



# Why is vascular assessment important?

If you wear compression hosiery on your lower limb, it is important that you undergo regular vascular assessment to make sure that it is safe for you to wear your garment. Here, we explain why.



Vascular assessment is a key part of ongoing care for people who wear compression to manage their lower-limb condition. However, a significant study that looked into the prevalence of wounds in the UK highlighted that only 16% of all people with a leg or foot ulcer had evidence of a recent vascular assessment recorded in their medical notes (Guest et al, 2015). This finding had the implication that a large number of people were potentially wearing compression that could cause them harm. So just why is vascular assessment so important if you wear compression?

Compression therapy is a key component of the long-term management for people with venous leg ulcers and other problems such as lipoedema and lymphoedema. These conditions benefit from the help that compression provides in returning blood to the heart from the veins in the lower limbs. However, in some patients, if there is also arterial disease present, wearing compression may result in discomfort and damage to the wearer.

Vascular assessment is therefore carried out to check the blood flow to the limb to make sure that wearing compression won't result in harm by

# Why use Flamigel® RT

Protecting the skin against  
radiotherapy-induced dermatitis with  
Flamigel® RT



Flamigel® RT is a hydro-active colloid gel (not a moisturiser/emollient) which delays the onset and reduces the incidence of radiotherapy-induced moist desquamation.

## Care advice for Flamigel® RT

- ✓ Creates optimal healing conditions to accelerate cell renewal
- ✓ Reduces redness and irritated skin
- ✓ Protects the skin
- ✓ Reduces pain
- ✓ Hydrates the skin and restores moisture balance
- ✓ Provides a barrier against contamination
- ✓ Cools the skin

Flamigel® RT helps to continue the prescribed radiotherapy treatment by delaying the onset and reducing the incidence of radiotherapy-induced moist desquamation (RIMD).

**Care.** Always ask your Health Care Professional's advice.



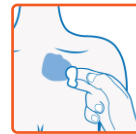
### Clean

Clean the skin with clean water or with a specific wound cleanser if advised by your nurse or doctor.



### Dry

Dry the skin gently with a clean towel by patting the skin.



### Treat

Using your fingers apply liberally Flamigel® RT 3 times per day to the treated area. Use from day 1 of treatment.

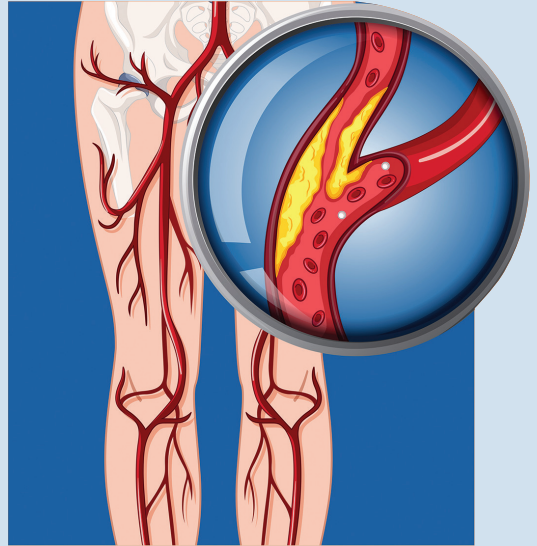


## Signs and symptoms of peripheral arterial disease

Peripheral arterial disease can result in a number of signs and symptoms that relate to restricted blood flow to the limb. These include:

- Hair loss on the feet and legs compared to your other leg
- Pain in the thigh, calf, or one or both hips when walking or climbing stairs. This is known as intermittent claudication
- Coldness in the lower leg and/or foot, compared to the other limb
- Numbness and/or weakness in the leg.

However, some people with PAD may not have any symptoms at all.



restricting blood flow. The most common cause of restricted blood flow in the lower limb is peripheral arterial disease (PAD).

### Peripheral arterial disease

PAD is a common condition in which a build-up of fatty deposits in the arteries restricts blood supply to the leg muscles. This can result in a number of sign and symptoms (*see box above*). However, in some people, there may be an absence of symptoms, even if PAD is present.

In people with PAD, wearing full compression can restrict the reduced blood supply to the limb even more. This could result in a worsening of symptoms, skin damage and breakdown and in worse cases, cut off the blood to the limb entirely.

### What is vascular assessment?

Vascular assessment is therefore carried out to rule out the presence of PAD so that compression therapy can be used safely.

The most common type of assessment is calculation of the ankle brachial pressure index (ABPI). ABPI compares the blood pressure at the ankle compared with blood pressure in the arms. It can be worked out easily in a clinic setting, either using Doppler ultrasound or one of the newer devices that are designed to measure ABPI easily and quickly. Once your ABPI has been calculated, your healthcare professional can interpret your results, and will advise you on what they mean.



An ABPI  $<0.8$  is suggestive of reduced blood supply to the legs, indicating that PAD may be present. Your clinician may refer you for further investigations at this stage.


Vascular assessment is performed to rule out the presence of peripheral arterial disease so that compression can be worn safely.

### When was your last assessment?

People who are being managed with compression therapy should have regular vascular assessment to ensure their

In some people/situations, alternative investigations to ABPI may be required. The reasons for this will be explained to you by your healthcare professional. If you have a swollen lower limb, for example, your clinician may be unable to calculate your ABPI so a different method may be needed to check for PAD before you are cleared for compression therapy.

arterial status has not worsened. Ideally, reassessment should be carried out at 3-, 6- or 12-month intervals, depending on your individual circumstances (NICE, 2013).

If you don't know if you have had a vascular assessment at all, or if you are due a new check, speak to your healthcare professional to ensure your compression therapy won't do you harm. 

Guest et al (2015) <https://bmjopen.bmj.com/content/5/12/e009283>; NICE (2013) <https://www.nice.org.uk/guidance/cg147>



### Jane Todhunter, Vascular nurse practitioner, North Cumbria University Hospitals comments:

Wearing compression hosiery is an important part of the long-term management of many conditions. However, before any compression is prescribed you should have had a full assessment by a qualified practitioner who has the knowledge and skills required to provide you with a diagnosis and make decisions about your care.

Your ABPI should be measured as part of your initial assessment to see if compression hosiery is suitable and safe for you to wear. Please ask your healthcare practitioner what the results of your vascular test mean and when you are due your next test. You might only need vascular assessment once a year, or it may be more often; put the date(s) in your diary. The healthcare practitioner who assessed you and prescribed your hosiery should guide you the first time you are putting your hosiery on as well as providing advice on skin care and care of the hosiery. If you are having difficulty putting the hosiery on or off, please ask about aids that may be available to help. Make sure you know when you should be getting new hosiery, usually you will get two pairs every 6 months and at this stage you might need to be remeasured, if your health has changed during this time.



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