



A Patient Guide to Self care of Venous Leg Ulcers

Why did my skin breakdown? Leg ulcers are a problem that is already established under the skin, and just waiting for an opportunity to break out. Clients often believe that a knock or bite is responsible for their ulcer. This is only partly true, as the knock was the opportunity for the ulcer (already and waiting) to open.

There are several different reasons why an ulcer occurs, the main reason is that your veins are not fully functioning and this leads to a type of wound called a 'venous leg ulcer'.

What is a venous leg ulcer?

A venous ulcer is due to a common condition in your veins where fluid collects in your lower limb. Normally, blood is forced away from your feet, through blood vessels (called veins), when you walk or when you put your feet up in the evening. Each of these veins has small sets of valves that prevents the fluid in the blood from returning down to the feet.

As we age, these valves cease to function effectively and fluid is allowed to pool in the feet; that is why your feet often swell. This swelling is also responsible for many of the changes you may have observed in your skin, such as brown discolouration on your legs or redness over the ankle.

Can I walk around while I have an ulcer?

Walking is one of the best methods of returning blood to your heart. Therefore, walking as much as possible is advisable. However, when you sit down in a chair, you should have your feet raised as much as possible as this enables the blood to go back to your heart.

How can the ulcer be healed?

There are many reasons why a wound does not heal quickly. Your healthcare professional can advise on treatment, diet and mobility.

The quickest method of healing is by a tight bandage called 'compression therapy'. The type of dressing selected for your use is secondary in importance to the compression therapy. However, before compression can be used, you will need to be assessed by your nurse with a small hand held machine called a Doppler, which provides details of how effective your arteries are within your legs. This is a necessary but painless and non-invasive procedure.

How can I reduce pain in my ulcer?

Pain is not always straightforward, and your nurse will need to investigate why you are suffering pain and then can provide you with appropriate advice.

If the pain is due to the wound surface feeling sore, then the pain will reduce once compression therapy has been commenced. There are also dressings that can reduce pain. If the pain is due to nerve pain, then a short course of special tablets may help you. Please see your local Healthcare professional for further advice on this.



Can I care for my own ulcer?

Yes, you can. Your nurse will give you support in teaching you and/or a friend or relative in how to care for your wounds, what to look for and when to ask for help. Your nurse may wish to still see you weekly to ensure that your wound is progressing well, and to see if you require a different dressing. A few simple exercises repeated 10 times every hour will help, such as

- Rotating your ankle in a circular motion, then up and down
- Bending the knees, support yourself with a chair, bend gently up and down on your toes
- Wiggle your toes

Will the ulcer return once it has healed?

This will depend on the amount of blood flow to and from the legs. You may require further ongoing assessments every three to six months.

For more information on venous leg ulcers or any other type of wound, please contact:

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