

In this together

Making compression better

Issue 4, 2019

What you **need to know** about **vascular assessment**

NEW

patient assist

GUIDE INSIDE

Extra! Extra!
Read all about it!
The benefits of a book

The Daylong Patient Forum:
bringing together our community

Prescription challenges for people with lipoedema

The class of 2019:
learn all about your garment!

Easy exercises
for home or work:
every little helps!

Why it's time
to stop smoking

PLUS: Q&As | Compression tights | Expert advice



People.Health.Care.

Which L&R hosiery solution is best for me?

At L&R we offer hosiery to prevent and care for a wide range of leg problems. Here, leg health expert, Dr Leanne Atkin helps you to identify what hosiery solution may be best for you.



"My legs feel heavy and ache..."

"Heaviness and aching can be one of the first signs of venous disease, which is very common. To prevent the problem getting worse **Activa® Hosiery** may be the ideal solution for you."



"I have visible 'thread like' veins on my legs..."

"Thread veins or spider veins can be a sign of early venous disease and are often seen first around your ankle as blood tends to pool at the lowest point as our veins become less effective at transporting blood to the heart. To help your circulation, **Activa® Class 1 or 2 hosiery** may be the answer for you."



"My legs are swollen..."

"Leg swelling is very common, if you suffer with swollen legs or feet, it is important that you discuss this with your doctor or nurse. If you have swelling it is important that yours is specially designed to contain and help reduce the swelling. **Actilymph®** is knitted to prevent the build-up of swelling during the day."



"My hosiery is difficult to apply..."

There's a knack to applying hosiery, and finding the best way to apply it for you takes a little practice. An **Actiglide®** applicator may help to make life easier when applying your hosiery. It helps your hosiery to glide onto your leg without excessive pulling and tugging and can be used with open and closed toe hosiery.



Before wearing hosiery it is advisable that you see your GP or health care professional for a full holistic assessment to ensure suitability for the therapy.

Dr Leanne Atkin PhD MHSc RGN is a Lecturer Practitioner and Vascular Nurse Consultant.
For more information on leg health and hosiery solutions visit www.Lohmann-Rauscher.co.uk/leg-advice



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Opinions expressed in the articles do not necessarily reflect those of Daylong. Any products referred to by the authors should only be used as recommended by manufacturers' data sheets.

Content in this issue has been reviewed by the contributing clinicians.

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The Daylong Patient Forum: bringing together our community

Welcome to the first issue of *ITT* 2019! Already we are in February with our New Year's resolutions well underway or a distant memory!

We are holding our first ever Patient Forum on the 27 February 2019...to give you a voice, build relationships and know what to expect from your care...We hope you can join us.

Here at Daylong, it is the former. We remain fully committed to our resolution to continue to provide you, our valued customer, with everything you need to feel supported. Whether you are a clinician supporting your patients or a wearer of compression hosiery who wants to learn more about managing your long-term condition, we are here to help.


We have always prided ourselves on our compression expertise and fast, accurate dispensing. We also believe passionately in building a compression community to encourage the sharing of experiences and ideas, and working together towards a common goal; to overcome the challenges that many users of compression face. This magazine was launched with that aim in mind and feedback from you has reassured us that we are on the right path.

To build on this, at the end of the month we will be holding our first ever Patient

Forum on the 27 February in The MK stadium, Milton Keynes. The free event will provide you with an opportunity to speak to your peers, to share your experiences — the good and the bad —, view products, meet experts from the compression

industry and the leading clinicians delivering care in the UK today. Importantly, the event aims to give you a voice, empowers you to build relationships and know what to expect from your care. Please see p. 28 for more information. We hope that you can join us.

Another first for 2019 is the introduction of our first patient assist; a practical guide to help you with your compression-related care (see p.15–18). We of course have our usual mix of contents too!

We hope you find our new initiatives for 2019 a helpful addition, and as always we would love to hear your thoughts. 



*Mark Hudston,
Marketing Director,
Daylong*

We would love to hear from you. Please write to us!
editorial@daylong.co.uk



What you need to know about vascular assessment

If you wear compression hosiery on your lower limb, it is important that you have a regular vascular assessment so that you can be reassured that it is safe to wear your garment. Here, we explain why.



Vascular assessment is a key part of ongoing care for people who wear compression to manage their lower-limb condition. However, a significant study that looked into the prevalence of wounds in the UK highlighted that only 16% of all people with a leg or foot ulcer had evidence of a recent vascular assessment recorded in their medical notes (Guest et al, 2015). This finding had the implication that a large number of people were potentially wearing compression that could cause them harm. So just why is vascular assessment so important if you wear compression?

Compression therapy is a key component of the long-term management for people with venous leg ulcers and other problems such as lipoedema and lymphoedema. These conditions benefit from the help that compression provides in returning blood to the heart from the veins in the lower limbs. However, in some patients, if there is also arterial disease present, wearing compression may result in discomfort and damage to the wearer.

Vascular assessment is therefore carried out to check the blood flow to the limb to make sure that wearing compression won't result in harm by

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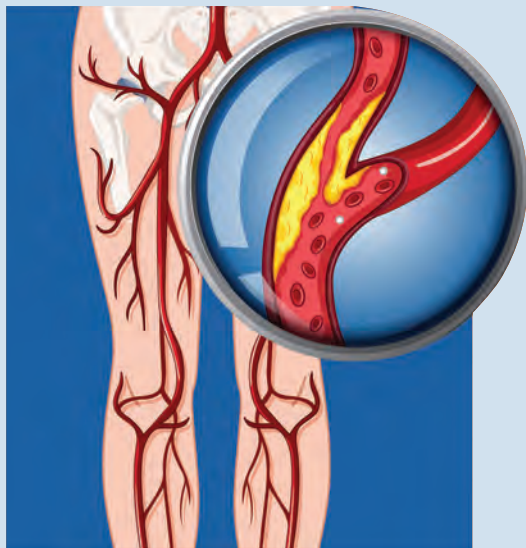


Signs and symptoms of peripheral arterial disease

Peripheral arterial disease can result in a number of signs and symptoms that relate to restricted blood flow to the limb. These include:

- » Hair loss on the feet and legs compared to your other leg
- » Pain in the thigh, calf, or one or both hips when walking or climbing stairs. This is known as intermittent claudication
- » Coldness in the lower leg and/or foot, compared to the other limb
- » Numbness and/or weakness in the leg.

However, some people with PAD may not have any symptoms at all.



restricting blood flow. The most common cause of restricted blood flow in the lower limb is peripheral arterial disease (PAD).

Peripheral arterial disease


PAD is a common condition in which a build-up of fatty deposits in the arteries restricts blood supply to the leg muscles. This can result in a number of sign and symptoms (*see box above*). However, in some people, there may be an absence of symptoms, even if PAD is present.

In people with PAD, wearing full compression can restrict the reduced blood supply to the limb even more. This could result in a worsening of symptoms, skin damage and breakdown and in worse cases, cut off the blood to the limb entirely.

What is vascular assessment?

Vascular assessment is therefore carried out to rule out the presence of PAD so that compression therapy can be used safely.

The most common type of assessment is calculation of the ankle brachial pressure index (ABPI). ABPI compares the blood pressure at the ankle compared with blood pressure in the arms. It can be worked out easily in a clinic setting, either using Doppler ultrasound or one of the newer devices that are designed to measure ABPI easily and quickly. Once your ABPI has been calculated, your healthcare professional can interpret your results, and will advise you on what they mean.



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An ABPI <0.8 is suggestive of reduced blood supply to the legs, indicating that PAD may be present. Your clinician may refer you for further investigations at this stage.


Vascular assessment is performed to rule out the presence of peripheral arterial disease so that compression can be worn safely.

When was your last assessment?

People who are being managed with compression therapy should have regular vascular assessment to ensure their arterial status has not

In some people/situations, alternative investigations to ABPI may be required. The reasons for this will be explained to you by your healthcare professional. If you have a swollen lower limb, for example, your clinician may be unable to calculate your ABPI so a different method may be needed to check for PAD before you are cleared for compression therapy.

worsened. Ideally, reassessment should be carried out at 3-, 6- or 12-month intervals, depending on your individual circumstances (NICE, 2013).

If you don't know if you have had a vascular assessment at all, or if you are due a new check, speak to your healthcare professional to ensure your compression therapy won't do you harm. 

Guest et al (2015) <https://bmjopen.bmj.com/content/5/12/e009283>; NICE (2013) <https://www.nice.org.uk/guidance/og147>



Jane Todhunter, Vascular nurse practitioner, North Cumbria University Hospitals comments:

Wearing compression hosiery is an important part of the long-term management of many conditions. However, before any compression is prescribed you should have had a full assessment by a qualified practitioner who has the knowledge and skills required to provide you with a diagnosis and make decisions about your care.

Your ABPI should be measured as part of your initial assessment to see if compression hosiery is suitable and safe for you to wear. Please ask your healthcare practitioner what the results of your vascular test mean and when you are due your next test. You might only need vascular assessment once a year, or it may be more often; put the date(s) in your diary. The healthcare practitioner who assessed you and prescribed your hosiery should guide you the first time you are putting your hosiery on as well as providing advice on skin care and care of the hosiery. If you are having difficulty putting the hosiery on or off, please ask about aids that may be available to help. Make sure you know when you should be getting new hosiery, usually you will get two pairs every 6 months and at this stage you might need to be remeasured, if your health has changed during this time.



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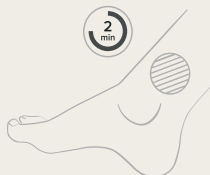
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- Relieves pain
- Stimulates haemostasis
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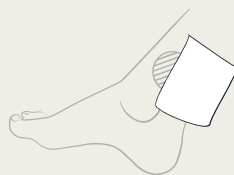
1. PREPARE.



2. SPRAY



3. WAIT



4. DRESS

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Lee et al, 2009 • Dai et al, 2011 • Ahmed and Ikram, 2016 • Jayakumar et al, 2016
Mezzana, 2008 • Okamoto, 2002 • Zarefi and Soleimanejad, 2018



Prescription challenges for people with lipoedema

In October 2017, Lipoedema UK conducted a focus group to understand the experiences of compression wearers with lipoedema. The group included women with lipoedema, garment manufacturers and clinicians. Here, some of the key findings and recommendations relating to obtaining the correct hosiery on prescription are presented.



Lipoedema is a chronic condition that mainly affects women. It is characterised by an accumulation of fat below the waist in the hips, legs and buttocks, creating a pear-shaped figure in which the bottom half is significantly larger than the upper part of the body. The legs can be heavy and painful, and can bruise very easily. For people with lipoedema, compression garments are a key component of the long-term management of the condition.

When a compression garment is recommended it is vitally important that the correct product is received promptly to alleviate the discomfort of the wearer as soon as possible, and to ensure the lipoedema is being managed effectively. However, obtaining well-fitting compression garments on prescription can be problematic.

The focus group carried out by Lipoedema UK asked nine women with



lipoedema about their experiences of getting the correct fitting garments on prescription. The results highlighted a number of challenges.

It is difficult to get the correct garment

Very few people with lipoedema were successful in obtaining well-fitting garments on prescription.

The group revealed that compression recommendations from their practitioners did not translate into the garments that they received.

Usually in practice a compression recommendation is given to the patient by a specialist nurse or therapist, with the patient then taking this to the GP to obtain a prescription. Commonly, made-to-measure recommendations were not followed, with off-the-shelf products prescribed in their place.

The participants of the focus group also reported that their GPs tended to write a prescription that differed from the therapist's recommendations. This was thought to be a result of cost, with off-the-shelf products costing less than made-to-measure so budget-savvy GPs were possibly opting for what seemed like the cheaper option. However, this cost-saving decision failed to appreciate the importance of a made-to-measure garment for the patient, and the fact that prescribing the incorrect garment would ultimately result in a waste and create the need for another prescription. It was also

thought that difficulties in completing the electronic prescription may have accounted for the prescribing of the incorrect garment.

Very few people with lipoedema were successful in obtaining well-fitting compression garments on prescription.

One patient said: 'the amount of problems I've had where the GP has written the prescription wrong — what was on the prescription is not what the nurse has recommended.

And what is dispensed doesn't agree with what is prescribed'.

It was also noted that even when a prescription is written correctly according to a specialist recommendation, the pharmacy can fail to provide the garment because of the constraints of their systems and the product ranges available.

Recommendations

Together the focus group decided that patients with lipoedema should take a more pro-active role to overcome these issues. For example, they could ask their GP to generate a handwritten prescription following specialist recommendations to ensure accuracy, especially for complex made-to-measure garment prescriptions. When their garment is dispensed, the patient should check what they have been given and should refuse to accept incorrect garments; insist on a replacement if an order has been fulfilled incorrectly. It is important to do this in the pharmacy, because once the product has been accepted, it can't be returned.




Another option would be to use an alternative dispenser, such as Daylong, who specialise in compression and have a good reputation for fulfilling accurately and promptly.

Patients have to wait a long time for their garments

One patient said it had taken approximately three and a half months from being measured to receiving her first garments. If this is reflected across the patient group, as anecdotal evidence suggests it is, then patients are waiting for long periods of time in which their condition can decline further, or are

having to continue wearing old, ineffective garments until receipt of the new one. Whatever the scenario, such a lengthy wait is not ideal.

Clinic waiting times were also blamed for lengthy delays in remeasuring. As one of the clinicians participating in the focus group advised 'With lipoedema there has to be an element of self-management and patients have to take some ownership; our clinic has 8–900 patients and one clinician. If you need more hosiery, phone, ask, leave messages until you get what you need. We do react to the patients who shout the loudest'. 

Sharie Fetzer, Chair, Lipoedema UK comments:



Lipoedema patients come in many shapes and sizes, so measuring and prescribing garments is challenging for even the most experienced clinician. Another complication is that most available garments are designed for lymphoedema, not the sensitive, painful, floppy skin of lipoedema, and are usually for one limb rather than both limbs as needed for lipoedema.

The good news is that manufacturers are heeding feedback from Lipoedema UK and are beginning to provide training on lipoedema and are actively looking for new fabrics and ways to improve the range and comfort of garments specifically for lipoedema.

In the meantime, GPs and pharmacies must realise that prescribing alternative garments is counter productive and stressful for the patient. Patients should always check their garment against the original prescription and highlight any issues before wearing, plus seek advice if a garment is uncomfortable to wear. Getting the best fit usually requires determination and patience from patients.

Clinicians, manufacturers, GPs, and pharmacies should also improve their knowledge, skills, creativity and empathy and work with their patients until every prescription results in a well-fitting comfortable garment and a happy patient!

FREE specialist prescription advice you can trust - **JOIN US**



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The class of 2019: learn all about your garment!

Every compression garment is categorised into a class of its own, but what does this mean and why is it important that you know the class of your garment? Here we explain what you need to know, because not all classes are created equally.



If you wear a compression garment, you may have noticed that the packaging states a class number, usually one, two or three, followed by a number range in brackets, e.g. Class 1 (14–17mmHg). Alternatively, you may have been told by your healthcare professional what class of garment you need to wear, but you might not know what this means to you and your compression therapy. So, here we present ‘the rules of the class!’

Class equals pressure delivered

The class of a compression garment refers to the amount of pressure it delivers at

certain points on the body. The pressure delivered is measured in millimetres of mercury (mmHg). For below-knee hosiery, for example, the class will refer to the amount of pressure delivered at the ankle. For a class 1 garment, a pressure range of 14–17mmHg means the garment will deliver a minimum pressure of 14mmHg and a maximum pressure of 17mmHg to the ankle, depending on the size and shape of the limb.

To be sure that your garment is delivering the correct amount of compression, it should fit well, according to the manufacturer’s guidelines. For a class 1



garment, the manufacturer will have a set of measurements that will ensure the garment you order is the right size and that it delivers compression within the range given.

Wearing a garment that is too large will not deliver enough compression, while a garment that is too small will deliver too much pressure and could result in skin damage and restricted circulation. This is why it is best to always be measured and assessed by a healthcare professional to ensure the correct fit.

Higher the class, higher the compression

Some garments deliver more pressure than others and the class of a garment communicates exactly how much pressure or compression it delivers.

Most compression garments fall into one of three classes, with class 1 delivering the least compression and class 3 the most. Some class 4 garments exist but are used less commonly, usually in specialist cases.

Class 1 garments are often referred to as ‘support’ garments and can usually be applied to deliver light or ‘reduced’ compression.

The class of compression hosiery refers to the amount of compression it delivers at the ankle, depending on the size and shape of the limb.

The downside to this is that if your condition would benefit from a higher level of therapeutic compression, you might not be getting the best from your garment.

The higher classes of garments deliver more pressure and should only be worn once vascular assessment has been carried out to confirm that it is safe to wear (see p.6–10 for more information). Classes that deliver higher pressures are sometimes made from stiffer fabric.

Not all classes are equal

However, not all garments in the same class deliver the same amount of pressure. This is because the manufacturers of hosiery follow different standards or ‘guidelines’ that guide how the amount of pressure a garment delivers is measured.

	British standard	European (RAL) standard
Class 1	14—17mmHg	18—21mmHg
Class 2	18—24mmHg	23—32mmHg
Class 3	25—35mmHg	34—46mmHg




Across the world there are four main specifications that are used:

- » BS/UK – British standard
- » RAL/EU – European standard
- » AFNOR/FR – French standard.
- » US – US specification is based on the RAL standard.

As highlighted in the box overleaf, a class 1 garment made to British standards will deliver a different pressure range when compared to those made to European or RAL specifications.

Your healthcare professional should help guide you on what compression class is appropriate for your individual condition, and should take your preferences into account.

If you order your compression from Daylong, we have analysed the classes and grouped all compression garments on our website into five levels according to the pressure delivered: 'extra light, light, moderate, firm and extra firm' to make the selection process easier. 

Alison Schofield, Tissue Viability Nurse Specialist, North Lincolnshire and Goole NHS Foundation Trust comments:

'It can be difficult to navigate the sheer number of compression garments available. That is why it is really important that before wearing a garment for the first time,



or renewing your garment when it has worn out, you are assessed by a healthcare professional who can advise on the right choice of product for the management of your individual condition. Remember that your health can change so a garment that was suitable 6–12 months ago may no longer be right for you.

As clinicians it is important that we remain up to date with the range of products available and mindful of what the different standards and classes mean, so we can use this to make decisions and pass on this information for the benefit of our patients. Using the wrong compression class can have a negative impact on care. For example, using too low a class of garment can result in a failure to heal or to reduce swelling, while too high a class may be too uncomfortable for some patients.

As a wearer, be sure to ask the advice of your clinician so you can find the most effective garment for your condition, that is also acceptable to you and comfortable to wear.'

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Easy exercises for home or work: every little helps!

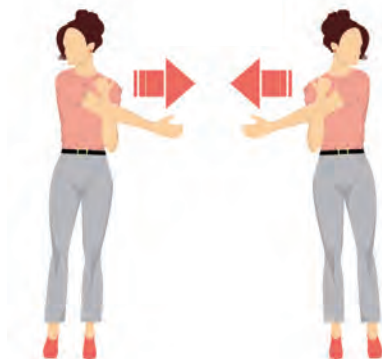
When it comes to improving your mobility, even the smallest amount of activity can help. Here are some exercises that you can do in the comfort of your home or office to improve your movement in a few easy steps.

- For these exercises, you can be seated, or standing. If sitting, you should be able to sit with your feet flat on the floor and knees bent at right angles.
- Avoid chairs with arms, as these will restrict your movement. If your chair has wheels, be careful, and ideally lock them if possible.
- If you are not used to exercising, build up slowly and aim to gradually increase the repetitions of each exercise over time. Try to do these exercises at least twice a week.

Shoulder stretch

This stretch is good for posture.

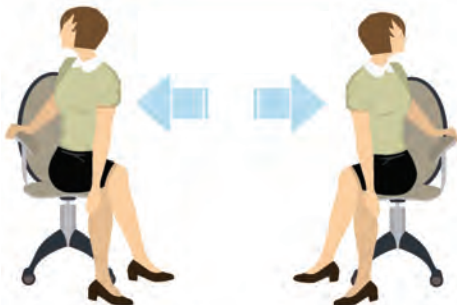
1. Stand upright and place your left hand on your left shoulder.
2. While looking to your right, stretch your right arm across to the left side of your body.
3. Hold for 5 to 10 seconds and repeat 5 times. Then repeat steps 1, 2 and 3 for the other arm.



Back stretch

This stretch will aid flexibility in the back.

1. Sit upright with your feet flat on the floor.
2. Without moving your hips, turn your upper body to the left as far as is comfortable. Hold for 5 seconds.
3. Repeat on the right side. Do 5 times on each side.





Leg lift

1. Sit upright and do not lean on the back of the chair. Hold on to the sides of the chair.
2. Lift your left leg with your knee bent as far as is comfortable. Place your foot down with control.
3. Repeat with the opposite leg.
4. Do 5 lifts with each leg.
If you are able, you may wish to do both legs at the same time.



Neck stretch

This stretch helps to loosen tight neck muscles.

1. Sitting upright, look straight ahead and hold your left shoulder down
2. Slowly tilt your head to the right while relaxing your shoulder down. You can place your hand on your head to deepen the stretch, but do not pull or force the movement.
3. Repeat on the opposite side.
4. Hold each stretch for 5 seconds and repeat 3 times on each side.



Ankle stretch

This stretch will improve ankle flexibility and lower the risk of developing a clot.

1. Sit upright, hold on to the side of the chair and straighten your left leg with your foot off the floor.
2. With your leg straight and raised, point your toes away from you.
3. Point your toes back towards you.
4. Try two sets of 5 stretches with each foot. Raise your arms and breathe in as you lower them.
5. Repeat 5 times.

Further information

For free fitness ideas

<https://www.nhs.uk/live-well/exercise/free-fitness-ideas/>

For 10 minute workouts

<https://www.nhs.uk/live-well/exercise/10-minute-workouts/>

For fitness videos

<https://www.nhs.uk/conditions/nhs-fitness-studio/>



Why it's time to stop smoking for good

When you make the decision to stop smoking, there are some immediate benefits to your health and some that are more long-term. There is no doubt, however, that quitting is good for your health!

After 20 minutes:

Your pulse rate returns to normal.

After 8 hours:

Nicotine and carbon monoxide in your blood reduces by more than half and oxygen levels return to normal.

After 48 hours:

Carbon monoxide is eliminated from your body. Your lungs start to clear out mucus and other smoking debris. There is no longer any nicotine left in the body. Your ability to taste and smell is improved.

After 72 hours:

Your breathing becomes easier. The bronchial tubes in your lungs begin to relax and your energy levels will increase.

After 2–12 weeks:

Your circulation improves.

After 3–9 months:

Coughs, wheezing and breathing problems improve as lung function increases by up to 10%.

After 1 year:

Your risk of heart disease is about half compared with a person who is still smoking.

After 10 years:

Your risk of lung cancer falls to half that of a smoker.

After 15 years:

Risk of heart attack falls to the same as someone who has never smoked.



Source: www.nhs.uk



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VENOFLEX Micro is a range of soft, stylish and discreet RAL standard compression hosiery, indicated for the management of mild to moderate venous disease and lymphoedema.

VENOFLEX Micro's supple texture allows for fast and easy application and removal of hosiery, and provides comfort and support all day.

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Available
on prescription



RAL standard - meets stringent testing requirements for effective compression therapy.
RAL CCL1 - 18-21 mmHg
RAL CCL2 - 23-32 mmHg



Patient Forum

Wed 27th February, 10–3pm, MK arena, Milton Keynes

Our free-to-attend patient forum will give you the opportunity to:

- » Meet other people with conditions similar to yours
- » Share your thoughts and experiences in a friendly and informal environment
- » Receive the latest information and advice on what to expect on your treatment journey from our expert speaker
- » Learn how to build good partnerships with the people delivering your care.

Agenda

10.00 – 10.15	Welcome and introduction – Tea/Coffee
10.15 – 11.15	<p>Are you on the correct pathway for you?</p> <ul style="list-style-type: none"> » Who should manage my limb – who takes ownership? » What tests / investigations should I expect to be carried out? » What happens and how do these tests influence my care pathway? » Building relationships with the professionals managing your care
11.15 – 11.45	<p>Management of my leg</p> <ul style="list-style-type: none"> » Washing your limb – techniques and cleansing options » Moisturising skin – ointment / cream application and techniques » Exercise / mobility / footwear
11.45 – 13.45	<p>Lunch and explore UK's leading wound care/compression exhibition</p> <ul style="list-style-type: none"> » Overview of the latest bandaging, wraps and hosiery available » Get expert advice on garments and services from leading brands / manufacturers
13.45 – 14.45	<p>Group Feedback</p> <ul style="list-style-type: none"> » General discussion around products and their use » Reflect on and share your own product experiences, both positive and negative
14.45	Closing remarks – Evaluation

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IN RECOGNITION OF OUR
PLATINUM PARTNERS





Extra! extra! Read all about it!

The benefits of a book

Reading is a pastime that can help you to escape to another world, without leaving your house! Reading regularly has lots of benefits for both body and mind.

Reading may appear to be a solitary and passive activity, but there is a lot going on beneath the surface. It helps to keep the brain active.

When we read we create mental simulations of the activities, sights and sounds of scenes in a story; we blend these with our own memories and experiences, all of which stimulates the neural pathways in our brain. This mental stimulation can help to slow mental decline.

In addition, research suggests that reading for 30 minutes a week increases health and wellbeing. Reading for pleasure has been found to improve our confidence and self-esteem, providing the grounding we need to pursue our goals and make life decisions. It can also aid our sleep and reduce feelings of loneliness.



Reading for just 6 minutes reduces stress by 68%, making it to be more effective than listening to music (61%) or walking (42%).

Just 6 minutes of reading can slow your heart rate, ease muscle tension and has a positive effect on your state of mind.


Adults who read books for more than 3.5 hours each week are 23% less likely to die compared to non-readers.

People who read fiction have improved social skills and a better 'theory of mind': the ability to understand the thoughts of other people that are different to their own.

Readers are 2.5% less likely to develop Alzheimer's disease; it slows mental decline in the elderly by 32%.

Everything you read fills your head with new information— you never know when you might need it!

What you read matters — spiritual texts have been shown to lower blood pressure and create a sense of calm, while self-help books have been proven to help people suffering from some mood disorders and mild mental illness.

Reading increases your exposure to new words; inevitably it increases your vocabulary too. 

Sources: Wall Street Journal; <https://www.wsj.com/articles/SB118583572352482728>; The Guardian <https://www.theguardian.com/books/2016/aug/08/book-up-for-a-longer-life-readers-die-later-study-finds>

Recommended reading

For book recommendations and book bundles

<https://www.whsmith.co.uk/dept/richard-and-judy>

Reading groups for everyone and book recommendations

<https://readinggroups.org/groups>



Your prescription problems solved

Here our Daylong expert provides advice on using our electronic prescription and new Re-Mind services. If you have a question, please write to us at editorial@daylong.co.uk, and we will try to help.

Q. What are the benefits of using the Daylong electronic prescription service (EPS)?

A. The EPS is secure, confidential and widely used. If you currently collect prescriptions, you will no longer have to visit your GP practice to pick up your paper prescription. Instead, your GP will send the prescription electronically to us, saving you time.

Q. How can I use EPS to obtain my compression garment?

A. You need to choose which NHS dispenser you would like to receive your electronic prescription. This is called nomination. You can nominate (choose) any NHS dispenser operating an EPS, for example, Daylong. You can ask your GP to add your nomination for you or sign up on our website or call customer services (details opposite) if you wish to nominate Daylong. You do not need a computer to use EPS.

Q. How do I know if the EPS service is the right choice for me?

A. If you prefer not to visit your GP practice every time you need to collect your repeat prescription, then EPS is for you. However, if your prescriptions are coloured purple/pink, this might mean that your prescribing clinician is not yet able to use the EPS system.

Q. Why should I choose to nominate Daylong?

Here are some of the benefits of nominating Daylong:

1. We have over 60 years of experience working with patients and medical professionals
2. We are the UK's leading home delivery service for compression hosiery
3. We have a dedicated and friendly customer care team with extensive knowledge on all compression brands.

The advice given here is for commonly encountered problems and is in no way prescriptive. If you are concerned or unsure in anyway, please seek expert advice. Before wearing compression, it is advisable to undergo a thorough clinical assessment to make sure it is suitable for you, that you select the right garment, and that it fits properly.



Q. Can I change my nomination or cancel it and get a paper prescription?

A. If you want to change or cancel your nomination, speak to any pharmacist or appliance contractor that offers EPS, or your GP practice. Tell them before your next prescription is due that you wish to cancel EPS and get a paper prescription. This will help to ensure all goes smoothly with the switch.

Q. What is Daylong RE-Mind Prescription Service?

A. The Daylong RE-Mind (Reminder) prescription service helps you know when it is time for you to get your replacement (NEW) compression garments. Like clothes that you wear daily, over time they will become tired and worn. Our FREE service keeps you informed when it is time to change.

Q. Why is important to have my prescription renewed?

A. Your compression garments have a limited life span. After this time the armsleeve, hosiery or compression wrap may not give enough compression to control and

manage your condition. Medical compression garments are usually guaranteed prescription service for either 100 washes, 6 months or 12 months. Therefore, it is important that you obtain your new replacement garments before this time.

It is recommended that before you reorder your garment that you check with your clinician to ensure that the prescription is still right for you. With time, your health can change and this may affect the compression garment you wear.

Q. When and how will I be contacted by Daylong if I opt to use the RE-Mind service?

A. The RE-Mind Service will email you one month before your garment needs to be replaced. We will advise you about the previous product you received and provide the details necessary, e.g. name, size, colour, etc of your garment so that your clinician or GP can raise a new prescription.

Q. How do I access this FREE service?

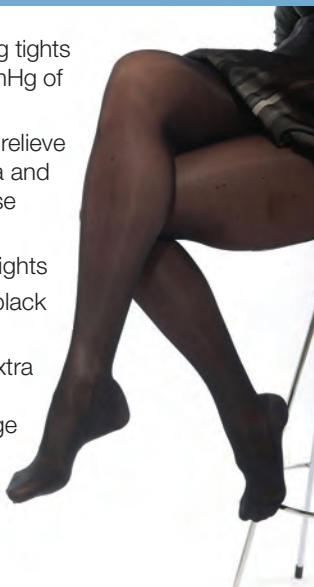
A. Contact us via our customer service or website. Details are below.

Contact:
www.daylong.co.uk
or call us on 0115 932 0144.



Product name: VENOSAN LEGLINE 20
Manufacturer: Credenhill

- Sheer-looking tights deliver 20mmHg of compression
- Prevent and relieve mild oedema and slight varicose veins
- Closed-toe tights
- Available in black or nude
- Five sizes; extra small, small, medium, large and extra large.



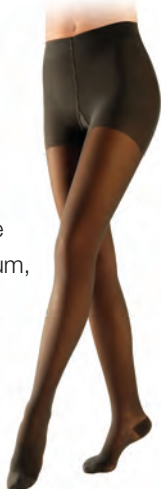
Product name: Wonder Model
Manufacturer: Solidea

- Class 2 tights deliver 23–32mmHg of compression
- Light, silky, opaque fabric
- Helps to prevent tired and aching legs, varicose veins and poor circulation
- Available in Nero or Natural
- Four sizes: ML, L, XL and XXL
- Regular or plus width options
- Open or closed toe
- Built in shaping pants with cotton gusset and anti-bacterial soles.



Product name: Diaphane
Manufacturer: Sigvaris

- Class 2 tights deliver 15–20mmHg of compression
- Soft and elegant
- Available in 6 colours: black, chocolate, dune, grey, natural and marine
- Four sizes, small, medium, large, extra large
- Normal or long lengths
- Closed toe.



Product name: Activa class 2
Manufacturer: L&R

- Class 2 tights deliver 18–24mmHg.
- Combines ultra-fine nylon and Lycra Soft
- Small, medium, large and extra large
- Closed toe style
- Natural colour
- Latex free.





Supporting you all Daylong



What is a Dispensing Appliance Contractor (DAC)?

Businesses that can dispense products against prescriptions written by a GP or nurse prescriber are known as Dispensing Appliance Contractors (DAC).

Daylong is a DAC and this simply means that instead of collecting your prescribed products from your local pharmacy, we can send them to you free of charge at home. Using Daylong has many advantages:



Accuracy

We are proud that we are 97% accurate in our dispensing.

Speed

We dispense prescriptions within a maximum of 5 days, direct to your preferred address, free of charge.

Expertise and experience

We have over 50 years of experience in the compression industry, and over 20 years in compression garment dispensing, including made to measure products.

Choice

We hold a vast stock of ready-made products from lots of manufacturers, ready to go!

Customer service

We are proud to have achieved a customer service rating of 96% based on feedback from our customers.

Re-Mind service

If you sign up for our new service, we will remind you one month before your compression garment is due for renewal.



NEW!



People.Health.Care.



It is important
that you wear
your compression
daily to achieve
the maximum
benefit

Did you know you can purchase extra pairs of
Activa[®], ActiLymph[®], Adore[®] and ReadyWrap[™]?

Visit **www.extrapairs.co.uk**

or

contact the friendly Daylong customer care team
who will take care of your order on

0800 195 0160