# The ASVAL method

As mentioned in previous Vasculab messages, the justification of the ASVAL method is based on the ascending theory and the on the untoward effect of hydrostatic pressure. The validity of the ascending theory has not so far been evidenced; it is based on freely contrived imagination. It cannot explain, e.g., why the SSV incompetence occurs 4-5 times rarer than the GSV incompetence, although the hydrostatic pressure at the SPJ is higher than at the SFJ; one would expect the opposite according to the ascending theory. Moreover, although dealing with reflux, it does not take into consideration that reflux is set off by pressure gradient; it does not explain how the pressure gradient – the motive force setting off every flow – occurs; it does not precise where is source and where is the issue of the reflux originating according to the ascending theory in the distal areas of the lower leg, nor does it evaluate the intensity of reflux.

As to the “aspirating effect”: This presupposes a force effect creating reduced pressure in the “varicose vein reservoir” through active expansion of its volume (similar to heart diastole). No such force exists in the varicose vein reservoir. Claude Franceschi stated the same set of facts in his message. Ambulatory pressure gradient arising between thigh veins and lower leg veins during calf pump activity is the motive force that triggers venous reflux.

As concern the influence of pressure and flow as forces inducing vein dilatation: Increased intraluminal pressure dilates the veins in varicose vein disease embodying increased distensibility and reduced elasticity and causes their incompetence (relative vein incompetence due to dilation). Once incompetent and refluxing, increasing streaming induces further dilatation of the venous channels. The possible mechanism causing flow induced dilation was explained in a previous message of mine. When the increased flow is abolished, the vein diameter diminishes.

A few years ago, I have mentioned in the Vasculab discussion that the ASVAL method resembles killing mosquitoes instead of to use a more efficient measure against mosquitoes – to drain the swampy ground. Regrettably, I must acknowledge that we are not able to achieve definite drainage of the swampy ground. It has the tendency to recur again and again. The hemodynamically based tendency of varicose veins to recurrence is the reason why there are so different therapeutic methods currently used in the treatment of varicose vein disease: **no method is the perfect one**. However, this is the case not only when treating varicose vein disease; this is the case all over in the medicine if no dominant therapeutic method exists.