



What to expect on your venous leg ulcer treatment journey: from diagnosis to healing

Rosie Callaghan, a Nurse Specialist in Tissue Viability outlines what you can expect at each step of the way of your venous leg ulcer journey.



Rosie Callaghan is Tissue Viability Nurse Specialist, Worcester

Once you have been diagnosed with a venous leg ulcer, you begin a journey and you may not know what to expect along the way. This can be daunting and create worry and anxiety. However, although everyone is different, there is a common route to healing. You may deviate off the road at some points due to setbacks such as infection, but with the right management, you should get back on the right track.

What is a venous leg ulcer?

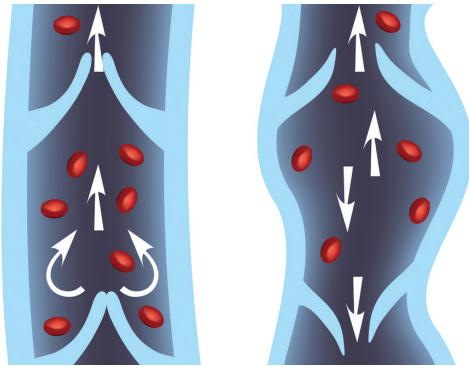
Venous leg ulcers arise when the valves in the veins of the legs are not working properly and struggle to prevent the backflow of blood in the legs as it is returning to the heart (*see figure opposite*). This means that some of the blood pools in the lower leg causing problems such as skin changes, swelling and eventually, ulceration (read more about skin changes on p.26–7).

The National Institute for Care and Health Excellence defines venous leg ulcers as ‘an open wound between knee and ankle that occurs in the presence of venous disease and that takes more than two weeks to heal’.

You will know that your ulcer is venous as your healthcare professional should have carried out a thorough assessment to establish this.

Your management

The management of a venous leg ulcer focuses on healing the wound by using



In a normal vein, the valves work to prevent the backflow of blood (left). If the valve is faulty, blood can flow backwards where it pools in the vein (right).

wound dressings and compression therapy, and addressing any factors such as lifestyle choices that may also delay healing.

Although a venous leg ulcer may heal with just the application of a wound dressing, this is a rare occurrence, and if healing does occur, it will probably not stay that way for long because the underlying cause has not been addressed; namely, helping the blood from the lower leg return to the heart. This is where compression comes in; it provides resistance to the muscles in the limb, helping to squeeze blood within the vessels, helping to clear congestion in the tissues.

Different compression methods may be used throughout your journey depending on factors such as the size of your ulcer, if swelling is present, the overall shape and size of your limb, and your preference.

For example, if your wound is large and producing a lot of fluid (known as wound exudate) it may need a large bulky dressing to manage the fluid and prevent leaking. At this stage, you will probably need to have multi-layer compression bandaging applied. This is so that padding can be used to make your leg into a cylindrical leg shape so that compression bandaging can be applied over the top of the dressing to deliver the correct amount of pressure. Likewise, if your limb shape is distorted due to significant swelling, padding will be used to restore a cylindrical shape and then compression bandaging applied.

However, it is well recognised that multi-layer bandaging can be bulky, hot, and uncomfortable, as well as inconvenient as normal clothing and footwear may no longer fit. It can affect your ability to bath and shower, and care for your limb. If you need bandaging, it is important to remember this phase of treatment does not need to be forever. It is simply to reduce wound size and swelling until a different compression option can be used.

Once your wound has reduced in size and is producing less exudate, and swelling has reduced, you can discuss other compression options with your healthcare professional.

Compression hosiery kits have been shown to be as effective as bandaging in healing venous leg ulcers in a recent trial. This means they can be used as an alternative for some people with a venous leg ulcer (limb right shape, wound not too big).



They can be applied and removed by the wearer or carer, helping the wearer to care for themselves without nurse visits needed for bandage application. Normal footwear can be used too. Hosiery kits are also ideal for preventing the recurrence of ulceration once your leg ulcer has healed. They are not suitable were the limb is swollen and still reducing in size; this means the hosiery will become too big as limb volume reduces.

Venous leg ulcers are more likely to come back in patients who do not wear compression hosiery once healing has occurred.

Similarly, compression wraps are available that enable self-application. They have the benefit of being adaptable as limb volume reduces, making them an option for cylindrical shaped limbs with swelling that is reducing.

All compression should be worn as directed by your healthcare professional. Garments are usually worn during the day to aid venous return.


While compression addresses the underlying cause of your venous ulcer, it is important that your wound and surrounding skin is also cared for to improve the chance of healing. As healing progresses, your wound should become smaller and should produce less fluid and be less painful. Your wound should be covered with a suitable dressing for it's conditions. A dressing is important as it protects the wound from infection and stops

it becoming too dry, which can delay healing. A sudden increase in exudate, pain, odour or the presence of redness, and heat may indicate infection, and you should contact your healthcare professional as soon as possible.

Once healed, take care of your skin by cleansing and moisturising. Wearing a compression garment in the long term has been shown to prevent recurrence. Patients who do not wear compression following

healing have been shown to have a very high rate of ulcer recurrence. You will undergo regular review to ensure your underlying health is OK and to reduce the risk of further skin breakdown.

Sadly healing is not possible for everyone, as lots of other health complications or terminal illness, can stop this from happening. However, symptoms such as odour, pain and leaking can be managed so that they have a minimum impact on quality of life. These symptoms are known to be the things that cause the most distress to people with venous leg ulcers, and their management is the thing that is desired more than healing.

Whatever your stage of the journey, be sure to discuss your options with a healthcare professional so that living with your ulcer has a minimal impact on your quality of life. 



Juzo[®]
Lymphology

CLASSIC SEAMLESS TOE CAP from Juzo

A new standard in lymphology



Model Toe Cap

- + OTS sizes II – V
- + available for left or right
- + pressure-minimised borders avoid constrictions
- + particularly soft
- + micro-massage effect

Colour



Sesame



Almond



Black pepper

Product features



seamless
knitting



123... OTS

Juzo[®]. Freedom in Motion