Leg Ulcer Clinic Welcome Pack
Tissue Viability Service

For further information about this service contact:

Luton Tissue Viability Team
Luton Treatment Centre
6 Vestry Close
Luton
LU1 1AR

Contact Number:  Reception  -  0333 405 0048
                Administrator -  0333 405 3127

If you require this information in a different format such as in large print or on audio tape, or in a different language please contact the service on the details above.

If you have any compliments about this service or suggestions for improvements, contact our Patient Advice and Liaison Service on 0300 131 1000 (charges may apply depending on your network) or email: ccs-tr.pals@nhs.net.

For free, confidential health advice and information 24 hours a day, 365 days a year please contact NHS 111.
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**Tissue Viability Team - who's who?**

Janice Little - Tissue Viability Specialist Nurse
Vicki Brookes - Tissue Viability Specialist Nurse
Carly Morrison - Tissue Viability Sister
Caroline Littler - Tissue Viability Sister
Barbara Niblett - Tissue Viability Sister
Sarah Dumbrell - Tissue Viability Sister
Kirsty Hughes - Tissue Viability Sister
Krystina Hatton - Tissue Viability Assistant Practitioner

**Clinic days and opening times**

Monday 8.30am - 4pm
Tuesday 8.30am - 12noon
Wednesday 8.30am - 4pm
Thursday 8.30am - 4pm
Friday 8.30am - 1pm
Saturdays, Sundays and Bank Holidays - Closed

Contact Number: Reception - 0333 405 0048
Administrator - 0333 405 3127

*If you need to be seen when we are closed please ring your GP or NHS 111*

**Student nurses and community nurses**

Over the next few months there may be student nurses observing and trained community nurses gaining their bandaging skills with us in the leg ulcer clinic.

If you do not wish for a student/community nurse to be present during your appointment, just tell a member of the team.
What is a venous leg ulcer?

What is a vein?
A vein is a blood vessel that carries blood back to the heart. The veins in your legs carry blood up the body towards the heart. The veins contain valves so that the blood is not able to flow backwards.

When you move your leg, the calf muscle squeezes the vein to push the blood upwards.

Arteries carry blood from your heart around the body.

Why do I have a venous ulcer?
Sometimes the valves in the veins do not work properly and the blood flows backwards. This can cause congestion in the leg, especially around the ankles.

This problem happens over a period of time and you might have noticed swollen veins in your leg and perhaps some varicose veins. This is a sign of the congestion in your leg.

The congestion in your leg makes the skin very fragile and a knock or scratch can take a long time to heal, sometimes more than 4-6 weeks; we call this a ulcer.

Why do my ankles swell?
The congestion in your leg causes extra fluid to build up in your ankles. This gets worse if you stand for a long time because the blood flow slows down. If the swelling is not treated it can make the situation worse.

Treatment is often a combination of medicine, bandages, leg elevation and exercise. It is important to put your feet up when you are sitting down and to get a good rest in bed at night.

Why has the skin on my leg changed colour?
The congestion of blood in your legs makes the veins swell. The swollen veins allow a little of the red cells in your blood to leak out into your leg, just under the skin. This means that the tone of the skin can change from red to brown.

Personal Goals to be achieved by the patient

1) ..............................................................................................................   ...........

2) ..............................................................................................................   ...........

3) ..............................................................................................................   ...........
Smoking

Nicotine from inhaled smoke causes the blood vessels that carry blood to your wound to become narrow, reducing essential nutrients that aid wound healing.

If the blood flow is decreased due to inhaled smoke, this also means the nutrients to heal the wound are decreased. This reduces the body’s chance of healing the wound in a normal manner, or may even cause healthy tissue to die.

Quit smoking

Quitting is the best possible choice you can make to help your wound(s) heal faster, safer and with fewer problems. It is also the best way to start a healthy lifestyle.

If you would like to STOP smoking or are thinking about stopping please fill in the smoking cessation form provided for you.

Weight Management

If you are over weight, then losing weight can help prevent venous leg ulcers because excess weight contributes to high pressure in the leg veins, which can cause damage to the skin. Venous ulcers are much more common among people who are over weight than in people of healthy weight.

To help with weight loss do at least 150 minutes of moderate intensity exercise every week, eat smaller portions and have only healthy snacks between meals. A gradual weight loss of around 0.5kg (1.1lbs) a week is usually recommended.

A low–fat, high fibre diet that includes whole grains and plenty of fresh fruit and vegetables (at least five portions a day) is recommended.

Why is the skin on my legs so dry?

The congestion of blood in your leg and the extra fluid build up, stretches your skin that makes it more delicate.

The congestion also makes it difficult for new, fresh blood to get to your leg as it used to. This means that natural moisturisers are not produced to keep the skin supple and healthy. The skin becomes dry and flaky, and it may itch a little.

It is important to protect the skin and not to scratch. Your nurse will advise you on how to wash your leg and which moisturisers to use.

In many cases a venous ulcer will heal within three months. If the ulcer is very large or if there are problems with other types of blood vessels, it may take longer.

The important thing is to discuss your care with the nurse and to wear the bandages prescribed for you. The bandages are a very important part of your treatment, as they will help to speed up the flow of blood in your veins. If you are diabetic, have arterial disease or rheumatoid arthritis you may be at higher risk of ulcers that may take longer to heal and be more painful.

You may need to be referred on to other specialist services e.g. vascular specialist, dermatology, diabetes or podiatry for further assessment.
Skin Care

Your skin provides many functions including temperature regulation and protection. It is important to maintain your skin in a healthy condition.

What you can do to help

• Pay particular attention to cleansing.
• Avoid perfumed soaps.
• Dry very carefully paying particular attention to skin folds and between the toes.
• If your skin is dry and flaky regular use of an Emollient/cream is important.
• Bedtime is a good time to apply your emollient if you remove your hosiery at night.
• Try to always wear footwear and avoid walking barefoot.
• Seek advice promptly for any cuts, grazes, blisters or bruises.
• Seek advice promptly if your leg becomes unusually hot or more swollen.
• If your legs become more swollen don’t attempt to put on your compression hosiery.
• Try to avoid insect bites, by using a good repellent

**When using cream/emollient apply it in a downward direction from knee to toes**

Some of these creams and washes you may use on your legs.

What is Hydration?

Hydration is adequate fluid intake. It important to drinking plenty of fluid as this will help with any wound healing.

Try drinking fresh cool water. Fruit juice, milk, tea and coffee can also be taken. Opt for water, drinks that are sugar-free or skimmed milk if you have diabetes or you are trying to lose weight.

Around 20% of our daily intake of fluid is contained with in our food: If you find it difficult to increase the amount you drink try opting for foods high in moisture such as fruits and vegetables as some are up to 90% of water.

Two rings of pineapple (80g) = 70ml of fluid

One tomato (85g) = 80ml of fluid

• Semi– liquid foods count towards total fluid intake. Try soups, sauces, jellies ice lollies and ice cream to increase fluid intake further.

• Avoid large amounts of caffeine and alcohol as these can make you pass more urine and increase your risk of dehydration. Consume no more than four caffeine containing drinks per day. If you choose to drink alcohol, do so in line of current government guidance.

• Try drinking in between meals or after eating - avoid filling up on fluids before eating.

• Try to fit your fluid intake around your daily routine. For example try a full glass of water with medication(s), fruit juice after breakfast, squash after lunch, a smoothie or milkshake mid-afternoon, and a hot chocolate before bedtime. It is important to drink plenty of fluid as this will help with any wound healing.
What is nutrition?
Nutrition is the intake of food, considered in relation to the body’s dietary needs. Good nutrition facilitates the wound healing process but malnutrition may delay, inhibit and complicate wound healing. Many nutrients have a role to play in wound healing, working in isolation or in combination with others.
- Good nutrition—An adequate, well balanced diet combined with regular physical activity is a cornerstone of good health.
- Poor nutrition—Can lead to reduced immunity, increased susceptibility to disease, and poor wound healing.

What are nutrients?
Food provides a range of different nutrients. Some nutrients provide energy, while others are essential for growth and maintenance of the body.

Carbohydrates, protein, and fat are macronutrients that we need to eat in relatively large amounts, as they provide our bodies with energy and are the building blocks for growth and maintenance of a healthy body.

Vitamins and minerals are micronutrients, which are only needed in small amounts, but are essential to keep us healthy. There are not strictly nutrients but are important for health, such as water and fibre.

- Carbohydrates provide energy for the body. They are all starchy foods, such as bread, rice, potatoes, cereal products.
- Proteins provides amino acids (building blocks) that we can’t make ourselves. Needed for growth, development and repair the body, also provides energy. You can find them in: meat, fish, eggs, dairy foods, cereal products such as bread, soya products, nuts and pulses.
- Fats provides essential fatty acids (that we can’t make ourselves but need in small amounts), as well as energy. It also carries important fat-soluble vitamins and is important for their absorption. You’ll find them in: fats and oils, meat and meat products, dairy foods, oily fish, nuts, cakes, biscuits, pastry products, crisps, and other snacks and chocolate.
- Vitamins and minerals are vital for all aspects of our health, and are generally obtained in a healthy balanced diet. Fruit and vegetables are good source of these, so it is important to eat at least five portions a day and choose a rainbow of colours.

Evaluation and exercise to improve healing
Following an exercise programme can contribute to faster healing of your leg ulcer and also prevent future ulceration.

Get yourself in a comfortable position. You might find it easier to these exercises whilst laying on the bed or the settee. It is best to do exercise while wearing your bandages or compression hosiery.

Before exercising your legs do some deep breathing, place your hands on your tummy and breathe slowly in and out five times and feel yourself pushing your hands outwards.

Exercises
Try and do each of the following exercises five times to begin with and increasing gradually. Repeat exercises two or three times per day.

1. Wiggle your toes

2. Move your ankles up and down slowly and as hard as possible and feel the muscle in your calf tighten

3. Circle each ankle anticlockwise, then clockwise

4. Bend and straighten knee

5. Pull toes upwards, tighten thigh muscle and hold for a count of three.
Compression Bandaging

Why you need compression bandaging

In order to overcome the problems associated with your damaged veins and ulceration, your practitioner has prescribed compression bandages.

These special bandages apply enough pressure to help the veins do their job better. This should help your ulcer to heal. There are different types of bandages and your practitioner will prescribe the one most suitable for you. The bandages can be elastic or made of cotton. They are applied over a layer of padding, which cushions your leg.

Research on compression has shown that compression bandaging is more effective at healing ulcers than dressings alone. Your practitioner will be able to tell you more about the particular bandages that have been chosen for you.

It is important that you understand why the bandages are applied in the way they are and how you can help.

You must contact the clinic if:
- you get pins and needles in your toes
- Increased pain
- If you toes turn blue/purple

The bandages will be applied from the base of your toes to just below the knee
This prevents your foot and the top of your calf from swelling.

The bandages should feel firm and allow your ankle and foot to move freely.
The bandages need to feel firm especially around the ankle to heal the ulcer.

The bandages are applied evenly all the way up to the knee.
This even application will give more support around the ankle than the knee due to the smaller circumference of the ankle. This is necessary to support the veins in returning blood to the heart.

You should be able to wear a shoe over the bandages and you must walk as much as possible.
It is important to wear a good fitting shoe to avoid pushing the bandages out of place on your foot. The person providing your treatment may be able to offer advice on footwear. Trainers may give good support whereas some slippers are poor. Walking with your bandages on will help the treatment.

Exercise is also important to help your ulcer heal.

Common types of bandaging

Multi-layer system

Profore 1  Profore 2  Profore 3  Profore Plus  Profore 4
(Wool padding)

Short  stretch  sys- tem  Short Stretch

Cellona (Padding)