REVISION OF THE CEAP CLASSIFICATION: SUMMARY

CLINICAL CLASSIFICATION

C0: no visible or palpable signs of venous disease.
C1: telangiectasies or reticular veins.
C2: varicose veins.
C3: edema.
C4a: pigmentation and eczema.
C4b: lipodermatosclerosis and atrophie blanche.
C5: healed venous ulcer.
C6: active venous ulcer.

S: symptoms including ache, pain, tightness, skin irritation, heaviness, muscle cramps, as well as other complaints attributable to venous dysfunction.

A: asymptomatic.

ETIOLOGIC CLASSIFICATION (No change)

Ec: congenital.
Ep: primary.
Es: secondary (postthrombotic).

ANATOMIC CLASSIFICATION (No change)

s: superficial veins.
p: perforator veins.
d: deep veins.

PATHOPHYSIOLOGIC CLASSIFICATION

Basic CEAP:
Pr: reflux.
Po: obstruction.
Pr,o: reflux and obstruction.
Pn: no venous pathophysiology identifiable.
Advanced CEAP:
Same as Basic with the addition that any of 18 named venous segments can be utilized as locators for venous pathology:

Superficial veins:
1. telangiectasies/reticular veins.
2. GSV above knee.
3. GSV below knee.
4. LSV.
5. Nonsaphenous veins.

Deep veins:
6. IVC.
7. Common iliac vein.
8. Internal iliac vein.
15. Crural: anterior tibial, posterior tibial, peroneal veins (all paired).

Perforating veins:
17. Thigh
18. Calf.