

## Introduction

**D**ermatology is the study of all disorders related to the skin. Because venous diseases directly affect the skin, dermatologists need to have a basic understanding of phlebology. Historically, dermatologists have made brilliant contributions to the field of phlebology. Ambulatory phlebectomy was fathered by Robert Muller, a Swiss dermatologist. The cornerstone in the treatment of venous insufficiency, compression therapy and sclerotherapy were developed by Austrian and German dermatologists. Knowledge of wound healing and new ulcer dressings would not have been possible without key contributions made by dermatologists.

As dermatology has blossomed in the United States and assumed the identity of not just a medical specialty but a surgical specialty as well, a much broader emphasis has been placed on various disciplines within dermatology. Surgical curricula in dermatology residencies typically focus on skin cancer, laser surgery, and facial rejuvenation techniques such as Botox and soft-tissue fillers, and liposuction. In most programs, residents are taught the basics of sclerotherapy but rarely other topics within phlebology. For many years, phlebology appeared to have been relegated to marginal importance in the United States—until the emergence of dermatologists Robert Weiss, Neil Sadick, and Mitchel Goldman, whose innovative work brought phlebology to the forefront. They have reminded us that, with proper training, phlebology should be and can be practiced by dermatologists.

Without a thorough education, dermatologists cannot deal with venous disorders effectively. We have to be fully aware of all diagnostic and therapeutic procedures in phlebology. Dr. Tri Nguyen reviews the anatomy of leg veins and the physiology of venous insufficiency and proposes a useful treatment algorithm. The incorporation of new technology further empowers the field of phlebology. Dr. Robert Weiss

and Dr. Girish Munavalli share their extensive experience in endovascular truncal vein ablation, whereas Dr. Arielle Kaurav gives her insight on laser therapy of telangiectasia. The treatment of venous ulcers combines therapies both new and old, as summarized by Dr. Jason Reichenberg and Dr. Mark Davis.

Americans are relative newcomers in the field of dermatology. Our European colleagues have long made important contributions to our understanding of venous disease, and they continue to pioneer new techniques. Dr. Pedro Redondo, among other European dermatologists, has injected new life in the time-tested technique of sclerotherapy by advancing the use of foam.

As we look beyond treatment of venous disease in the office setting, we must cooperate with our vascular surgery colleagues to develop a comprehensive treatment plan for our patients. In this issue, Dr. Juan Cabrera, Dr. Mark Iafriti, and Dr. Yung-Feng Lo (in cooperation with Dr. Chih-Hsun-Yang) give their perspectives as vascular surgeons on the treatment of varicose veins and perforating veins.

Phlebology occupies a unique niche in dermatology, lying at the crossroads between medicine and surgery, between cosmetic treatment and symptomatic treatment. Several articles within one issue of a journal certainly do not fairly cover the vast topics within phlebology. However, I sincerely hope that these reviews will solidify the knowledge that you already have, and pique your interest in learning more about venous diseases.

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