Venous Leg Ulcers

What are Venous Leg Ulcers?
Chronic venous leg ulcers are a common but, unfortunately, an often neglected problem. The truth is that most physicians have not been properly trained to treat the problem correctly. This often leads to the patient being referred from one physician to the other over many months and sometimes years without adequately healing the lesion. The prevalence of leg ulcerations in the adult population, active or healed, is approximately 1.2%. Although a variety of factors can cause ulcers, the majority are related to venous disorders. Previous deep vein blood clots (DVT) or venous Reflux of the superficial veins in the lower extremities are the major reasons why these troublesome ulcers occur. The classic presentation is an irregularly shaped, partial thickness ankle wound generally found on the inner side of the lower leg just above the ankle. It is often associated with a foul odor and a yellow to grayish discharge associated with mild discomfort. Compression is the cornerstone of treatment for all patients afflicted with venous stasis ulcers.

Treatment
Compression is the cornerstone of treatment for all patients afflicted with venous stasis ulcers. Compression may be in the form of wraps, bandages, pump, or compression stockings. Even in the best of treatment programs, healing rates may take weeks to months. At the Richmond Vein Center, we strive to provide the patient with proper understanding of the problem and undertake a comprehensive state of the art management program, including external compression, proper adjunctive medicine, postural draining, rehabilitation techniques, and avoidance of certain activities. The worst cases may require hospitalization for intensive dressing changes and active wound care and intravenous antibiotics and strict bed rest.