

Indocyanine green diode laser clears telangiectatic leg veins

April 13 2012



(HealthDay) -- For patients with telangiectatic leg veins, treatment with indocyanine green (ICG)-augmented diode laser therapy results in good to excellent clearance of veins, with no persisting side effects, according to a proof-of-concept study published online April 5 in *Lasers in Surgery and Medicine*.

Annette Klein, M.D., from University Hospital Regensburg in Germany, and colleagues assessed the safety and efficacy of ICG-augmented diode laser therapy for the treatment of telangiectatic leg veins in 15 female patients. ICG was administered intravenously and diode laser pulses with different radiant exposures were applied as one single treatment immediately thereafter. One and three months after treatment, the safety and efficacy were evaluated by the patient and a blinded investigator.



Reference therapy was treatment with pulsed dye laser and diode laser without ICG.

The researchers found the safety of ICG application and diode laser treatment to be excellent for all patients, and noted no persisting side effects. Clearance of vessels was found to be dose-dependent; diode laser treatment at radiant exposures between 100 and 110 J/cm² led to good clearance, which improved to excellent when double pulses were applied. Poor-to-moderate clearance of leg veins was seen with diode laser therapy without ICG and with pulsed dye <u>laser treatment</u>.

"ICG-augmented diode laser therapy has proved to be a safe and effective treatment option for telangiectatic leg veins," the authors write.

The diode laser MeDioStar used in the study was loaned by Asclepion; indocyanine green was provided by Pulsion Medical Systems.

More information: Abstract

Full Text (subscription or payment may be required)

Copyright © 2012 HealthDay. All rights reserved.

Citation: Indocyanine green diode laser clears telangiectatic leg veins (2012, April 13) retrieved 18 April 2024 from

https://medicalxpress.com/news/2012-04-indocyanine-green-diode-laser-telangiectatic.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.