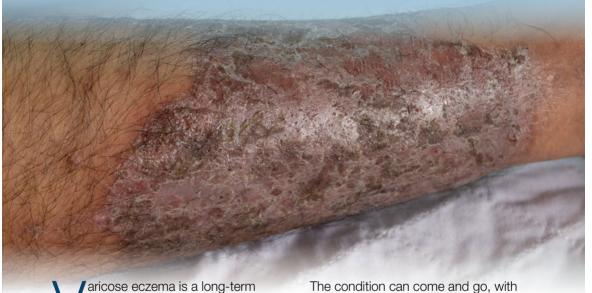
# Understanding varicose eczema and how to treat it

Varicose eczema is a long-term condition of the lower limbs that can result in pain and discomfort, affecting your quality of life. Read on to find out what causes it and how to manage it to minimise its impact on your life.



aricose eczema is a long-term skin condition affecting the lower legs. You may have also heard it called venous eczema, stasis eczema or gravitational eczema (NHS UK, 2019). Similar to other types of eczema, the skin becomes dry and flaky, scaly or crusty, red and swollen and itchy. In some people, the eczema can be severe and there may be patches of skin that weep (Legs Matter, 2021).

The condition can come and go, with periods of improvement or flare-ups when the condition of the skin worsens (NHS inform Scotland, 2022).

## What causes varicose eczema?

The cause of varicose eczema starts with problems in the veins of the legs. Healthy veins have small valves which push the blood along. The veins in the legs have to work very hard as they

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### Varicose eczema



help the blood within to move upwards against gravity. Sometimes the valves stop working properly and blood can leak backwards. This increases the pressure in the veins which causes fluid to leak into the surrounding tissue (NHS UK, 2019). It is thought that this fluid irritates the skin causing varicose eczema (Legs Matter, 2021).

Varicose eczema is therefore common in people with varicose veins (swollen and enlarged veins that are usually blue or dark purple) as they are also caused as a consequence of the veins in the legs not working properly.

Varicose eczema can occur alongside other skin changes that are a sign of a problem with the veins, including:

Discolouration above the ankle (reddish brown on lighter skin, dark brown, purple or grey on darker skin)

- Small, white scars
- Pain
- Red, tender skin that can become hard.

Varicose eczema is also more common in women, during pregnancy (this increases the pressure in your leg veins: see p.28 for more information) and following a deep vein thrombosis (a blood clot that develops in a leg vein and can damage the valves) (NHS UK, 2019).

# How to prevent varicose eczema

There are some measures that can help to reduce your chances of developing a problem with your lea veins and varicose eczema. These include:

- Reducing your weight if you are overweight as this can increase the blood pressure in your lea veins
- Keeping active, especially in older age being immobile or remaining seated for long periods of time can affect the circulation of blood in the lea veins causing it to pool and increase blood pressure within the veins (NHS UK. 2019).

# How to look after varicose eczema

If untreated, the underlying cause of varicose eczema – venous disease will progress and worsen, leading to further skin changes and potentially skin breakdown, resulting in a leg ulcer (a long-lasting wound/sore that takes more than 2 weeks to heal) (NHS inform Scotland, 2022).



# Helping to maintain skin integrity

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# Hints and tips for looking after your skin if you have varicose eczema

- Use warm water and a moisturising soap substitute when washing, bathing
- Gently dry the skin avoid rubbing which can cause friction and irritation

- Allow the moisturiser to soak in before putting clothing is on

It is very important not to scratch as it may cause damage and break the skin (Legs Matter, 2021). Keeping your skin clean and well moisturised will help reduce irritation and itch (Box 1).

If you have a flare-up of varicose eczema your skin may need more than a moisturiser. A mild steroid cream may be required which can be prescribed by a doctor or nurse. Compression therapy (e.g. stockings or socks) can also improve your skin condition as it helps the flow of blood in the veins by gently squeezing the legs, reduces the build-up of pressure and so eases varicose eczema.

# When to seek help

If you have any signs or symptoms of varicose eczema, see a GP. They will be able to make a diagnosis by looking at your skin and asking some questions. You will be asked if you have ever had varicose veins, a deep vein thrombosis,

a leg ulcer, cellulitis (an infection of the skin) or surgery/injury to your leg (NHS UK, 2019). In some cases you may be referred to a dermatologist who specialises in skin conditions.

It is important to look after your legs. If you or someone you know has lea and/or feet problems, it can help to do something sooner rather than later. You can get information, practical advice and support from experts by looking online

### References

- Legs Matter (2021) Dermatitis: dry and itchy skin. Available online: https://legsmatter.org/ help-information/for-patients-family-friends/ dermatitis-dry-and-itchy-skin/
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