

Scientific Summary – Latest news from science

# The efficacy of medical compression stockings

Rabe E et al. Indications for medical compression stockings in venous and lymphatic disorders: An evidence-based consensus statement. *Phlebology* 2018;33(3):163–184.

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# Medical compression stockings – proven efficacy, recommended by experts

**Compression therapy is the cornerstone of conservative treatment in patients with venous and lymphatic diseases.<sup>1</sup>**

A recent consensus paper published by European key opinion leaders in the field of phlebology and lymphology supports the necessity of medical compression stockings (MCS). The publication underlines the efficacy of MCS by referencing randomized controlled trials (RCTs) according to evidence-based medicine.<sup>2</sup>

Most of the recommendations for the use of MCS in venous and lymphatic diseases are made for Grade 1, the strongest recommendation grade.

The following provides a selection of the most important recommendations.

- 1 MCS alleviate venous symptoms (heaviness, tension, pain, swelling) in patients with chronic venous diseases.**  
Grade 1B
- 2 MCS improve quality of life in patients with chronic venous diseases.**  
Grade 1B
- 3 MCS reduce recurrence of venous leg ulcer.**  
Grade 1A
- 4 The use of ulcer MCS ('ulcer kits') improves ulcer healing and reduces pain in patients with venous leg ulcer.**  
Grade 1A
- 5 MCS reduce postoperative side effects (such as pain, bruising, swelling) in the initial phase after great saphenous vein (GSV) interventions.**  
Grade 1B
- 6 The immediate use of MCS reduces pain and swelling in patients with acute deep vein thrombosis (DVT).**  
Grade 1B
- 7 The immediate use of MCS in addition to mobilisation and anticoagulation avoids thrombus propagation in patients with acute deep vein thrombosis (DVT).**  
Grade 1B
- 8 The use of MCS as early as possible after diagnosis of DVT reduces the risk of post-thrombotic syndrome (PTS).**  
Grade 1B
- 9 MCS are indicated for the treatment of symptomatic PTS.**  
Grade 1B
- 10 MCS are recommended for lymphoedema maintenance therapy.**  
Grade 1A

All recommendations, including the list of clinical trials, have been published in the journal of Phlebology.<sup>2</sup>

# GRADE classification – Strength of recommendation and quality of evidence

The recommendations are based on scientific evidence, whereby randomized controlled trials being preferred.<sup>3</sup>

Grade	Recommendation / Evidence	Methodological quality of supporting evidence	Implications
1A	Strong recommendation, high-quality evidence	RCTs without important limitations or overwhelming evidence from observational studies	Strong recommendation, can apply to most patients in most circumstances without reservation
1B	Strong recommendation, moderate quality evidence	RCTs with important limitations (inconsistent results, methodological flaws, indirect, or imprecise) or exceptionally strong evidence from observational studies	Strong recommendation, can apply to most patients in most circumstances without reservation

<sup>1</sup> Wittens C et al. Editor's Choice - Management of Chronic Venous Disease: Clinical Practice Guidelines of the European Society for Vascular Surgery (ESVS). Eur J Vasc Endovasc Surg 2015;49(6):678-737.

<sup>2</sup> Rabe E et al. Indications for medical compression stockings in venous and lymphatic disorders: An evidence-based consensus statement. Phlebology 2018;33(3):163-184.

<sup>3</sup> Guyatt G et al. Grading strength of recommendations and quality of evidence in clinical guidelines: report from an American College of Chest Physicians task force. Chest 2006;129:174-181.