

Arterial Leg Ulcers

An information guide



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What are the aims of the leaflet?

This leaflet has been written to help you understand more about arterial leg ulceration and its causes, treatment and prevention.

It is not a substitute for the advice your healthcare professional may give you, but can act as a starting point for discussion.

How is an arterial leg ulcer diagnosed?

Your healthcare professional will undertake a full holistic assessment of your condition, your medical history, lower limb examination, including a test to assess your circulation. This is called a Doppler ultrasound procedure (see separate leaflet). The Doppler will examine the blood supply to your legs, allowing the healthcare professional to decide on the most appropriate treatment.

What causes an arterial leg ulcer?

Arterial leg ulcers are caused by problems with your arteries. Arteries are blood vessels which carry blood from the heart to your legs in order to keep them healthy.

These ulcers can develop when the arteries become blocked or narrowed (arteriosclerosis), which leaves the skin starved of vital oxygen and nutrients.

Arteriosclerosis happens to everyone as they get older, however, it is accelerated by the risk factors listed below.

You may experience pain on walking which is relieved by rest, otherwise known as intermittent claudication. This occurs as a result of a narrowing or blockage in your arteries, the blood supply

is reduced and thus the muscle becomes starved of oxygen, resulting in the pain.

Other people may experience pain at rest, which is usually worse at night. This is because when the legs are elevated the blood supply to the feet is reduced. The pain usually improves when the legs are lowered, such as hanging them over the side or when sitting or standing.

Risk factors

- Smoking
- High fat diet
- High blood pressure
- Stress
- Being overweight
- Lifestyle
- Diabetes
- Rheumatoid arthritis
- Heart disease
- Anaemia
- Stroke
- Family history of heart disease, strokes or high cholesterol

What treatment will I need?

The treatment of arterial ulcers is different from that of venous ulcers. Compression bandages are not indicated if the blood supply is reduced. You will be treated with wound dressings and bandages under the specialist supervision of a healthcare professional.

In most cases it may be necessary for you to be referred to the hospital's vascular service for further investigations, in order to take a closer look at your circulatory problem.

The vascular specialist team may advise that investigations are performed, in order to assess whether surgical or radiological treatment can be performed to open up the arteries, improving the blood supply and thereby helping the ulcer to heal.

How long will my leg ulcer take to heal?

This is a difficult question as ulcers may take a long time to heal. You should discuss this with your healthcare professional.

What can I do to help the healing process?

A combination of the following is needed:

1. **If you smoke, please stop**, as smoking increases the narrowing of the arteries. However, if you stop smoking this process is slowed down. There are a number of support groups that can help with this. Please ask your healthcare professional for information.

2. **Exercise** – walking is the best form of exercise. Increasing the distance you walk helps with the formation of new blood vessels which carry blood around the blockage (collateral circulation). Usually within 6-8 weeks of starting you should notice some improvements in the pain as the collateral circulation opens up.

3. **Healthy eating** – cut down on fatty foods and eat plenty of fresh fruit and vegetables. Some ulcers may need additional vitamins and minerals to help them heal. Try to lose weight if you are overweight and if you are underweight you may need to eat little and often, your doctor or healthcare professional can advise you.

4. **Take care of your feet** – look out for any new ulcers or changes in colour or skin temperature. If you are unable to do so, ask a friend or use a mirror. Your toe nails should be cut on a regular basis. Do so with care, ensuring that you do not damage your skin. Otherwise seek help from a podiatrist (chiropodist).

5. **Sensible footwear** – make sure your shoes are comfortable and fit correctly. Shoes which are too tight or rub can cause pressure and ulcers. Do not walk barefoot.

6. **Skin temperature** – keep your feet warm by wearing thick socks and slippers. Avoid hot baths, hot water bottles or sitting too close to the fire.

7. **Take care not to bang your legs**, as many ulcers start with an injury.

8. **Drink plenty of fluids** during the day unless advised otherwise by your doctor, as this may help your ulcer heal.

9. If appropriate your doctor may advise you to take medicines to help control your blood pressure and cholesterol and to thin your blood. This will reduce the risk of your condition getting worse.

Keeping your ulcer healed

1. Continue with as much exercise as possible.
2. Try to avoid injuries to your legs because a slight knock could cause another ulcer.
3. Continue not to smoke or keep trying with your quit attempt.
4. Attend the outpatient clinic appointments regularly – it is important to be monitored.

Further Advice

If you have any concerns or think you may be developing a new ulcer contact your healthcare professional immediately on:

Telephone Numbers for each service:

Telephone:-.....

Single point of access number:-.....

Locality:-

The Northern Care Alliance NHS Group

Oldham Care Organisations

Vascular Service Clinic:

Telephone:

Salford Leg Ulcer Services

Salford Royal Foundation Trust

Stott Lane Salford,

Manchester, M6 8HD

email cvt.team@nhs.net or tissue.viability@srft.nhs.uk

Tel: 0161 206 1700 community

Tel : 0161 206 2113 Acute

Fax : 0161 206 2654

If English is not your first language and you need help, please contact the Interpretation and Translation Service

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

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For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897

For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

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