I: 記載されているIとその形式	C: 記載されているCとその形式
硬化療法、エタノール+bleomycin A5	比較群なし
塞栓(硬化療法?)、fibrin glue	なし
硬化療法、ポリドカノール	なし
sclerotherapy with injection ethanolamine oleate for the treatment of venous malformations	
硬化療法、エタノール	なし

	N. H. O.	
O: 記載されているOとその形式	除外	コメント
結果は5ポイントスケールで評価。Cure56例(27.9%), nealy normal 42例(20.9%), marked improvement 62例(30.8%), minor improvement 36例(17.9%), no change or worse 5例(2.5%)。症状改善(外観、疼痛、出血、機能制限)に関してもそれぞれ評価した。合併症は組織壊死6例、末梢神経障害5例、色素沈着10例、水疱5例。		
6才女児の顔面静脈奇形に対して整容目的に硬化療法を施行し 改善した。42ヶ月フォローで再発なし。合併症なし。		
	除外	不採用 直後に切除術を行うpreoperative sclerotherapy で、sclerotherapyとしてのoutcome評価は行っていない。
   9例中、complete response 7例、partial response 2例。手技後は  局所の発赤腫脹がみられたが、治癒し、潰瘍形成はなし。 		
検討項目: Response of ethanolamine oleate were graded in four groups結果: complete resolution of symptoms in 79 lesions and significant improvement of 6 lesions.合併症; All patients experienced pain and swelling to a variable degree for short duration. Skin necrosis occurred in four patients, in two cases fullthickness in a small area and in two cases—partial thick—ness skin loss was observed. All four lesions were healedspontaneously		
	除外	サンプル数が少ない、重篤な合併症なし
	除外	4例のうちVMと言えるのは骨内病変の1例
硬化療法の有効性と合併症について直接記載はなし。エタノール硬化療法による全身へのcontaminationを評価。血漿エタノールの上昇は25/30(83.3%)でみられた。注入エタノール量に比例しており、VMの形態や、静脈灌流、また注入技術には依存しなかった。		

文				文献情報	
献 No.	ID	Lang uage	Authors	Title	Journal
	24509373	eng	Gurgacz S, Zamora L, Scott	Percutaneous sclerotherapy for vascular malformations: a systematic review.	Ann Vasc Surg
	21818522	eng	Gulsen F, Cantasdemir M, Solak S, Gulsen G, Ozluk E, Numan	Percutaneous sclerotherapy of peripheral venous malformations in pediatric patients.	Pediatr Surg Int
	6325829	eng	Gu	10 cases of cavernous hemangioma treated with injection of "Xiao Zhi Ling" solution.	J Tradit Chin Med
	24351228	eng	Graziuso S, Ormitti F, Cerasti D, Menozzi R, Piazza P, Cerasoli G, Crisi G, Zompatori	Percutaneous sclerotherapy for lymphangioma and soft-tissue venous malformation located in the maxillofacial region in children and young adults.	Neuroradiol J
	12034929	eng	Goyal M, Causer PA, Armstrong	Venous vascular malformations in pediatric patients: comparison of results of alcohol sclerotherapy with proposed MR imaging classification.	Radiology

Year	Volum e	Pages	研究デザイン	P: サンプル数、セッティング、Pの特徴
2014	28(5)	1335–49	その他(システマティックレ ビュー)	2000~2013 Vascular malformation sclerotherapy, sclerosants limited to OK-432, STS, Doxycycline, NBCA, Polidocanol, Gelatin adhesive, Polyvinyl alcohol, ethylene-vinyl alcohol copolymer
2011	27(12	1283–7	症例集積	19 patients with VM 89sessions peripheral pediatric
1983	3(4)	289–90	症例集積	Cavenous Hemangioma10例
2006	19(3)	385-93		
2002	223(3	639–44	症例集積	59例

I: 記載されているIとその形式	C: 記載されているCとその形式
sclerotherapy using polidocanol	
Xiao Zhi Lingによる硬化療法	なし
硬化療法、エタノール	なし

O: 記載されているOとその形式	除外	コメント
症状の改善について: In 8 studies that examined the effect of sclerotherapy on symptoms, between 48% and 97% of the 442 patients reported an improvement.  In a study of patients with superficial VMs, 95% of patients (77 of 81) achieved partial to complete symptomatic improvement. Similar results were observed in patients with deep VMs, with 97% (38 of 39) achieving partial to complete resolution of symptoms。病変の縮小について: In 3 of the 11 studies on ethanol sclerotherapy, well over half of the 182 patients achieved excellent lesion response over a mean follow-up period ranging from 8 to 25 months.4 studies, at least 80% of the 213 patients achieved a poor to excellent response up to 10 years after ethanol sclerotherapy. In the 2 STS sclerotherapy studies, 59 (67%) of 89 patients had poor to excellent lesion regression up to 11 years after treatment. Polidocanol sclerotherapy achieved a minimum 50% reduction in the size of infiltrating and limited VMs in 9 (56%) and 12 (63%) patients, respectively. 合併症について: Patients who underwent ethanol sclerotherapy (n=761; 12 case series studies) experienced a greater range of systemic and localized complications than other patient groups, including transient pulmonary hypertension, pulmonary embolism, deep vein thrombosis, nerve injury, deep tissue injury, and skin necrosis. Additionally, in the 2 small series of 89 patients who underwent STS sclerotherapy, 2 patients experienced bleeding or gangrene. In the cohort of 35 patients who received polidocanol sclerotherapy, 1 patient developed temporary interdigital necrosis in the foot, while another experienced weakness of the fifth digit (which resolved within a few weeks) because of inadvertent injection of the sclerosant into the cubital artery.		混在していますが、検討は分けられているため、採用と致しました
検討項目: evaluation on MRI, clinical symptoms 結果: After the treatment, the symptoms and associated cutaneous lesions completely resolved in four patients (21%). Clinical symptoms were improved in 12 out of 19 patients (63%). They remained unchanged in three patients (16%). In MRI examination, lesions were disappeared in three patients (16%) (Fig. 2). MRI examination revealed size reduction in 11 out of 19 patients (58%). In five patients (26%), no changes合併症; no major complications were encountered. The minor complications (65%) encountered were swelling and pain after treatment which were resolved by taking NSAID within a few days		
  8例で治癒、1例で改善、合併症なし 		
	除外	サンプル数が少ない、重篤な合併症なし
Grade1(境界明瞭、5cm以下)14例(Excellent 10, good 4, poor 0)、Grade2A(境界明瞭、5cm超過)9例(Excellent 2, good 4, poor 3)、Grade2B(境界不明瞭、5cm以下)15例(Excellent 4, good 2, poor 9)、Grade3(境界不明瞭、5cm超過)21例(Excellent 0, good 9, poor 12)。合併症は皮膚壊死が1例。術後の疼痛で入院を要したのが1例。		

文			文献情報					
献 No.	ID	Lang uage	Authors	Title	Journal			
	3605981	eng	Govrin–Yehudain J, Moscona AR, Calderon N, Hirshowitz	Treatment of hemangiomas by sclerosing agents: an experimental and clinical study.	Ann Plast Surg			
	11071446	eng	Gelbert F, Enjolras O, Deffrenne D, Aymard A, Mounayer C, Merland	Percutaneous sclerotherapy for venous malformation of the lips: a retrospective study of 23 patients.	Neuroradiology			
	2715693	eng	Fradis M, Podoshin L, Simon J, Lazarov N, Shagrawi I, Boss	Combined treatment of large head and neck capillaro-venous malformation by a fibrosing agent.	J Laryngol Otol			
	2052693	eng	Dubois JM, Sebag GH, De Prost Y, Teillac D, Chretien B, Brunelle	Soft-tissue venous malformations in children: percutaneous sclerotherapy with Ethibloc.	Radiology			
	21822948	eng	Dompmartin A, Blaizot X, Theron J, Hammer F, Chene Y, Labbe D, Barrellier MT, Gaillard C, Leroyer R, Chedru V, Ollivier C, Vikkula M, Boon	is a safe and efficient sclerosing	Eur Radiol			
	15057102	eng	Domb BG, Khanna AJ, Mitchell SE, Frassica	Toe-walking attributable to venous malformation of the calf muscle.	Clin Orthop Relat Res			
	24865314	eng	Delgado J, Bedoya MA, Gaballah M, Low DW, Cahill	Percutaneous sclerotherapy of foot venous malformations: evaluation of clinical response.	Clin Radiol			
	7738736	eng	de Lorimier	Sclerotherapy for venous malformations.	J Pediatr Surg			
	19010768	eng	Das BK, Hoque	Treatment of venous malformations with ethanolamine oleate.	Asian J Surg			

Year	Volum e	Pages	研究デザイン	P: サンプル数、セッティング、Pの特徴
1987	18(6)	465-9		
2000	42(9)	692-6	症例集積	23患者、口唇
1989	103(4	390-8	症例集積	CVM7例
1991	180(1	195–8	症例集積	小児VM、38例
2011	21(12	2647–56		
2004	(420)	225-9		
2014	69(9)	931–8	症例集積	16 patients, 34 sclerotherapy procedures:foot
1995	30(2)	188–93; discussio n 194	症例集積	34例
2008	31(4)	220-4		

I: 記載されているIとその形式	C: 記載されているCとその形式
硬化療法、Ethibloc and ∕or Aetoxysclerol	なし
Ethiblocによる術前硬化療法	なし
Ethiblocによる硬化療法、15例では手術併用	なし
STS foam 3% STS solution, 5 ml air and 1 ml lipiodol	
硬化療法、エタノール、STS、sodium morrhuate、EO	なし

O: 記載されているOとその形式	除外	コメント
	除外	VMかどうか不明
硬化療法(7例)とsurgery(10例)、硬化療法+surgery(6例)の混在した結果。18例で良好な結果で、はじめの状態よりも悪化した症例はなかった。病変サイズが小さい方が安全で効果的に治療可能だった。		
出血少なく切除できた		
74%でgood results、50%でcure、重大な合併症なし		
	除外	不採用 対象疾患が混在しており outcome評価がVM以外も含まれている
	除外	CQとの関連性に乏しい
検討項目は、Techchnical success,Puig classification, VM size reduction, and the complication rate were evaluated. (e-mailbased questionnaire ).結果: Post-treatment improvement in foot swelling was reported in 9/12 (75%) patients, no change in foot swelling was reported in 3/12 (25%) patients, and no patient reported increased swelling post-treatment. Foot function was reported to be improved in 9/13 (69.2%) patients and was unchanged in 4/13 (30.8%) patients. The overall outcome of sclerotherapy per patient opinion was described as "completely cured" by 2/13 (15%) patients, "moderate improvement" by 8/13 (62%) patients, "mild improvement" by 2/13 (15%) patients, and "unchanged" by 1/13 (8%) patient. No patient reported being worse after treatment. Both patients who reported being cured had small (<2 cm) Puig type I and type II VMs.A significant decrease in overall pain was achieved after sclerotherapy. 病変の縮小: The estimate of VM size reduction in the follow-up ultrasound was as follows: 100~76% in 10 patients (83.4%); 75~51% in one patient (8.3%); and 50~26% in one patient (8.3%). 合併症: Post-procedural complications occurred after 6/29 procedures (21%), all of which were self-limited skin complications. The lesion-to-skin surface distance was significantly shorterin patients with skin post-procedural complications.		
血があった。膝の病変の治療で、一時的なdrop footあり。他、皮膚に表面的な潰瘍形成、顔面動脈への注入で頬部鼻部に一過性虚血、麻酔下の状態で気管支痙攣が起きた。	除外	短期的な評価のみのため
	除外	短期的な評価のみのため 

文		文献情報						
献 No.	ID	Lang uage	Authors	Title	Journal			
	6623789	eng	Cohen AJ, Imray TJ, Romansky	Renal varicosities with gross hematuria and negative arteriography. Experience with sclerosing agent in 1 patient.	Urology			
	11997355	eng	Choi YH, Han MH, O-Ki K, Cha SH, Chang	Craniofacial cavernous venous malformations: percutaneous sclerotherapy with use of ethanolamine oleate.	J Vasc Interv Radiol			
	18356443	eng	Chen Y, Li Y, Zhu Q, Zeng Q, Zhao J, He X, Mei	Fluoroscopic intralesional injection with pingyangmycin lipiodol emulsion for the treatment of orbital venous malformations.	AJR Am J Roentgenol			
	17993298	eng	Chen WL, Yang ZH, Bai ZB, Wang YY, Huang ZQ, Wang	A pilot study on combination compartmentalisation and sclerotherapy for the treatment of massive venous malformations of the face and neck.	J Plast Reconstr Aesthet Surg			
	19672870	eng	Chen WL, Huang ZQ, Zhang DM, Chai	Percutaneous sclerotherapy of massive venous malformations of the face and neck using fibrin glue combined with OK-432 and pingyangmycin.	Head Neck			
	24188408	eng	Chen G, Cai X, Ren JG, Jia J, Zhao	Unexpected development of tongue squamous cell carcinoma after sclerotherapy for the venous malformation: a unique case report and literature review.	Diagn Pathol			
	14623700	eng	Cabrera J, Cabrera J Jr, Garcia-Olmedo MA, Redondo	Treatment of venous malformations with sclerosant in microfoam form.	Arch Dermatol			
	11782699	eng	Cabrera J, Cabrera J Jr, Garcia-Olmedo	Sclerosants in microfoam. A new approach in angiology.	Int Angiol			
	23932562	eng	Bowman J, Johnson J, McKusick M, Gloviczki P, Driscoll	Outcomes of sclerotherapy and embolization for arteriovenous and venous malformations.	Semin Vasc Surg			
	21111641	ang	Blaise S, Charavin–Cocuzza M, Riom H, Brix M, Seinturier C, Diamand JM, Gachet G, Carpentier	g	Eur J Vasc Endovasc Surg			

1,140.57				
Year	Volum e	Pages	研究デザイン	P: サンプル数、セッティング、Pの特徴
1983	22(3)	326-8		
2002	13(5)	475-82	症例集積	29患者、頭蓋顔面領域
2008	190(4	966-71	症例集積	19、静脈奇形 全例眼窩
2008	61(12	1486-92		
2010	32(4)	467–72	症例集積	Eighteen patients with massive venous malformations
2013	8	182	症例報告	a 65- year-old female patient:VM
2003	139(1	1409–16	症例集積	50、静脈奇形 限局性19、浸潤性16、Klippel-Trenaunay症候群15
2001	20(4)	322-9		
2013	26(1)	48-54		
2011	41(3)	412-7	症例集積	A total of 24 patients between 7 and 78 years were treated (19 venous malformations, three KTSs and two venous-lymphatic malformations).

I: 記載されているIとその形式	C: 記載されているCとその形式
硬化療法、EO	なし
硬化療法、pingyangmycin lipiodol emulsion	対照群なし
an injection of fibrin glue combined with OK-432 and pingyangmycin	
pingyangmycin (8 mg) 、YAG laser、sodium morrhuate injection (150 mg in 3 ml)、resection	
硬化療法 ポリドカノールフォーム	比較群なし
he concentrations of polidocanol foam used ranged from 0.25% to 3%	

O: 記載されているOとその形式	除外	コメント
	除外	腎
2患者で開口障害を生じるも1週間の保存療法で軽快、他に重篤な合併症なし。硬化療法のみ施行された16例中14例(88%)で有効。9例で硬化療法による縮小後に手術施行された。		
3~9ヶ月で17例が眼球突出、腫脹、疼痛の症状が改善、4例で視力改善、2例で複視が改善。合併症は1例でまぶたの腫脹と流涙。		
	除外	硬化療法以外(compartmentalisation)を 併用している
検討項目: Overall, the patientsdetermined whether abnormal venous channelspersisted. Treatment success was determinedclinically by a reduction in the lesion size,and the lesions were measured and photo-graphed serially. Complications were also re-corded (Table 1). The outcome was assessed by a panel of 3 surgeons, and the response rate was graded as follows: 1 complete involution, implying a > 90% reduction in size; 2 mostly involuted, implying a reduction in size of 75% to 90%; 3 ma partial involution, implying a reduction in size of 50% to 75%; 4 masmall involution, implying a reduction in size of 25% to 50%; and 5 mon-involution, implying a reduction in size of 25% to 50%; and 5 mon-involution, implying a reduction in size of 4 lesions were mostly involuted (Figure 2), and 2 lesions were partially involuted (Figure 3). None of the lesions showed small involution or noninvolution 合併症; no major complications		
症状の改善はgood、病変の縮小もgood、合併症はdevelopment of oral SCCafter sclerotherapy.		
Excellent 19、Good 16、Moderate improvement 13、Unchanged or worse 2。皮膚色素沈着4、皮膚壊死3、動脈内注入2。		
	除外	下肢静脈瘤の症例集積のため除外しました。
	除外	不採用 対象疾患が混在しており outcome評価がVM以外も含まれている
	<u></u>	L

T				文献情報	
文   献   No.	ID	Lang uage	Authors	Title	Journal
	3716860	eng	Berthelsen B, Fogdestam I, Svendsen	Venous malformations in the face and neck. Radiologic diagnosis and treatment with absolute ethanol.	Acta Radiol Diagn (Stockh)
	18274339	eng	Bergan J, Cheng	Foam sclerotherapy of venous malformations.	Phlebology
	10597669	eng	Berenguer B, Burrows PE, Zurakowski D, Mulliken	Sclerotherapy of craniofacial venous malformations: complications and results.	Plast Reconstr Surg
	24924412	eng	Bai N, Chen YZ, Fu YJ, Wu P, Zhang	A clinical study of pingyangmycin sclerotherapy for venous malformation: an evaluation of 281 consecutive patients.	J Clin Pharm Ther
	15302655	eng	Arat YO, Mawad ME, Boniuk	Orbital venous malformations: current multidisciplinary treatment approach.	Arch Ophthalmol
	19481473	eng	Andreisek G, Nanz D, Weishaupt D, Pfammatter	MR imaging-guided percutaneous sclerotherapy of peripheral venous malformations with a clinical 1.5-T unit: a pilot study.	J Vasc Interv Radiol
	24235099	eng	Alexander MD, McTaggart RA, Choudhri OA, Marcellus ML, Do	Percutaneous sclerotherapy with ethanolamine oleate for venous malformations of the head and neck.	J Neurointerv Surg
	15997218	eng	Agus GB, Allegra C, Antignani PL, Arpaia G, Bianchini G, Bonadeo P, Botta G, Castaldi A, Gasbarro V, Genovese G, Georgiev M, Mancini S, Stillo	Guidelines for the diagnosis and therapy of the vein and lymphatic disorders.	Int Angiol

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Year	Volum e	Pages	研究デザイン	P: サンプル数、セッティング、Pの特徴
1986	27(2)	149–55	症例集積	頭頸部VM5例
2007	22(6)	299-302		
1999	104(1	1–11; discussio n 12–5	症例集積	40例、頭蓋顔面
2014	39(5)	521-6	症例集積	A total of 281 patients with VMs
2004	122(8	1151-8		
2009	20(7)	879–87		
2014	6(9)	695-8	症例集積	26 patients 52procedures : venous malformations of the head and neck
2005	24(2)	107–68		

I: 記載されているIとその形式	C: 記載されているCとその形式
Ethanolによる硬化療法	なし
硬化療法、エタノールorSTS	なし
0.5 or 2 mg/mL of PYM with or without lidocaine and dexamethasone	A total of 281 patients were classified into the following groups: (i)120 patients who were subdivided into three groups of 40 patients each, which included a PYM (2 mg/mL) treatment group, a PYM(2 mg/mL)+lidocaine (05%) treatment group and a PYM (2 mg/mL)+lidocaine (1%) treatment group; (ii) 64 patients who were subdivided into two groups of 32 patients each, which included a PYM (05 mg/mL)+lidocaine (05%)+DEX (1 mg/mL) treatment group and a PYM (2 mg/mL)+lidocaine (05%)+DEX(1 mg/mL) treatment group; (iii) 68 patients with lesions on the lips who were treated with PYM (05 mg/mL)+lidocaine(05%)+DEX (1 mg/mL); and (iv) 29 patients with lesions on the glans penis who were treated with PYM (05 mg/mL)+lidocaine (05%).
sclerotherapy using ethanolamine oleate	

O: 記載されているOとその形式	除外	コメント
全例で縮小、4例で複数回治療、1例で皮膚壊死		
	除外	評価が不正確
1回から10回の硬化療法を施行した。合併症は、潰瘍と瘢痕形成が5例、感染が3例、血尿11例、一時的な顔面神経麻痺2例、声帯麻痺1例みられた。質問票(回答は37/40)による評価では、cured 4例、near normal 10例、marked improvement 14例、slight improvement 5例、no cahnge or worse 4例、となった。		
検討項目は、Therapeutic effects (腫瘍サイズの変化)→ i) exellent:104/120、good:10/120、side reaction:30/120 ii) exellent:60/64、good:4/60、side reaction:6/64 III) Lip:66 patients were cured and two patients experienced a marked improvement. iv) Glans penis:26 patients were cured and three patients experienced a marked improvement.		lidocaineの有無でTherapeutic effects (腫瘍サイズの変化)に差はなかった。→ Lidocaine has no synergistic effect with PYM in the treatment of VMs. PYMの 濃度で治療効果や副作用に差はなかった。low concentration の方がpainがless acuteであったとのことだが特にデータは記載されていない。 各部位における治療効果は良好。Lip:66 patients were cured and two patients experienced a marked improvement. Glans penis:26 patients were cured and three patients experienced a marked improvement.
	除外	他の治療モダリティの関与
	除外	サンプル数が少ない、重篤な合併症なし
検討項目: Quantitative volumetric analysis. 手技前後MRI評価。 Lesions with no remaining visible abnormality were considered to have had an excellent outcome. Lesions that were visibly smaller and subject—ively less than or greater than half their original sizes were considered to have had good or fair outcomes, respectively. A poor outcome was designated following no change or lesion growth. 結果: excellent in two patients (7.7%), good in 22 (84.6%), and fair in two (7.7%) No complications		
	除外	CQと関連なし

4-4	引	用	文献リスト	1
14-4	71	ж	文 附 ソ へ ト	٠,

<u> </u>	引用文献リスト】					
9700	Yamaki T, Nozaki M, Sakurai H, Takeuchi M, Soejima K, Kono T	Prospective randomized efficacy of ultrasound-guided foam sclerotherapy compared with ultrasound-guided liquid sclerotherapy in the treatment of symptomatic venous malformations.	Journal of vascular surgery	2008	47(3)	578-84
	<b>3</b> , , , , , , , , , , , , , , , , , , ,	Comparison between absolute ethanol and bleomycin for the treatment of venous malformation in children.	Experimental and therapeutic medicine	2013	6(2)	305-9
	Schumacher M, Dupuy P, Bartoli J-M, Ernemann U, Herbreteau D, Ghienne C, Guibaud L, Loose DA, Mattassi R, Petit P, Rossler JK, Stillo F, Weber J	Treatment of venous malformations: First experience with a new sclerosing agent – A multicenter study.	European journal of radiology	2011	80(3)	e366- e372
•	Liu XJ, Qin ZP, Tai MZ	Angiographic classification and sclerotic therapy of maxillofacial cavernous haemangiomas: a report of 204 cases.	Journal of international medical research	2009	37(5)	1285-9
	牛尾 茂子, 鳥谷部 荘八	上肢静脈奇形における3%ポリドカノールを用いた経皮的硬化療法	日本手外科 学会雑誌	2014	30(4)	602-60
	長尾 宗朝, 佐々木 了, 古川 洋志, 齋藤 典子, 山本 有平	上肢の静脈奇形に対する硬化療法 治療効 果を阻害する要因の検討	日本形成外 科学会会誌	2012	32(7)	463-46
•	野村 正, 櫻井 敦, 永田 育子, 寺師浩人, 田原 真也	血行動態を考慮した静脈奇形に対するわれ われの治療戦略 硬化療法の適応と限界に ついて	静脈学	2008	19(3)	161-16
	Zhang J, Li H-B, Zhou S-Y, Chen K- S, Niu C-Q, Tan X-Y, Jiang Y-Z, Lin Q-Q	Comparative study of sclerotherapy of venous malformation in children using absolute ethanol and pingyangmycin. [Chinese]	Chinese Journal of Radiology (China)	2012	46(4)	350-3
	He W, Gu AL, Shang JL	[Comparison of the clinical therapeutic effects between local injection of pingyangmycin and sodium morrhuate on oral and maxillofacial venous malformation]	Zhonghua Kou Qiang Ke za Zhi [Chinese Journal of Stomatology]	2007	42(5)	308-9
•	Zhi K, Bai H, Zhao M, Ren W, Wen Y	The role of intraleisonal pingyangmycin in the treatment of maxilla and facial venous malformation. [Chinese]	Journal of Xi'an Jiaotong University (Medical Sciences)	2007	28(6)	711-3
	Aboelatta YA, Nagy E, Shaker M, Massoud KS	Venous malformations of the head and neck: A diagnostic approach and a proposed management approach based on clinical, radiological, and histopathology findings.	Head & neck	2014	36(7)	1052-7
	Osifo OD, Evbuomwan I	Hemangiomas in children: Challenges and outcome of surgical management in Benin city, Nigeria.	Iranian Journal of Pediatrics	2011	21(3)	350-6
8263	Li HP, Cao J, Lei GW, Li QX, peng RL	Treatment of cavernous hemangioma of liver with pingyangmycin-lipiodol emulsion and gelatin sponge	Chinese Journal of General surgery	2002	11(1)	61–2
	James CA, Braswell LE, Wright LB, Roberson PK, Moore MB, Waner M, Buckmiller LM	Preoperative sclerotherapy of facial venous malformations: Impact on surgical parameters and long-term follow-up.	Journal of Vascular and Interventional Radiology	2011	22(7)	953-60

Schumacher M, Dupuy P, Bartoli J-M, Ernemann U, Herbreteau D, Ghienne C, Guibaud L, Loose DA, Mattassi R, Petit P, Rossler JK, Stillo F, Weber J	Treatment of venous malformations: First experience with a new sclerosing agent – A multicenter study.	European journal of radiology	2011	80(3)	e366- e372
立花 俊祐, 鈴木 那央, 君塚 基修, 君島 知彦, 辻口 直紀	顔面頸部口腔静脈奇形を有する患者に対す る上大静脈瘤切除の麻酔経験	麻酔	2014	63(10)	1139- 1141
三村 秀文, 芝本 健太郎, 宗田 由子, 児島 克英, 松井 裕輔, 藤原 寛康, 平 木 隆夫, 郷原 英夫, 金澤 右	【Interventional Radiology-最近の話題-】静 脈奇形の硬化療法	臨床放射線	2014	59(4)	524-532
Nunoi Hiroaki, Hirooka Masashi, Ochi Hironori, Koizumi Yohei, Tokumoto Yoshio, Abe Masanori, Tada Fujimasa, Ikeda Yoshio, Matsuura Bunzo, Tanaka Hiroaki, Tsuda Takaharu, Mochizuki Teruhito, Hiasa Yoichi, Onji Morikazu	Portal Biliopathy Diagnosed Using Color Doppler and Contrast-enhanced Ultrasound(カラードップラーと造影超音波を 用いて診断した門脈胆汁障害)	Internal Medicine	2013	52(10)	1055– 1059
佐々木 了, 荒牧 典子	 静脈奇形の痛みに対する治療 	日本医事新 報	2014	4697	64
長尾 宗朝, 佐々木 了, 工藤 信, 黒田敬, 新井 雪彦, 柏 克彦, 小林 誠一郎	われわれの工夫! 血管可視化装置を用いた 表在性静脈奇形の治療	形成外科	2013	56(9)	988-991
三村 秀文, 松井 裕輔, 宗田 由子, 道下 宣成, 藤原 寛康, 平木 隆夫, 郷原 英夫, 金澤 右	静脈奇形のポリドカノールを用いた硬化療法	IVR: Interventional Radiology	2013	28(1)	87-91
佐藤 嘉紀, 竹内 一雄, 今村 好章	【これは役立つ十二指腸病変アトラス】隆起性病変 表面が十二指腸粘膜に覆われているもの 色調変化を伴うもの 十二指腸血管腫	消化器内視鏡	2012	24(11)	1737
佐々木 了	【血管腫・血管奇形の治療戦略】海綿状血管腫(venous malformation)に対する硬化療法	形成外科	2012	55(11)	1205- 1213
長尾 宗朝, 古川 洋志, 佐々木 了, 坂 本 泰輔, 山本 有平	眼窩内静脈奇形の2例 硬化療法の適応例と 非適応例	日本形成外 科学会会誌	2012	32(8)	566-570
· 藤木 政英, 栗田 昌和, 尾崎 峰, 加地 展之, 多久嶋 亮彦, 波利井 清紀	硬化療法と手術療法を併用して治療した小 児上口唇静脈奇形の2例	形成外科	2011	54(7)	805-811
Terada Tadashi	Spindle cell hemangioma of the calf with myxoid stroma and pseudolipoblasts(粘液様 基質および偽脂肪芽細胞を伴うふくらはぎの 紡錘細胞血管腫)	The Journal of Dermatology	2010	37(10)	926-928
佐々木 了	【形成外科の治療指針update 2010】皮膚疾患 海綿状血管腫(静脈奇形)	形成外科	2010	53(増 刊)	S29-S30
河野 太郎, 八巻 隆, 櫻井 裕之, 仲沢 弘明, 大久保 麗, 中田 元子, 金 伽耶	【母斑の診断と標準的治療】脈管性母斑の 診断と治療	形成外科	2010	53(7)	747-754
三村 秀文, 藤原 寛康, 郷原 英夫, 平 木 隆夫, 芝本 健太郎, 金澤 右	【IVR Today 2009 IVRの可能性と限界 見えない壁を越えて】IVRの最新動向 限界への 挑戦 Vascular IVR 血管腫・血管奇形のIVR 静脈奇形の最新治療 フォーム硬化療法	INNERVISIO N	2009	24(12)	25-28
秋田 定伯	【血管奇形の治療戦略】静脈奇形の硬化療法 硬化剤の選択について	形成外科	2009	52(10)	1161- 1171
永田 育子, 櫻井 敦, 野村 正, 見目 和崇, 牧口 貴哉, 橋川 和信, 寺師 浩 人, 田原 真也	静脈奇形に対する硬化療法 術中透視下病 変造影の重要性	形成外科	2008	51(5)	555-560
櫻井 敦, 野村 正, 永田 育子, 牧口 貴哉, 橋川 和信, 寺師 浩人, 田原 真 也	血管奇形硬化療法における術中シミュレー ション 静脈奇形症例についての検討	日本シミュ レーション外 科学会会誌	2008	15(4)	91–94
高林 宏輔, 坂東 伸幸, 高原 幹, 野村 研一郎, 原渕 保明, 山田 有則	舌巨大静脈奇形例	耳鼻咽喉科 臨床	2008	101(2)	84-85
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