



LEG ULCERS, WOUNDS AND NON-HEALING SORES ON THE LEG

We all damage our legs from time to time. It's easy to knock our leg on a car door or shopping trolley, or sometimes an insect bite can turn into a wound or leg ulcer.

These wounds should be showing signs of healing within 2 weeks of injury. If a wound is taking longer than a couple of weeks to show signs of healing or the wound is weeping and getting larger, then this might be a sign of an underlying problem which needs looking into.

WHY MIGHT A WOUND ON THE LEG NOT HEAL?

This is because the wound is on the leg and is much more difficult to heal than wounds on another part of the body. We spend a lot of time on our feet and if we have any swelling, this will interfere with healing.

If you stand a great deal, or you are carrying excessive weight, this will not help your circulation. Any wound, except those caused by arterial disease (see below) will benefit from some form of compression therapy.



Venous hypertension/insufficiency

The most common cause of poor healing on the lower leg is venous hypertension. You may also hear it referred to as venous insufficiency, venous reflux or venous disease. 'Venous' means anything related to our veins. Blood is pumped from our heart to the rest of our body through our arteries and returns to our heart through our veins. It is then propelled back to our heart by our heart pumping. Our leg and foot muscles help this along by circulating blood as we walk and move our ankles. This is why standing a lot or sitting with our legs down for long periods may stop a wound from healing.

Our veins contain one-way valves to stop the blood falling back towards your feet. These valves can become weak or damaged. When this happens, our veins become so swollen that blood is forced into the tissue of your skin. This makes our skin swollen, fragile and unable to heal as normal.

You might also notice that your ankles are swollen, that there is brown staining on your legs or that your wound is leaking.

To help our veins work better and to control any swelling, compression therapy is an essential part of any treatment plan.

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Peripheral arterial disease

Another reason why our lower leg wound might not be healing is because not enough blood is getting to our feet. Blood travels from our heart to our feet through our arteries. If our arteries become too narrow, not enough blood will get to our skin for our wound to heal as normal.

This can happen because our arteries have become 'furred' up by the build-up of fibrous and fatty material inside the arteries (atherosclerosis). Atherosclerosis is the main cause of heart disease such as heart attacks and strokes but also affects the arteries that supply the legs. This is called peripheral arterial disease.

If you have issues with your arteries, it is essential that you receive assessment by a Vascular Consultant to see if improvements can be made. If your arterial blood flow can be improved, this will help any wounds to heal.

Diabetes

Peripheral arterial disease is a known complication of diabetes. You can read more about peripheral arterial disease and diabetes on NHS Choices and on the Diabetes UK website.

Other causes for non-healing

There are some health conditions and skin conditions that can affect wound healing but these are much less common than venous insufficiency and arterial disease.

Infection can also slow down healing but is unlikely to be the main reason why a wound on the lower leg is not healing.

Your treatment plan needs to be aimed at treating the reason for the deterioration or slow healing of your wound.

GETTING DIAGNOSED

If you have a wound or sore that isn't healing, make an appointment at your GP practice as it could turn into or be the beginnings of a leg ulcer. You might be given an appointment to see the nurse rather than the doctor as nurses are often responsible for caring for patients with leg problems.

Alternatively, there might be a Leg Club or specialist leg clinic in your area. You can attend these without having to be referred by your GP.

Remember to remove any nail polish from your toenails before your appointment.

When you see the nurse or doctor, they should:

- Ask about your symptoms and how long you have had problems
- Examine your lower legs
- Do a simple test called a Doppler Ultrasound. This test compares blood flow in your ankle with that in your arm to find out if there are blood flow problems in your lower leg. You may have to come back to have your Doppler test on another day or at another

clinic

You may also be offered some other tests to check for other health problems that can affect your legs such as diabetes and anaemia.

If your GP practice thinks you have problems with your veins or arteries, they may refer you for more tests at your local hospital or specialist clinic.

You may hear different words to describe your wound such as ulcer, leg ulcer, sore, laceration, chronic wound and maybe others. Ask your nurse to explain their choice of word and what this may mean for you.

TREATMENT

Compression therapy (support bandages or socks)

If your wound isn't healing because of venous hypertension and there are no problems with the blood supply to your legs, then you should be offered compression therapy.

Compression therapy improves blood supply by applying pressure to the leg. This can be done by bandaging the lower leg or by wearing supportive socks, stockings or tights. Compression therapy is very effective at reducing swelling, improving blood flow in the veins and healing or preventing sores or ulcers.

There are lots of different types of compression therapy so ask your nurse to find something that is right for you.

Compression can be a little uncomfortable when you first start treatment but should not cause you any pain. Any discomfort should reduce as the swelling goes down. If you do experience discomfort, talk to your nurse or doctor about it and they will advise you on ways of alleviating this.

In addition to the compression, your nurse should also advise you on wound care and dressings to keep your wound healthy.

Getting a specialist, vascular referral

If you have venous hypertension, intervention to your veins from a vascular specialist might help with healing and stop your wound or sore from coming back. Sometimes varicose veins can be treated by laser therapy. If you have peripheral arterial disease, you may require further investigations and the vascular team will be able to assess the need to improve the blood supply to your leg or whether your ulcer can be managed in other ways such as reduced/modified compression. Ask your nurse or doctor for a referral to your local vascular team to talk about how their input might help you.

HEALTHCARE ADVICE

There are some lifestyle changes you can make that will help boost healing:

- Maintain a healthy weight
- Eat a well-balanced diet that includes 5 portions of fruit and vegetables a day and protein rich foods such as eggs, fish, chicken or pulses
- Take light to moderate exercise such as cycling or walking for about thirty minutes at least three times a week
- Avoid standing or sitting for long periods of time
- Put your feet up – elevate your legs above your heart.
- Every so often, move your feet around in circles, then up and down. This helps blood circulate and get back to your heart

GETTING A REFERRAL

Your nurse or GP may refer you to a specialist tissue viability nurse or to a vascular service for further advice if your leg or foot condition or wound is failing to improve.

OTHER SUPPORT

Accelerate

We're based in East London but can accept national referrals from your GP / specialist to our world-class centre where we pioneer and trial experimental new treatments for chronic wounds, lymphoedema and mobility challenges.

T: 020 3819 6022 | E: hello@acceleratecic.com
W: acceleratecic.com

The British Heart Foundation

The British Heart Foundation were founded in 1961 by a group of medical professionals wanting to fund extra research into the causes, diagnosis, treatment and prevention of heart and circulatory disease. Today they are the nation's heart charity and the largest independent funder of cardiovascular research.

T: 0300 330 3322 | E: supporterservices@bhf.org.uk
W: bhf.org.uk

Diabetes UK

Diabetes affects more people than any other serious health condition in the UK. More than dementia and cancer combined.

Diabetes UK are the leading UK charity for people affected by diabetes it's their responsibility to lead the fight against the growing crisis. And this fight is one that involves all everyone – sharing knowledge and taking diabetes on together.

T: 0345 123 2399 | E: helpline@diabetes.org.uk
W: diabetes.org.uk

The Lindsay Leg Club Foundation

Promoting and supporting community based treatment, health promotion, education and ongoing care for people who are experiencing leg-related problems - including leg ulcers and other wound care issues.

T: 01473 749 565
E: lynn.bullock@legclubfoundation.com
W: legclub.org

NHS Choices

The official NHS website, which provides vital information and support about leg and foot signs and other symptoms. T: 111 | E: nhs.uk

Find out more about the campaign and how you can get involved

legsmatter.org

