as well as lack of progress in labour. Nevertheless, none of these parameters reached a statistical significance. Primiparas both <30 and >30 year-old had a much greater risk of lack of progress in labour (OR = 11.3; p = 0.0015 and OR = 19.5; p = 0.00027) as well as emergency caesarean section (OR = 5.8; p = 0.00056 and OR = 2.5; p = 0.027) and a lower risk of elective C-section (OR = 0.4; p = 0.0027 among women <30 years old) when compared to multiparas. These results met statistical significance criteria.

Conclusion: Advanced maternal age can undoubtedly be associated with several adverse perinatal outcomes. However, the results of the study do not seem to be unequivocal. Further investigation of the influence of maternal age on the course of pregnancy and delivery should be conducted.

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Varicose veins surgical treatment: Endovenous laser ablation versus open surgery
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Aim: Compare long-term outcomes of varicose veins treatment between endovenous laser ablation and open surgery.

Introduction: 25–33% of the Western population adults is suffering from varicose veins and surgical treatment is characterized by high recurrence rate of 60% after 5 years follow-up observation. That leads to look for the most effective treatment option.

Methods: A retrospective study of 182 patients who had varicose veins endovascular or open surgery during 2015-06–2015-12 were made. Patients’ demographic and clinical data were registered. Patients were contacted and asked to evaluate surgery outcomes subjectively. Patients were divided in two groups: I – ones who had endovenous laser ablation and II – those who had open surgery.

Results: 136 (74.7%) patients agreed to participate in the study: 26 (19.1%) men and 110 (80.9%) women; average age – 48.36 years (±1.087), 65 (47.8%) – group I, 41 (63.1%) were operated because of the symptoms, 24 (36.9%) were operated because of the esthetical reasons), 71 (52.2%) – group II, 58 (81.7%) were operated because of the symptoms, 13 (18.3%) were operated because of the esthetical reasons.) The symptoms were group I – 9 (22%) patients, group II – 25 (43.1%). Esthetical relapse: group I – 3 (12.5%), group II – 5 (38.5%). Patients assessed esthetical view: group I – 48 (73.8%) were completely satisfied with the results, 15 (23.1%) were partly satisfied and 2 (3.1%) were unsatisfied, respectively in group I the results were 44 (62%), 26 (36.6%) and 1 (1.4%) (p = 0.202). Patients also evaluated their symptoms after treatment. Group I: 53 (81.5%) patients were completely satisfied, 9 (13.8%) – partly satisfied, 3 (4.6%) – unsatisfied, respectively in group II – 52 (73.2%), 14 (19.7%) and 5 (7%) (p = 0.513). According to the EQ-5D-3L questionnaire patients treated in group I evaluated their health – 80.29 (±4.6%) – unsatisfied, respectively in group II – 52 (73.2%), 14 (19.7%) and 5 (7%) (p = 0.513). According to the EQ-5D-3L questionnaire patients treated in group I evaluated their health – 80.29 (±4.6%) – unsatisfied, respectively in group II – 52 (73.2%), 14 (19.7%) and 5 (7%) (p = 0.513).

Conclusion: Chronic venous insufficiency symptoms more often renewed to patients who had open surgery. Patients’ were more satisfied after endovenous laser ablation. Also, those patients who were treated with endovascular procedure evaluated their health better.

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