**
 - Negative predictive value



Thank you

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