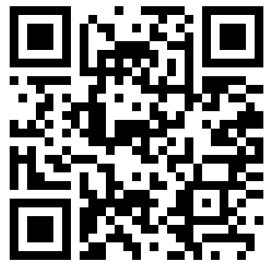


Donations

We need your support to help us provide the vital Healthcare Services we offer. A donation, however big or small can make a huge difference.

fnhc.org.je/support-us/donate



Thank you to all our generous partners, sponsors and donors.



Family Nursing
& Home Care

Start well, live well, age well

Tel: 01534 497601

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Family Nursing
& Home Care

Start well, live well, age well

Your
Legs
Matter

www.fnhc.org.je



Who We Are



Family Nursing & Home Care

Family Nursing & Home Care (FNHC) is a Jersey charity. Our 186 staff provide or support the provision of essential community healthcare services to islanders as close to home as possible. We deliver care in peoples homes, in schools and in community clinics. Our ethos is to help islanders to start well, live well and age well.



District Nursing Service

District Nurses provide support to islanders over 18 years old with the aim of preventing the onset and shortening the duration of illnesses. District Nurses provide care in homes and community clinics, developing individualised care plans underpinned by shared care with the aim of meeting the patient's desired outcomes. District Nurses work closely with islanders so that where possible they are capable and confident to manage their own care. By advocating for patients to manage their own care, District Nurses enable patients with long term conditions to live as independently as possible. The District Nursing Team includes Senior Healthcare Assistants and a number of specialist nurses at the forefront of specialist community care.



Improving Lower Leg Wound Care

District Nurses spend a huge proportion of their time treating wounds caused by pressure damage and wounds related to vascular, arterial and diabetes complications. The low public profile of wound care means it has often been overlooked by policy makers when setting strategic health priorities. The burden of wound care has steadily increased, it is now the third highest expense to the NHS after cancer and diabetes. The National Wound Care Strategy Programme (NWCSP) has been established to address the scale of the problem and improve care for people with wounds.

District Nursing at FNHC are the main provider of wound care in Jersey. FNHC have seen the burden of wound care increasing and have recognised the need for wound care to be a strategic priority in Jersey. FNHC organised a multidisciplinary round table event for service leads, policy makers, commissioners and care regulators. This meeting identified many roadblocks and areas for improvement.

With external partners FNHC has since been working with partners to:

- Agree formalised pathways of care and best practice care and standards.
- Increase training opportunities for all services involved in wound care.
- Improve patient education and increase patient compliance with best practice treatment.
- Improve data collection and capture.
- Determine the financial costs of wound care.
- Reduce inequitable service delivery related to patient incurred costs.
- Improve interdepartmental working.

Improving care delivery for patients with lower limb wounds will free up nurse time, improve healing rates, ensure appropriate onward referrals, reduce the likelihood of wound recurrence, enable more people to stay in work and reduce unnecessary emergency interventions and hospital admissions.

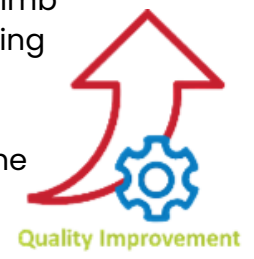
Jersey Integrated Lower Limb Service (JILLS)

Getting patients to engage with self-management and prevention of their leg wounds is challenging. The Lyndsey Leg Club model has been commissioned across the UK to provide a more holistic care experience for patients. Healthy Leg clubs are evidence led health prevention initiatives which help groups of patients learn about their shared condition, in the healthy leg club model, patient education promotes patient engagement.



Thanks to a recent grant awarded to FNHC through the Community Compass grant scheme, in 2024 FNHC will launch the Jersey Integrated Lower Limb Service (JILLS) our own Healthy Leg Club. Working with islanders to understand their needs and building their self-confidence by normalising wound related issues in the community is at the core of JILLS.

During six short week group education courses, islanders will learn some basic information about their leg wounds and how to manage them. In time it is hoped that like in the UK this will evolve into an ongoing monthly club for islanders.



What can the Leg Lounge do for you?

Leg Clubs are an evidence-based initiative which provide health promotion, education and ongoing care for people of all age groups who are experiencing leg-related problems. Our goal is to provide education, socialisation and support to empower patients to take control of their health and optimise their wellbeing.

“The leg lounge is a relaxed social environment, acting as a hub to meet and talk about all things leg”

Lead Community Tissue Viability Nurse and founder of Jersey’s first Leg Lounge

“You are with other people who are in the same situation. It does help to be able to compare what you are feeling with others.”

Leg Lounge Member

What will the sessions cover?

This booklet will contain information to support and underpin delivery of education over six core sessions. This booklet will not only act as a reference point but also a resource going forward to support your understanding surrounding leg health.

The sessions aim to cover the following topics:

- What is venous insufficiency? And what does it mean to you?
- What is a venous leg ulcer?
- What is compression? And why do I need to wear it?
- How do I care for my legs, feet and skin?
- How do I keep my legs healthy?
- Importance of Nutrition and rest
- Health Promotion

All members are seen holistically and their social and psychological needs addressed. Care is delivered in a relaxed, informal atmosphere in which comradeship, empathy and peer support are very evident. This approach is both popular with the members and successful in improving all aspects of a member’s wellbeing.

In **physical** terms, legs have been healed, mobility greatly restored, pain reduced.

In **social** terms, company has been provided, an awareness of others’ problems has been established, and opportunities for service in the community gladly taken.

In **psychological** terms, fears have been reduced, anxieties relieved and enjoyment of life restored.

Through education and ongoing advice and support members are aware that care and the prevention of reoccurrence of leg-related problems is for life. And prevention is better than cure.



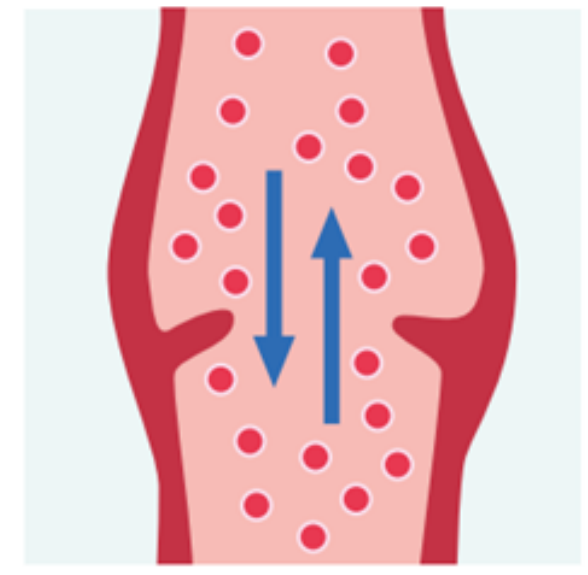
What is Venous Insufficiency?

Venous insufficiency is a form of venous disease that occurs when veins in your legs are damaged. As a result, these veins can't manage blood flow as well as they should, and it's harder for blood in your legs to return to your heart. This causes blood to pool in your leg veins, leading to high pressure in those veins.

Venous insufficiency can happen due to damage in any of your leg veins. These include your:

- **Deep veins**, which are large veins deep in your body that run through your muscle.
- **Superficial veins**, which are close to your skin's surface.
- **Perforating veins**, which connect your deep and superficial veins.

A faulty vein valve cannot control the direction of blood flow.



Common Problems

Deep Vein Thrombosis (DVT)

DVT is a blood clot that forms mainly in the deep veins of the legs as a result of sluggish blood flow. Research has shown that even short journeys of three hours can put you at risk of DVT.

Venous leg ulcers

A venous leg ulcer is a wound on your skin, on your lower leg, that fails to heal even after several weeks. If you have a venous leg ulcer it is essential that you see a health care professional for an assessment.

Arterial Ulcers

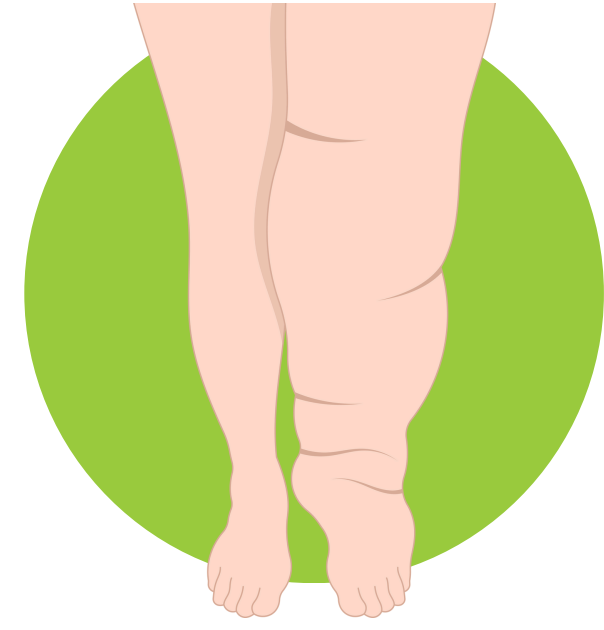
Fatty deposits can collect in your arteries causing them to narrow, meaning less blood flow to your lower legs. This can cause your legs to feel cold and painful, especially when your legs are elevated. When the blood flow is reduced ulcers can occur.

Foot problems in Diabetes

Foot problems are one of the most common reasons for someone with diabetes being admitted to hospital. People who have diabetes should take special care with their legs and feet and should not wear compression products without taking advice from a specialist healthcare professional. In addition, it is recommended that you visit a podiatrist on a regular basis.

Chronic Oedema/Lymphoedema

Oedema means the build up of excess amount of fluid in your legs that causes them to appear swollen. Lymphoedema is swelling in your legs as a result of an infection or damage to the lymphatic system. As well as swelling, this can lead to thickening of the skin and repeated episodes of skin infection if not treated properly with a daily care routine including compression therapy.



Who is at risk of venous disease and vein problems?

The risk of venous disease increases with age as damage to the veins worsens over time

Being **overweight** or having a large waist circumference increases the risk of venous disease

If you **stand for long periods** due to work or a hobby this can increase your risk of developing venous disease

Sitting for long periods of time without moving around can increase the risk of leg problems. This includes sitting at a desk for long periods of time.

Smoking causes damage to blood vessels which can result in venous disease

Air travel for longer than 3 hours can increase the risk of a deep vein thrombosis (DVT)

Recent study suggests **pregnancy** increases odds of developing varicose veins by 82%



Watch out for these RED FLAGS and act IMMEDIATELY

- Do your legs start to swell by the end of the day?
- Are simple cuts and scratches taking longer to heal?
- Are your legs hurting by the end of the day?
- Is your skin more dry, itchy and scaly?
- Has the colour and texture of your skin changed?
- Is an area of skin hot, inflamed or tender?

Venous Leg ulcers

What is a venous leg ulcer?

A venous leg ulcer is a breakdown of the skin caused by problems with blood flow in the veins. This is usually caused by an injury, often a minor one that breaks the skin.

In most people such an injury will heal without difficulty within a week or two. However, when there is an underlying problem the skin does not heal and the area of breakdown can increase in size.

This is known as a **chronic** venous leg ulcer.

What does it look like?

The ulcer usually develops on the lower leg. It causes pain, itching and swelling of the affected leg. The skin around the ulcer is often discoloured and thickened.

What causes a venous leg ulcer?

The most common underlying problem causing chronic leg ulcers is disease of the veins of the legs, **venous disease**. Venous simply means your veins or blood vessels.

Venous leg ulcers can be caused by varicose veins, faulty valves in the veins under the skin or Deep Vein Thrombosis (DVT).

A venous leg ulcer is by far the most common type of leg ulcer, accounting for around 60-80% of all cases.

But what should I look out for?



Your legs may **FEEL**
HEAVY | SORE | PAINFUL |
ITCHY | DRY | TIGHT |
SWOLLEN



Your legs may **SHOW**
LEAKING FLUID | SPIDER VEINS
| DISCOLOURATION |
WHITE BLOTCHES

Care of Venous Leg Ulcers

You should see a health care professional who will support with wound care and assessment of your venous leg ulcer.

The focus will be on cause, management and prevention. This will often consist of:

- lower limb assessment and testing such as doppler studies
- wound care / dressing selection
- compression therapy and elevation



Self Management

We want to empower you to take control of your leg health. Since COVID health care professionals recognise more than ever the role of self management in outcomes.

The guidance and resources here have been developed to support you or your carer if you are able to manage your compression therapy and wound treatment at home.



SCAN
ME!

What is Compression Therapy?

Compression therapy is important for the treatment and prevention of venous leg ulcers

How will I be treated?

Treatment of venous leg ulcer happens in two ways:

- Controlling the high **pressure** in the leg veins
- **Treatment** of the ulcer

The mainstays of treatment are compression bandaging or stockings and elevation of the limb.

Elevation of the limb

The higher the leg, the lower the pressure in the leg veins. If the foot is elevated above the heart then the pressure in the foot drops to a normal level. Put your legs up whenever you can and as high as you are able. Don't cross your legs when sitting or allow the chair when sitting to press into the back of your legs.



Compression bandaging or stockings

These work by applying a firm, continuous, graduated pressure to the muscles and veins in your legs. When your calf muscle contracts e.g during walking your hosiery will "give" then return to its normal position. By doing this, your hosiery is able to assist your bodys own natural mechanism for returning the blood back to the heart.

The compression stocking / bandaging applies the correct amount of pressure at particular points of the leg.

Compression stockings help your blood to flow upwards to your heart



What happens when the ulcer heals?

Once your ulcer is healed, it does not mean that your problems are over. Although the skin is intact the underlying problem with the veins remains and you must take precautions to prevent the ulcer reoccurring.

How can I stop the ulcer coming back?

Compression therapy is a life-long treatment to manage venous disease and minimise the implications it has on your skin integrity and overall quality of life.

Once healed, you will be advised to continue wearing your hosiery and ensure you continue a good leg health routine, more details of which can be found on page 13.

Why do I need to wear it?

-  Gold standard for non-surgical management of venous insufficiency
-  If you have had venous leg ulcers before you are at risk of developing recurrence
-  Compression is specifically designed to apply pressure to your lower legs, helping to maintain correct blood flow
-  Most leg ailments begin with the veins so helping the veins work more effectively is really beneficial
-  Compression is a life-long treatment
-  Wear your compression stockings at all times during the day and remove overnight
-  Compression is preventative, reducing the likelihood of venous disease
-  Compression plays a vital role in supporting lower limb wound healing
-  Check your compression fabric and seams prior to application
-  Remember to regular change your compression, roughly every 6 months

How to care for your legs

Caring for your legs, feet and skin

This is one of the ways to help keep our healed skin healthy and also if any breaks occur then by maintaining good skin health it promotes healing.

What does this include?

Regularly washing the legs, prioritising skin care and monitoring our legs, acting quickly on any noted changes.

Why is it important?

Getting rid of any dry skin, sweat from between toes, any exudate from an ulcer, reduces risk of infection from bacteria on skin and in exudate ensuring comfort, dignity and reduced odour. Keeping your skin in good condition can help prevent some leg conditions.



Skincare

What do you think good skin care looks like?

Skin needs to be kept supple, smooth and elastic in order to accommodate movement and health. Therefore, protective creams and ointments are invaluable to this process.

You may suffer from dry spots on the legs, elbows, and lower arms with dry patches that are rough and scaly and can itch. Possible reasons are eczema, central heating, smoking, ageing skin, dehydration etc.

Itchy skin can also sometimes be caused by an allergic reaction to dressings or creams. Common additives that can cause allergies to creams: Lanolin, Rubber, Perfume, Preservatives (Methylisothiazolinone & Parabens), Vehicle Adhesive. Always use low allergy creams or ointments (which tend not to have preservatives).



Look after your skin


Keeping your skin in good condition can help prevent some leg conditions.

- Try to moisturise your legs with an unscented moisturiser every night before bed
- Apply moisturiser in line with hair growth to prevent irritation
- Check your skin for any changes such as breaks, cracks and swelling
- If broken areas are not healing within two weeks or are deteriorating, contact your GP for advice.

How do I keep my legs healthy?

Do's & Don'ts for lifelong leg health

Do...

- ...regularly moisturise your legs
- ...walk and exercise regularly
- ...eat a balanced diet and watch your weight
- ...put your feet up
- ...check your legs and feet regularly
- ...get treatment for any knocks or sores if around the ankle, particularly if you suffer from diabetes
- ...try to give up smoking 

Don't...

- ...cross your legs for long periods
- ...stand still or sit for long periods without moving around
- ...ignore any sores or irritations
- ...assume that your leg will just get better by itself
- ...remain inactive for extended periods, e.g long journeys



Top tips from a Tissue Viability Nurse



Avoid tight clothing on your legs and wear comfortable, well-fitting shoes



Regularly check your legs for any changes



See a chiropodist regularly (ideally every 3 months) and take care when cutting toe nails



Be consistent with your support stockings if these have been advised



Stay hydrated and keep active



Focus on a good skincare routine and be consistent!

Three point leg check

We know that your legs and feet probably haven't been top of your list recently, but it's time to give them some attention. Even the smallest change to the way they look or feel can be a sign of something more serious.

That's why we're asking everyone to check their legs and feet and to speak up if things aren't looking or feeling right.

1 | SKIN—Check the skin on your legs and feet

Check the skin on your legs and feet for any change in colour or texture, including dry, scaly or red skin, or skin that's hot to touch. A cut, blister or insect bite that hasn't healed after two weeks is not normal and needs to be seen by a nurse or podiatrist. Make an appointment at your GP surgery.

2 | SHAPE – Check the shape of your legs and feet

Swollen legs or feet are your body's way of saying that something isn't right. This might be because of an injury or it could be a sign that your veins or lymphatic system aren't working as well as they should. If your legs or feet are uncomfortably swollen, they need to be seen by a nurse or podiatrist. Make an appointment at your GP surgery.

3 | FEEL – Check how your legs and feet feel

It's normal to feel occasional cramp in your legs when walking but if it happens a lot, it could be a sign that your body's circulatory system isn't working as well as it should. Tired, throbbing and painful legs can also be a sign that something's not right – ask your pharmacist for advice or make an appointment at your GP surgery.



What about my feet?

Foot health

You should try to check your feet every day so you can notice any problems quickly. You should also wash your feet every day.

Cutting and filing your toenails should only take 10 minutes, once a week. You can look after your toenails by:

- clipping and filing toenails safely
- keeping them at a length which feels comfortable
- keeping feet clean, dry – especially between your toes
- keeping feet comfortable and warm
- checking for cracks and breaks in the skin



Personal footcare is part of personal hygiene (such as shaving or bathing). It covers a set of tasks that an adult, whatever their age, would normally do for themselves if able to. Footcare includes toenail care, skin care and checking footwear.



But what if I have diabetes?



If you have diabetes you should have your feet screened as part of your annual diabetes check.



You can learn more about Diabetes and foot care through Diabetes UK

Footwear

As well as caring for your feet, you should check your footwear is comfortable, well fitting, and in good condition. A good shoe should support and protect your foot and allow natural movement during walking. Poorly fitting shoes can cause foot problems – such as corns, calluses, bunions and ingrown toenails.

When replacing your shoes, look for:

- an upper made of leather or breathable natural or synthetic materials with seam-free linings
- a deep and roomy toe-box at the front of the shoe to prevent pressure on the toes and joints on the side of the foot
- a cushioned and flexible light rubber sole with good grip
- a heel no more than 3cm (1.5 inches) high and broad enough to provide stability
- laces, buckles or Velcro strap fastenings that hold the shoe comfortably and securely on the foot



You should avoid:

- shoes that are too big or small, or with squashed backs
- slip on shoes
- smooth leather or plastic soles, and thick rubber soles that extend over the toe
- lace up shoes that are untied or without laces
- high heeled or backless shoes
- wearing slippers all day as regular footwear – they should only be worn for short periods

Healthy Lifestyle

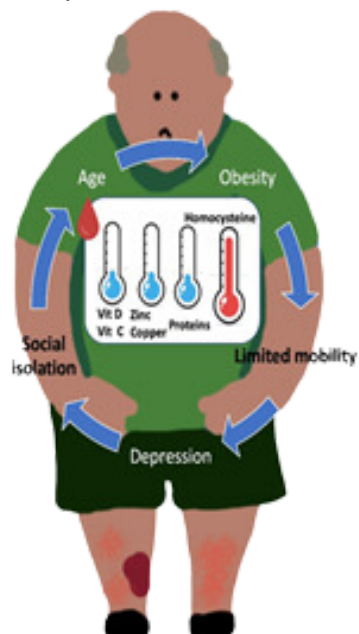
What can I do to start building a healthier lifestyle?

Developing a healthier lifestyle begins with making small changes to your daily habits and routines.

Here are some steps to take:

Eating a balanced diet

- Eat a **healthy diet**. Include plenty of fruits, vegetables, whole grains, lean protein, and healthy fats in your diet. Contact your GP or the dietician for advice.
- **limit alcohol consumption**: excessive alcohol consumption can increase the risk of chronic diseases and cause or worsen leg and foot conditions
- **Stay hydrated**: Drink plenty of water throughout the day



Take regular exercise

Using your foot and leg muscles encourages the circulation and also helps you control your weight. Avoid standing or sitting in one position for a long time. Walk around as much as possible or if you are less mobile, lower limb exercises can be beneficial.

What about sleep?

Sleep is a fundamental aspect of our lives, and its significance in promoting healing and overall wellbeing cannot be overstated. This means quality sleep plays a crucial role in your recovery process, helping to restore energy, support immune function, and enhance cognitive abilities.

Good sleep habits play a key role in optimising quality rest, so it is important to establish a routine that works for you.



Smoking Cessation

Stop smoking. This is one of the major risk factors for vascular (circulatory disease).

We recognise giving up may not be easy but support is available. Speak to your GP or contact the Jersey Smoking Cessation service.

Look after your mind

Living with health conditions can impact our **mental health**. If you feel you are suffering in any way speak up and always seek help.

Manage Stress

Find healthy ways to **manage stress**, such as meditation, Pilates, Yoga, or deep breathing exercises. Try this simple mediation for relaxation and pain management



Take Control – taking ownership of your health and wellbeing is key in optimising your overall health

Nutrition

What role does it play in wound healing?

We talk about the importance of a varied balanced diet, but this can be something you hear time and time again and sometimes it can feel overwhelming knowing what you really should be focusing on. Below we go into a bit more detail about the key nutrients that support wound healing.

The role of protein in wound healing, it boils down to 5 main points, but is not limited to these:

1. Repairs and grows muscle tissue. When people think about the healing process, this is typically what they picture.
2. Plays a role in producing enzymes and hormones involved in wound healing.
3. Resists infection and protects the immune system.
4. Promotes growth of skin cells.
5. Helps rebuild muscle, skin, and cartilage.

Protein requirements are increased when you have a wound so inadequate protein intake can delay healing.

It is recommended to aim for 1.2-1.5 grams of protein per kilogram of body weight each day. For example, if you weigh 60 kilograms, that would be 72-90g of protein each day. People who are bed-bound, non-weight bearing or who have severe illness may need as much as 2 grams of protein per kilogram of bodyweight each day

Include a portion (around a palm-size or 20-30g) at each meal, spaced evenly across the day. Try to choose higher protein snacks and milky drinks between meals.

***If you have kidney disease speak to your Doctor or Dietitian as a high protein diet may not be appropriate.**

NHS Eat Well

The NHS provides great advice for improving your eating habits and ensuring that you have a balanced and varied diet.

[nhs.uk/live-well/eat-well](https://www.nhs.uk/live-well/eat-well)

Zinc plays a vital role in promoting production of healthy tissue.



Vitamins A, C, and E (the antioxidants) are thought to be beneficial to the circulation.

Try to eat at least 5 fruits and vegetables a day: a portion is about a handful, or a piece of fruit. These support collagen formation, immune system response and iron absorption.

3 portions of calcium a day: Calcium supports bone strength as well as coagulation of the blood.



Scan to Listen to the Nutrition and wounds podcast

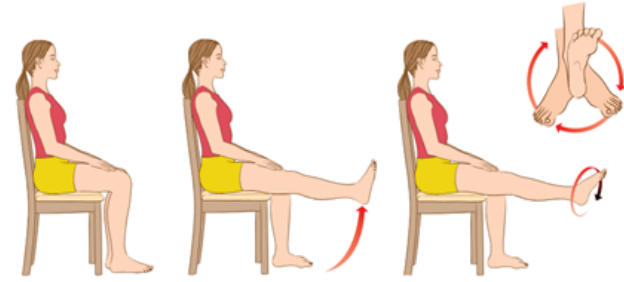


Lower Limb Exercises

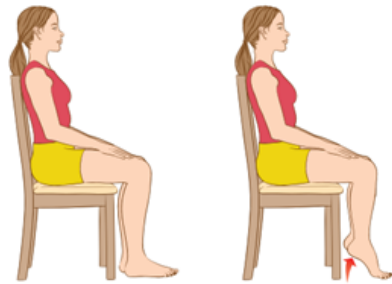
If you experience joint pain, low back pain or you are concerned please discontinue. However do not be surprised if you experience a pulling tight sensation in the muscle you are working, that is to be expected if you have been immobile. If you find the exercise painful stop and discuss with your clinician at the next opportunity.

ANKLE MOBILISATION

- Sit on a chair up straight with your feet flat on the ground
- Raise your leg up and roll your feet in a circle as demonstrated on the picture
- With your leg up, point your toes down and then point your toes towards your chest as demonstrated on the picture



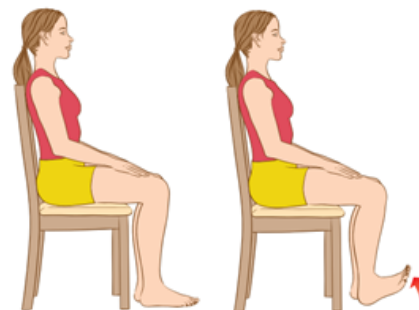
HEEL RAISE



- Sit on a chair up straight with your feet flat on the ground
- Raise your heels upwards, while keeping your toes on the floor
- Lower your heels back to the ground
- Once comfortable doing this exercise press down onto your knees and bring your leg up against the resistance of your hands

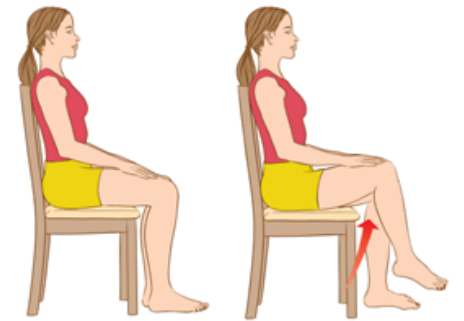
TOE RAISE

- Sit on a chair up straight with your feet flat on the ground
- Raise your toes upwards, while keeping your heels on the floor
- Lower your foot back to the ground

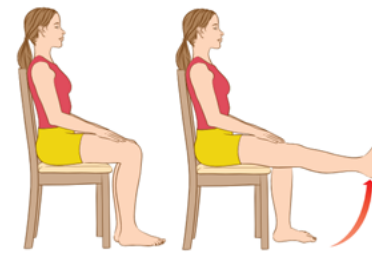


KNEE RAISE

- Sit on a chair, up straight, with your feet flat on the ground
- Raise one knee at a time up towards your chest
- Lower your foot back down to the ground



LEG RAISE



- Sit up straight with your back well supported and your feet flat on the ground
- Straighten your leg out
- Lower your leg back down in a controlled way do not just let it drop
- Once comfortable doing this exercise press down onto your knees and bring your leg up against the resistance of your hands

Regular exercise plays a vital role in optimising your leg health and overall wellbeing. Remaining active is essential to assisting your natural leg mechanisms and optimising blood flow in your veins.

Scan the QR code for more exercise resources



SCAN ME!

FAQs

I am worried about my legs, what should I do?

We recommend reviewing page 15 and undertaking a three point check of your legs. If you have any concerns you should contact your GP, podiatrist or nurse for further advice.

Do I have to pay for my hosiery?

If you are prescribed hosiery by FNHC following a thorough lower limb assessment, we have a small amount of funding that covers the costs of this. This funding however is limited to the management of venous insufficiency. If you do not meet the criteria for hosiery but we advise you may benefit from compression therapy we can signpost you to where these can be sourced or order on your behalf for a fee. Any concerns regarding this please discuss further with your nurse.

Should I choose open or closed toe?

The choice can be yours on whether you would prefer to have an open or closed toe, unless there are overriding medical reasons that mean a certain style needs to be used.

If you are wearing your compression garment at night at the recommendation of nurse or GP, or for several days, an open toe also allows the foot to be washed. If you see a chiropodist, open toe tights or socks will probably not needed to be taken off. Painful corns on toes may also make an open toe more comfortable.

How often do I need to wear my hosiery?

You should apply your hosiery first thing in the morning and remove it before you go to bed. This is also a great time to undertake your skincare regime and ensure it becomes a consistent part of your routine.

How many days can I wear my compression for?

Compression can be worn for up to a week at a time, providing there are no medical conditions which mean compression should not be worn. We recommend an open toe style so the foot can be washed or chiropody treatments carried out.



How often do I need to change my hosiery?

As a general rule of thumb they last around 100 washes. We recommend that you have two pairs giving one to wash and one to wear. This equates to a wear time of around six months. However the exact duration will be dependent on the individual. If you have any concerns with the condition of your hosiery or you are noticing any signs of wear and tear, it is best to get in touch.

Your nurse should undertake a routine yearly lower limb assessment to monitor for any changes to your condition. At this point you will be supplied with new hosiery, if required.

How do I wash my compression hosiery?

Please refer to the product information leaflet for washing guidance.

My compression hosiery feels tight/uncomfortable to wear, is this normal?

When wearing compression you may feel a light 'squeeze' but they should never feel uncomfortable or painful to wear. This is likely to be an issue with the sizing of the garment. If you are experiencing any discomfort with your garment you should contact a healthcare professional as soon as possible.



I find them hard to apply, is there anything that can help?

Yes, there are a range of applicators available that can assist, please speak to your nurse who can explore the options and find one most suited to your needs.

If you are having issues with slipping, request a review of the fit.



I find them hot in the summer, what can I do?

Many patients particularly those who wear bandages and wraps find hosiery hot in the summer. We recommend persisting with your hosiery regime to effectively manage your condition and skin integrity. If you wear hosiery you can take this off for short intervals to "cool down" but we advise ensuring you elevate your legs in the mean time.

Further Resources

Below are some resources that will provide further information and reading

Self-care resources



L&R Self-care: L&R have a full range of compression garments and skincare products designed to help you take control of your leg health. Visit the new website to find out more about their self-care solutions.
www.lrsselfcare.co.uk



Legs Matter: A coalition of healthcare organisations. It's goal is to support, care for and educate anyone with a lower leg or foot problem. Among other things, Legs Matter provides helpful tips and tricks for supporting your condition and caring for your legs.
www.legsmatter.org



Lindsay Leg Club: provide treatment, health promotion, education and ongoing care for people who are experiencing leg-related problems. They motivate and empower individuals to take ownership of their care, alleviate pain and reduce any stigma attached to their condition.
www.legclub.org



Legs Matter – capturing the lived experience

Struggling with venous leg ulcers?

Read Mark's story

"I knocked my leg on the car door – 10 months later I was still in bandages"



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Resources for venous leg ulcers

- Lower leg ulcer diagnosis & principles of treatment (PDF) Management Association (EWMA)
- NICE Venous leg ulcers (Website)
- Vascular Society (Website)
- Holistic management of venous leg ulceration (second edition) - Wounds UK (PDF)
- National Wound Care Strategy (NWCSP) Leg Ulcer Recommendations Summary (PDF)

Support for friends and family?



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National Wound Care Strategy Programme

The National Wound Care Strategy Programme (NWCSP) was commissioned by NHS England and has developed from several previous initiatives which addressed the issue of sub-optimal wound care. Launched in 2018 its purpose is to develop recommendations which support excellence in preventing, assessing, and treating people with wounds to optimise healing and minimise the burden of wounds for patients, carers and health and care providers.