

# Improving clinical outcomes and quality of life through the use of good skin care and compression therapy: a collaborative approach?

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## Introduction

A male patient aged 64 years with learning difficulties who lives alone presented to his GP with increasingly swollen legs. The patient attended a day centre five days per week and enjoyed many of the activities on offer there. His legs were itchy and painful and over time as the swelling increased, his mobility gradually declined. Due to fear of being admitted to hospital and the worry of possible amputation, the patient did not disclose the degree of pain he was in to his GP.

The patient later disclosed to nurses that when he was in shops that people would comment on the smell from his legs, he was refused service in cafes and people moved away when on buses. His condition was having a huge impact on his life and his demeanour.

He was prescribed cream by his GP to apply to his legs and when necessary antibiotics were prescribed. Following 6 years of increased swelling, recurrent cellulitis and pain, he was persuaded to visit his GP with his keyworker in attendance.

The patient was then referred to the Leg Clinic.

## Method

The patient had an holistic assessment carried out by the Tissue Viability Team and the Regional Clinical Advisor from L&R UK. His leg was too large for Doppler assessment, so foot pulses were listened to, these were biphasic and pulsatile in both legs.

Duplex was performed later which confirmed triphasic waveforms. His mobility was poor and was unable to find shoes to fit his feet. Both legs were extremely oedematous, malodourous and weeping serous fluid.

The patient also had hyperkeratosis and papillomatosis. A podiatry and orthotic referral were made at this time.

## Treatment plan

It was important for the team to establish a therapeutic relationship with the patient as he was very nervous and quiet when he was first referred. Actico® Lymphoedema bandaging\* was applied to the right leg initially in order to provide inelastic compression to the limb to help reduce the oedema and to ensure he could tolerate compression. Flivasorb®\*\* was applied to manage the exudate and a charcoal dressing was used to manage the odour.

The patient initially attended clinic with a support worker 3 times per week for reassessment and treatment and bandaging.

The leg clinic team advised the patient to carry out some deep breathing exercises and some simple foot flexion to encourage venous return. His support workers continued to encourage the deep breathing and foot exercises.

The patient was very concerned about the impact of the malodourous lesions on his legs and was keen to have a shower. Waterproof protective sleeves were too small for his bandaged legs. His support workers facilitated this by removing his bandaging at the day centre prior to his clinic appointments to allow him to shower.

After two weeks, Actico® Lymphoedema bandaging was applied to his left leg when the team were happy that he would be able to tolerate compression.

Antifungal ointment was also prescribed to manage a fungal infection.

Joint appointments with podiatry were arranged to reduce the number of clinic visits and to encourage a collaborative multidisciplinary approach.



On First Review February 2017



Patient attending clinic in September 2017



February 2017, first review



Patients legs following 8 weeks of compression therapy



Patient wearing made to measure hosiery

## Results/treatment impact

Between the 13th Feb and 3rd April 2017, the combined limb circumference for both legs had reduced by 102.5cm.

Both calf measurements were reduced by 20cm and ankle circumferences reduced by 20 and 23cm in the left and right legs respectively. During this time the patient's mobility improved, he was able to walk faster and was no longer short of breath. He has lost 2st 11lbs in weight and he was feeling more motivated to eat more healthily. There was also no longer any smell from his legs.

The patient reports that people are nice to him, he can use the café and he has made new friends. He has booked a holiday abroad.

This gentleman's whole demeanour has changed. He is confident, more able to engage with others and he is happy.

The patient was in a wrap system for on-going maintenance initially which reduced his oedema further and he has since been measured for long term maintenance in ActiLymph® Dura made to measure† hosiery.

## Discussion and conclusion

The profound patient impact of lower limb wounds and lympho-venous disease are well documented, however, it is not always clear how this condition can affect all aspects of the patients wellbeing. In the case of this patient it is clear that his quality of life suffered immensely as a result.

The patient is now able to visit his café, has made new friends and is planning a holiday.

He has been discharged from the Leg to Clinic and continues to attend the Day Centre, with review planned 6 months time.

The team are delighted with how this collaborative approach to the patient's management has impacted positively on all aspects of his life.

This case study highlights the need for patients to be referred as early as possible when presenting with conditions affecting the lower limb. Compression, good wound care and skin care remain the cornerstones of treatment for this patient group. A multi-disciplinary approach to care is essential. The use of inelastic bandages combined with super-absorbent dressings and appropriate skin care were essential in reducing the patient's limb volume and managing moisture from the limbs.

As a team we feel honoured to have been a part of this gentleman's collaborative care. In 4 months we have changed his life and it is a testament to the commitment of the patient, his Support Workers and the Tissue Viability Service.

## Leg measurements in cm during compression treatment

	Left ankle	Left calf	Left dorsum	Right ankle foot	Right calf	Right dorsum foot
13/2/17	57	68	35.5	57	68	35
17/2/17				55.5	60.5	28.5
24/2/17				50	58	
1/3/17	50	62.5	25	45	49.5	26
17/3/17	47	61	26	36	52.5	26
3/4/17	37	49	25	34	48	25
<b>Total cm lost</b>	<b>20</b>	<b>19</b>	<b>10.5</b>	<b>23</b>	<b>20</b>	<b>10</b>

\* Actico® Cohesive Inelastic Bandage (L&R UK)

\*\* Flivasorb® Superabsorbent Wound Dressing (L&R UK)

† ActiLymph® Made to Measure Hosiery (L&R UK)