

In this together

Making compression better

Issue 8, 2021

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Identifying
urgent **changes**
in **your leg health**

Which **compression
garment** is right
for you?

How the great
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We really are in this together: supporting our community

Welcome to the latest issue of *This Together*. Spring is now around the corner and after a year of restrictions, light is appearing at the end of the tunnel. Hopefully we are now at the start of a gradual return to seeing our friends, family and wider community again.

Fortunately, our compression community has remained active throughout lockdown, making sure that advice and support is available when needed, and that the profile of lymphatic and vascular disorders continues to be raised.

A member of the Lymphoedema Support Network (LSN) has written a helpful book that helps to explain lymphoedema to children, and provides the answers to commonly asked questions.


Lipoedema UK is carrying out research into the effect of diet and exercise on lipoedema in association with De Montfort University and asks that members of the compression community with lipoedema come forward to help

'Fortunately, our compression community has remained active throughout lockdown, making sure that advice and support is available when needed, and that the profile of lymphatic and vascular disorders continues to be raised.'

researchers determine the effects of diet and exercise on the condition.

Awareness weeks are planned to go ahead this year too. The Legs Matter coalition plan to raise awareness of limb conditions for a week in October. The International Leg Club Coalition are

working in partnership with the vWIN Foundation to hold the first International Vein Week in April, and invite you to take part in their 21 movement challenge to support it. See p.32–33 for more information on all these initiatives.

Here at Daylong, we have also continued to support our community. In addition to our usual activities, throughout Lymphoedema Awareness Week (1–6 March) we donated a percentage of our sales to charities as part of our ongoing commitment to supporting people who wear compression. 



*Mark Hudston,
Marketing Director,
Daylong*

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



Identifying urgent changes in your leg health

Knowing when to seek advice for a change in your lower limb condition is important so that you can get treatment before it deteriorates. Here we describe some common problems.



When managing a long-term condition such as venous leg ulceration or lymphoedema, it is important to recognise changes in your normal limb health that can be a sign that urgent treatment is needed. A sudden increase in pain, swelling, or fluid from the limb can be a sign that your condition has changed, perhaps as a result of infection, or because your treatment is no longer working. Here we describe some of the more commonly experienced problems of the lower limb.

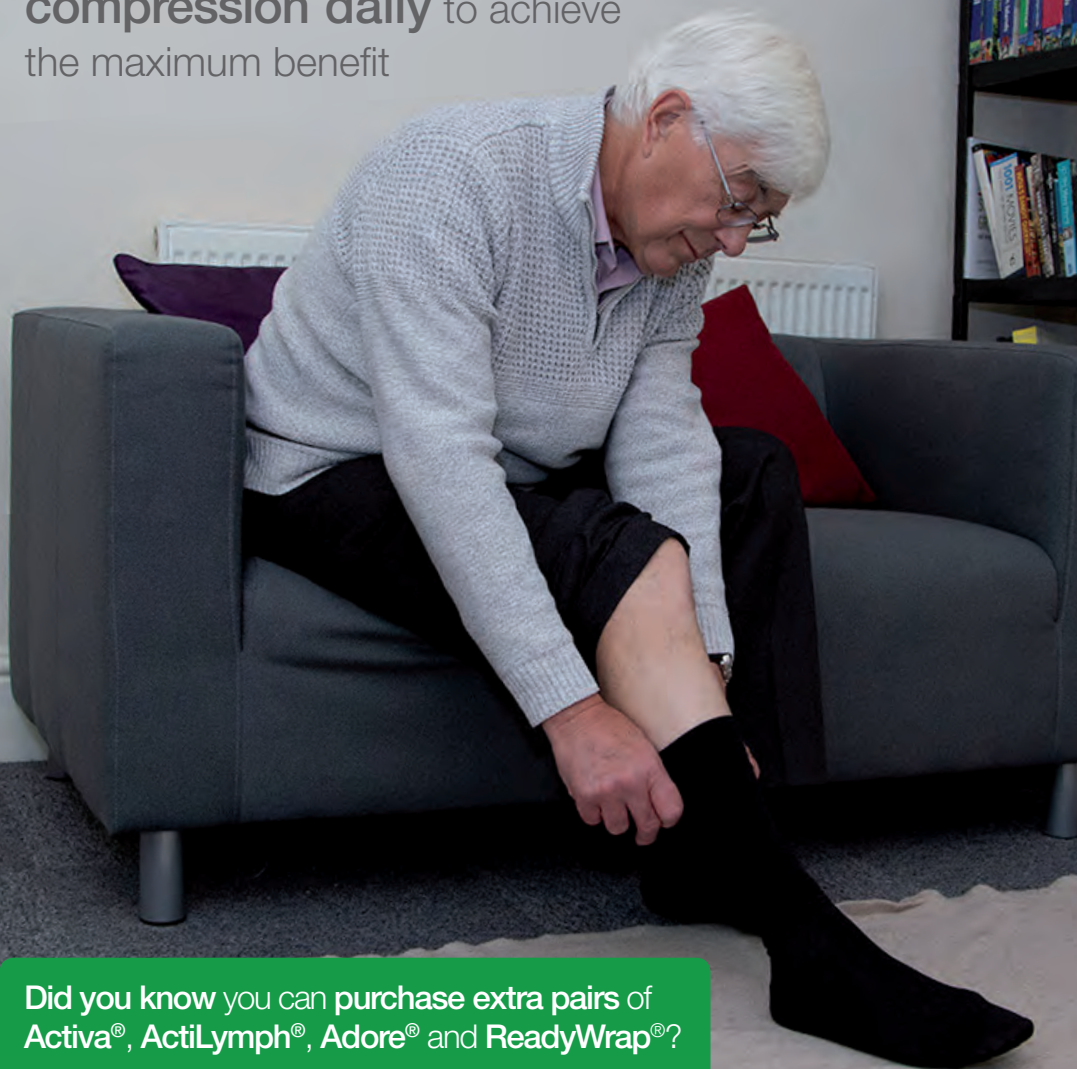
Cellulitis

Cellulitis is a spreading infection of the skin and the underlying tissue. It occurs when a break in the skin allows bacteria to enter the body and cause infection. People with lymphoedema or venous leg ulcers are at an increased risk of cellulitis due to the fragility of the skin, so it is important to recognise the warning signs.

What are the signs of cellulitis?

Skin and tissue affected by cellulitis has been described as red, painful, hot, swollen

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



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and tender. Without treatment, the infection will spread. A feeling of being generally unwell and/or tired may occur before or at the same time as the skin symptoms.

Monitoring of the skin, regular moisturising and rapid treatment of any breaks such as wounds, scratches and bites should be carried out and observed to make sure healing takes place and cellulitis is prevented.

As it is a bacterial infection, commonly caused by *Staphylococcus* or *Streptococcus* bacteria, cellulitis needs urgent treatment with antibiotics. These may be given orally for mild infection, or intravenously if infection is more serious.

An episode of cellulitis increases the risk of it happening again. It is therefore important to practice good skin care to improve and maintain skin health, in order to prevent breaks in the skin from occurring. Monitoring of the skin, regular moisturising and rapid treatment of any breaks, such as wounds, scratches and bites, should be carried out and observed to make sure healing takes place and cellulitis is prevented.

Wearing compression can be painful if cellulitis is present, so the pressure it

delivers may need to be reduced, or completely removed. However, normal compression should be re-applied as soon as it can be tolerated as it helps to support the venous and lymphatic systems during the infection.

Wound infection

If you have a wound, such as a venous leg ulcer, you should look for signs of improvement or deterioration at every dressing change. Local wound infection is common, and is usually accompanied by the classic signs of redness, warmth, new or more pain than usual and swelling around the wound. The wound may also be producing pus or more wound fluid than usual and may be malodorous. If you have any of these symptoms, you will need an assessment and possible antimicrobial treatment, so contact your healthcare professional for advice.

If the above symptoms are accompanied by suddenly feeling generally unwell, urgent help should be sought as this may be a sign of spreading infection.

A wound that has been present for several weeks or months without





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making any progress towards healing may contain a biofilm. This is a collection of micro-organisms in the wound that can prevent healing. A biofilm can avoid detection by the immune system and so its presence may not be accompanied by any signs of infection.

Biofilm is thought to be present in the majority of chronic wounds.

If your wound has been failing to make progress for some time, it may be worth discussing biofilm-based wound management with your clinician. This involves simple treatment to remove the biofilm and prevent it from recurring by using cleansing, debriding and using antimicrobial dressings. These steps may be enough to encourage your wound to heal.

Lymphorrhea (wet, leaky legs)

Lymphorrhea is a condition in which lymph fluid leaks through the skin of the lower limbs. For this reason it is also commonly referred to as 'leaky legs' or 'wet legs'.

Normally, fluid in the tissues is kept in balance by the lymphatic system. Swelling occurs, however, if there is a problem with the ability of the lymphatics to do this. As swelling progresses, the legs can become very swollen, causing the skin to stretch, and in some cases, blister. The fluid in the tissues then leaks out through the skin, indicating there


'If you experience any of the problems described here, it is important to seek help from your healthcare professional in order to get the condition under control to prevent further deterioration and to minimise the impact on your everyday life.'

is an underlying problem with the ability of the lymphatic system to handle fluid in a normal way.

Lymphorrhea can be caused by a sudden change in health or routine. Deteriorating health

or infection can contribute, as can sitting more than usual, reduced mobility, or no longer wearing compression even though it is needed.

Limbs affected by lymphorrhea are constantly wet, may have fluid running down them and the skin may be shiny and cold as a result. The skin may become white and boggy (macerated) as a consequence of being continually wet, or red and raw (excoriated). The limb may be very painful, and uncomfortable due to swelling and heaviness. The damaged and fragile skin is at risk of ulceration and infection, so help should be sought. Your clinician will work with you to identify the cause of the leaking, and put steps in place to manage it. This usually involves a combination of skin care, leg elevation and compression therapy to alleviate the symptoms.

If you experience any of the problems described here, it is important to seek help from your healthcare professional to get the condition under control to prevent further deterioration and to minimise the impact on your everyday life. 

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Which compression garment is right for you?

There is a wide range of compression garments available, each with their own characteristics and benefits.

Understanding what these are can help you to find a garment that is right for you. Here, we explain the options available.



It is well recognised that people who need to wear compression garments for the long-term management of conditions such as lymphoedema or venous leg ulceration are more likely to do so if they are happy with the garment.

cause pain during wear are key to the successful long-term use of compression. If a garment fits poorly, causes pain during wear or simply cannot be put on or removed easily by the wearer, it is unlikely to be tolerated for long, if at all.

Garments that are comfortable, easy to apply and remove and that do not

Unfortunately, many people give up on wearing compression for reasons



such as discomfort or difficulties with application, without realising other options are available.

Why do I need a compression garment?

Compression therapy is a key part of the management of

conditions such as venous leg ulcers and lymphoedema, which arise when there is an underlying problem with the venous and/or lymphatic systems.

Compression works by moving blood and excess fluid from the tissues back into the lymphatic system. By easing congestion in the tissues, swelling is reduced and wounds are more likely to heal.

In most cases, bandaging is often used to deliver compression in the short term. In people with lymphoedema, bandaging is used in intensive therapy, which aims to reduce swelling. In people with venous leg ulcers, it can be used to reduce the size of the wound and to reduce any swelling present. Compression garments are then recommended in the long-term management of both conditions, to heal ulceration, and prevent the return of swelling and breakdown of healed wounds.

Sadly, many people give up wearing their compression once their swelling has reduced or their wound has healed

‘Unfortunately, many people give up on wearing compression for reasons such as discomfort or difficulties with application, without realising other options are available.’

as they wrongly believe that their treatment in completed. This is a mistake, as the underlying condition is still present, and needs management with compression in the long-term. If compression is

not worn, the chance of the problem returning is high. For example, venous leg ulcers recur in 70% of healed people within three months.

Picking the right garment for you, that you are happy to wear in the long term is therefore important if you are to optimise your leg health.

What compression garment choices are available?

Compression therapy can be delivered by several different garments, including hosiery and leg ulcer hosiery kits, and compression wrap systems.

Hosiery

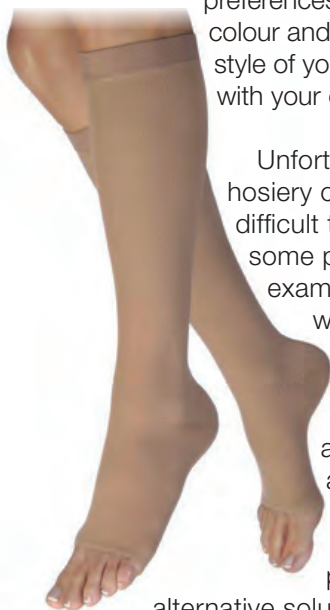
Hosiery is often used in the long-term management of lymphoedema to maintain the reduction in swelling achieved during intensive treatment. In people with venous leg ulceration, it is used to maintain healing and prevent recurrence.

Hosiery kits may also be used to heal venous leg ulcers as they have been shown to be as effective as bandaging in suitable patients.



Your healthcare professional will advise on the best type of garment for you. The fabric that the garment is made from should be selected to meet your needs. For example, the stiffer fabric of a flat-knit garment is usually recommended for the persistent swelling associated with lymphoedema, while thinner circular knit hosiery may be appropriate for someone with a healed venous leg ulcer.

Similarly, the amount of compression the hosiery delivers, known as its class, can vary and it is important that you get a garment that delivers the correct amount for your condition. Finally, if you wear hosiery to manage limb swelling, the garment should cover and contain the swollen areas, otherwise it may displace the swelling to the outsides of the garment. You can discuss your preferences for the colour and/or top band style of your garment with your clinician too.




Unfortunately, hosiery can be difficult to apply for some people, for example, those with limited mobility or hand grip. Application aids are available, but a wrap system may provide an alternative solution.



Wrap systems

Wraps are compression systems that wrap around the limb and which are fastened using VELCRO® straps. Wraps can be tightened or loosened if needed, for example, if swelling increases or decreases over time. Some wraps also have built-in features that enable the wearer to check that the compression pressure being delivered is correct following application.

Wraps can be applied by the wearer, or a carer, increasing independence and the ability to self-care. They are particularly useful for people who are eligible to wear hosiery, but struggle to apply and remove it.

Finding a garment that meets your needs while managing your condition is key to long-term treatment success. Your needs may change with time, meaning you may wish to change your garment to suit your situation. You will need to discuss your options with your healthcare professional to make sure the garment is best for you. 



How to care for your compression garment

1 Not the right fit?

Don't be tempted to tamper! Folding over, cutting, or adapting your garment in any way may mean it won't work effectively. For example, folding the fabric will result in almost twice as much compression in the overlapping area, which could result in damage to your skin. If a different size or make of standard garment still doesn't fit, made to measure may be a solution.

2 Wash regularly

Cleaning your garment as recommended by the manufacturer can help it to maintain its elasticity and removes the dirt accumulated during wear. Many manufacturers recommend placing the garment into a mesh wash bag or cotton pillow case to protect the fabric during machine washing.

3 Dry

Air or machine dry your garment as recommended by the manufacturer. Keep heat low, especially if your garment has silicone components. Avoid direct sunlight as this can damage the elastic

TOP TIP

A helping hand

If you have difficulty applying or removing your compression garment, consider using an application aid. These are designed to help your garment slide more easily on and off the limb.

fibres of your garment. If air drying, lying the garment flat is best to avoid it being stretched as the water drains when hanging.


4 Wear one, wash one

Once you have found your ideal garment, it is best to have two; one that can be worn while the other is washed and dried. This will help to prolong the elasticity of both items.

5 Beware moisturiser

Although moisturising is a key component of your skin care routine, beware its effects on your garment's elastic fibres. Use a water-based emollient and ensure it is absorbed before your garment is applied.

6 Replace

Replace your garment every six months, or sooner if it is showing signs of losing its effectiveness. A loss of elasticity, feeling looser than usual or damage such as fraying or holes all indicate its time to replace. 

Find more information on application aids and caring for your garment by visiting www.daylong.co.uk




How the great outdoors can help to improve your health

Spending time in nature can have a positive effect on both your physical and mental health. Here, we describe some of the benefits of spending time in the great outdoors.

1 Taking a walk for just 20 minutes a day has multiple health benefits. It can reduce blood pressure and the risk of serious disease. Walking is also beneficial for people with venous disease and lymphoedema, especially when wearing compression. Not bad for 20 minutes of work! If you are new to walking, start at a pace that suits you and build up gradually.

2 Head outside to have a mindful moment in nature. Focusing on something else for a short period can aid relaxation and feelings of wellness. Find

a green space, stop and take a deep breath. Take time to notice your surroundings, look at the trees, plants and sky while listening to all the sounds around you.

3 Time spent in the garden can be rewarding, particularly if you grow your own food. If you don't have a garden, you can grow salad leaves or herbs in a window box. If you are able, you might like to join a community garden to meet new people, learn new skills and enjoy some time for yourself. 



Further information is available at www.mind.org.uk

Action Reliever: a knee brace for people with knee osteoarthritis

Approximately five million people in the UK have knee osteoarthritis, and this number is predicted to increase to 8.3 million by 2035¹.

Osteoarthritis is a disease which initially affects the cartilage of the knee. Cartilage covers the ends of the thigh bone (femur), shin bone (tibia) and kneecap (patella). It acts as a shock absorber and enables the joint to slide, allowing mobility. An envelope of fluid around the joint known as the synovial capsule lubricates it while also nourishing the cartilage.

With age, cartilage progressively loses its flexibility and wears thin. Excess pressure on this weakened cartilage will cause it to become damaged. This will gradually cause it to disappear in some areas revealing the underlying bone. The loss of cartilage means that bones are in contact with each other on movement and this can become very painful. This pain may lead to avoidance of physical activity, including everyday tasks such as walking, going upstairs, and housework.

In turn, reduced movement diminishes not only fitness, strength and stamina,



but also flexibility and weight control, which can increase pain and stiffness. Resuming physical activity and suitable exercises can break this vicious circle and increase wellbeing considerably.

Action Reliever knee brace

Action Reliever is an off-loading knee brace. This means that it reduces the physical load on the part of the knee affected by osteoarthritis, and spreads it evenly throughout the knee joint as a whole by holding the leg in a normal alignment. This helps to reduce compression and inflammation and is proven to relieve pain².



Why use Action Reliever?

The National Institute for Health and Care Excellence (NICE)³ highlighted that people with osteoarthritis who have joint pain or instability benefited from the use of a brace, in addition to their core treatment.

Studies have also shown that the use of an off-loading knee brace is of benefit for people with osteoarthritis who are waiting for surgery⁴. Patients who wore a brace for more than two years did not need surgery when followed up after 8 years⁴. The use of an off-loading knee brace has also been shown to improve quality of life for some people with osteoarthritis⁴.

1. Versus Arthritis; 2. Benning et al (2017) Orthopadie Technik 08/17; 24–30; 3. NICE (2008) Osteoarthritis care and management; 4. Paul et al (2017) Br Med J.

Fitting your Action Reliever knee brace



1. Loosen all the straps.



2. Ensure that the two intersecting straps are positioned centrally.



3. While sitting, pull-on the knee brace, with the kneecap positioned in the centre of the kneecap ring. Stand up to make sure there is no creasing.

Action Reliever can help to alleviate the pain associated with osteoarthritis. Here we explain how it works and how to apply and adjust your knee brace.

Fitting your **Action Reliever** knee brace



4. Sit with the knee bent. First adjust the lower rear strap, then the higher rear strap. The strap should be snug, not tight.



5. To adjust strap length, remove the self-gripping pad, shorten the strap by cutting, then re-attach the pad on the strap.



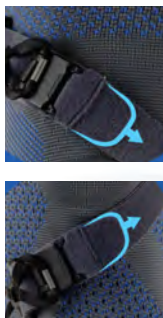
6. Adjust the front straps in the same way.



7. If creases form, the angle of each strap can be adjusted. Open the rear hook and loop openings on the crossover self-gripping straps.



8. Stand and take a few steps. To adjust the tension while wearing the knee brace, simply re-position the self-gripping tabs.



9. The loop on the left clasp is for leverage when closing the clasp; don't use it to unclip, just use your fingers. To speed removal and reapplication, simply unclip **(1)** and pull back **(2)** to remove.

Frequently asked questions and answers

How do I know that Action Reliever is suitable for my condition?

Action Reliever is an off-loading knee brace for people with mild to moderate osteoarthritis, or injuries, e.g. a meniscal tear, that needs off-loading. Your GP or other healthcare professional will be able to advise if it is ok for you to use Action Reliever. You can do this via a telephone consultation or in person.

How do I know what size of Action Reliever brace to order?

Action Reliever is available in eight different sizes. To ensure you obtain the right size, your GP or healthcare professional may measure your limb, or alternatively you can take the measurements yourself. Full instructions for measuring are available at the Action Reliever website: <https://www.actionreliever.co.uk/measuringfitting>. Alternatively, you can email patient@thuasne.co.uk or call **01892 481620** for further information and help.

Is Action Reliever available on prescription?

Action Reliever has been available on prescription in the UK since late 2019, however, some healthcare professionals

may be unaware of this. You can obtain a prescription by speaking to your GP.

What do I do with my prescription?

You can take your prescription to your local pharmacy or you can use Daylong, a Dispensing Appliance Contractor (DAC). This simply means that Daylong can also dispense your prescription and send it to you at home, free of charge.

Should I wear Action Reliever under or over my clothes?

Ideally, Action Reliever should be worn directly on the skin. The brace is comfortable to wear, and is made from silicon thread that is anatomically knitted so it can slide up the leg easily. The brace does not deliver compression behind the knee, meaning that it should not be tight in this area and dig in, and is therefore comfortable to wear. Finally, the Action Reliever is invisible when worn under most clothing.

Can I wash my Action Reliever?

Yes, your garment can be washed using warm water and detergent. It may be helpful to have two garments so that one can be worn, while one is washed and dried on a flat surface.

Please contact our friendly customer care team on: **0800 195 0160**



Your hosiery problems solved

Here we provide advice on commonly encountered compression garment problems. If you have a question, please write to us at editorial@daylong.co.uk, and we will try to help.

Q. When walking, my garment wrinkles around my ankle. Why is this?

A. This could be for one of several reasons. If your garment did fit, but is suddenly falling down, think about its age. Near the end of its shelf life, usually around 3–6 months, the garment may have lost its elasticity and will need replacing. It could be that swelling in your limb has reduced since you were measured for your garment, and you will notice if this is the case. Finally, the garment could simply be too big for you, and this is most likely if you have just purchased it. Whatever the cause, ask your clinician to reassess and remeasure you.

Q. I have lymphoedema in my arm that I usually manage with a thick, black compression arm sleeve. However, when the weather is hot, it is uncomfortable so I am considering removing it. Is this ok?

A. As you probably know, it is not a good idea to stop wearing your compression as it helps to keep your swelling at bay. Without it, you may see a gradual return of the swelling which will

no doubt also be uncomfortable in the hot weather. A compromise is to wear a lighter garment, in a more breathable fabric. A range of differing materials and colours are available from different suppliers. For example, you may prefer a finer, skin-coloured garment for the summer months. Depending on the strength of compression recommended by your clinician, wearing a lighter garment may mean compromising on the amount of compression delivered, but this is preferable to no compression at all on hot summer days.

Q. I can't even get my garment on, let alone wear it. This can't be right?

A. Check your limb measurements against the manufacturer's size chart to ensure you have the right garment for you. If the size is correct but you are having difficulty with application, an application aid might help. Alternatively, a different type of product might be more suitable for you, for example, one made of a softer fabric or with a zip fastener. Compression wraps which fasten around the limb with VELCRO® straps might also be easier to apply.

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. It is advisable to undergo a thorough clinical assessment to make treatment choices that are suitable for you.



Managing lymphoedema after breast cancer

Arm swelling, known as lymphoedema, is common following breast cancer treatment. Here we explain why it occurs, how to identify the early signs and what action to take to minimise its impact.



Lymphoedema is a term given to a build up of fluid in the tissues of the body. Secondary lymphoedema of the arm, hand and breast/chest area can occur after treatment for breast cancer. It is thought to affect around one in five women¹.

Investigations or treatments for breast cancer such as surgery may result in one or more lymph nodes being removed, meaning that the lymph fluid has fewer drainage routes than before.

If radiotherapy is used in combination with surgery, then the risk of developing lymphoedema is increased. If lymph

nodes are damaged or removed, there is a lifetime risk of developing lymphoedema.

Lymphoedema may occur quite suddenly or gradually after treatment, or in some cases, years later.

How do I know if I have lymphoedema?

In many people, symptoms of lymphoedema are mild. However, evidence shows that early intervention can help to keep the swelling at bay. So seek advice from your healthcare team if you notice:

- Swelling in the arm, hand, breast or chest that may come and go at first.



It may be worse following strenuous activity and at the end of the day

- Tightening of clothes and jewellery in the affected area
- Feeling of tightness in the arm, with or without swelling. This may be relieved by gentle exercise
- Dry, itchy and flaky skin in the affected area
- Aching, heaviness and discomfort in the affected area.



Once developed, lymphoedema is a long-term condition that can cause pain, discomfort and impaired use of the affected limb. It can also cause emotional distress and embarrassment as the swollen limb restricts activity and choice of clothing.

Management

Lymphoedema responds well to management in most cases, meaning symptoms can be controlled. The aim is to help the lymphatics cope with the fluid as well as they can, by taking steps to minimise fluid build up and help the flow of fluid through the lymphatic system.

Doing this can prevent the development of complications, such as extreme swelling and infection.

Wearing compression garments, taking good care of your skin (*below*) and moving and exercising, good nutrition and using specialised massage techniques can all help to achieve this.

Skin care steps

1. Wash the skin with a non-perfumed soap or cleanser and dry gently to avoid causing damage
2. Moisturise daily with a bland, non-perfumed cream or lotion
3. Take care when cutting nails and removing unwanted body hair
4. Use gloves and/or clothing to protect hands and arms when gardening, washing up or reaching into the oven
5. Inspect your skin daily for signs of damage such as bites, scratches, cuts, and sunburn, that could act as an entry point for bacteria. Wash and apply antiseptic cream if trauma is noticed
6. Avoid extremes of temperature
7. Avoid carrying heavy items, prolonged repetitive movement and over-exercising the affected arm.



Compression in lymphoedema management

Compression works by helping to move lymph fluid from the tissues back into the bigger lymph vessels for clearance by the body.

This is achieved as compression forms a firm casing around the limb that provides support and resistance to the muscles when they move. This resistance increases the squeeze of the muscles, which in turn increases lymph flow. This can help to reduce swelling, improve shape and prevents further build up of fluid.

Compression bandaging may be needed if the skin is fragile and vulnerable to damage when applying an armsleeve, or if the limb is very swollen making a garment temporarily unsuitable. Once swelling and limb shape is stable, and providing the skin is not too fragile, a garment can be ordered in most cases.

Alternatively, and more commonly, compression garments can be used to deliver graduated compression. A wide range of garments are available, including wraps, kits, and pumps in different styles, fabrics and colours. Your clinician will work with you to identify the best one for you. Depending on the area of swelling, the garment may include your hand and fingers too.


TOP TIP

Compression garments should be replaced every 3–6 months, or when they lose elasticity. Younger or very active people may need to change their garments more often.

Manufacturers' sizes vary so when selecting a new product, you should always be remeasured by clinician using the manufacturers' guidelines. Remember that the size of your old garment may no longer be appropriate if your health has changed.

The fit of your new garment should be checked by your clinician to ensure the correct product has been supplied, that you can take it on and off, that it fits well and covers the whole area that needs treatment.

Your garment should feel firm, supportive and comfortable, and should be tight enough to provide resistance. If you feel tingling, numbness or pain, however, the garment should be removed.

It is key that you are happy with the garment as you need to wear it for the long-term management of your condition. Keep working with your clinician until you find a garment that meets your needs. 

Lymphoedema Support Network

www.lymphoedema.org

The LSN is a national charity that provides information and support for people with lymphoedema.

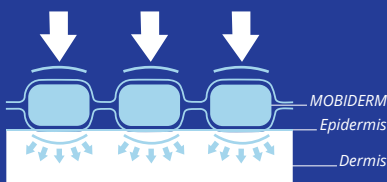


THUASNE

MOBIDERM autofit

FOR THE TREATMENT
OF LYMPHOEDEMA

Mobilising garments featuring
MOBIDERM oedema
management technology



Night Time Compression

Taking over from daytime compression, Mobiderm garments continue to mobilise lymphoedema during your rest and night time periods, and thereby reinforce the effects of your daytime compression.

Mobiderm garments are made of a soft, elastic material designed to deliver a soft pressure, well accepted in the rest and night time phases. The garments are fitted with Mobiderm technology on the inside which helps promote lymphatic circulation with micro massages.

Effective

- Reinforces the effects of daytime treatment
- Maintains the volume reduction of the oedema

Ease of Use

- Enhance self-management of oedema
- A single garment to put on

Comfortable

- Unintrusive and discreet treatment
- Does not disturb sleep

For more information call 01892 481620

Or email marketing@thuasne.co.uk

Discover the MOBIDERM range at www.thuasne.co.uk

Ref.: 2101005 (2021 - 01), © Studio Caterin.

AVAILABLE ON
PRESCRIPTION

Easy to put on



Self-adjustable



Fitting & control assistance





Sleep well with **Mobiderm** compression garments

The **Mobiderm** range of compression garments is designed for overnight use by people with lymphoedema to prevent rebound swelling. Designed for comfort and ease of use, **Mobiderm** does all the work while you get a good night's sleep.

Lymphoedema is a long-term (chronic) condition that causes swelling. It can affect any part of the body, but is most common in the arms or legs¹.

Lymphoedema develops when the lymphatic system is not working properly. Normally, the lymphatic system helps to fight infection and remove excess fluid from the tissues via a network of vessels and glands throughout the body. People with lymphoedema are therefore at an increased risk of infection and swelling of the tissues in the affected area¹.

Lymphoedema can be categorised as primary or secondary. Primary lymphoedema has a genetic cause, while secondary lymphoedema is caused by damage to, or problems with, the lymphatic system as a result of a cancer treatment, an infection, injury, inflammation of the limb, or a lack of movement¹.

The swelling associated with lymphoedema can cause feelings of tightness, heaviness, pain and discomfort, which can impact on daily life. If untreated, lymphoedema can worsen over time. Therefore, lymphoedema should be treated as soon as possible¹.

Lymphoedema management

Lymphoedema is managed in two phases. The intensive phase aims to reduce swelling and encourage the flow of fluid from the tissues through the lymphatic system. This is often described as decongestive lymphatic therapy (DLT) and uses a combination of a form of massage known as manual lymphatic drainage (MLD), compression bandages, exercises and skin care^{1,2}.

The maintenance phase of treatment then aims to 'maintain' the reduced





swelling by keeping it under control in the long-term, commonly using self massage, exercise, skin care and compression garments^{1,2}.

Rebound swelling

Some people with lymphoedema may experience 'rebound' swelling, in which the reduction in limb volume obtained during the intensive stage of treatment is gradually lost over time².

This commonly occurs when passing from the intensive to the maintenance phase, particularly when compression garments are not worn over night^{2,3}.

In one study, 84% of subjects with lymphoedema reported increased swelling overnight when night-time compression was not worn³.

Unfortunately, many people with lymphoedema do not realise that wearing compression during the night can maximise the benefits of daytime compression in reducing swelling and also improved pain and sleep³.

Wearing a garment overnight has also been shown to reduce the risk of

rebound swelling in people with arm lymphoedema following breast cancer treatment².

A compression garment that is comfortable to wear, breathable and easy to apply are considered desirable for night-time wear³.


Mobiderm compression garments for lymphoedema

Mobiderm compression garments were designed with these properties in mind. They are made from a soft, elastic material designed to deliver soft pressure, which is acceptable to wearers during rest and over night.

The garments are fitted with Mobiderm technology which consists of foam cubes on the inside which helps to promote lymphatic circulation with micro-massage. This action continues to mobilise lymphoedema during rest and night time periods, and thereby reinforce the effects of daytime compression.

The garments are easy to apply, they are simply slipped on over the limb, and VELCRO® fasteners adjusted to achieve the desired fit.

Mobiderm compression garments are available as an upper limb armsleeve for the management of arm lymphoedema, or as a lower limb thigh stocking or sock for lymphoedema of the leg.

For more information on the Mobiderm compression range, please contact Thuasne using the details below. 

**For more information, contact Thuasne on: email: orders@thuasne.co.uk
phone **01295 257422** website www.thuasne.co.uk**



Why is vascular assessment important?

If you wear compression hosiery on your lower limb, it is important that you undergo regular vascular assessment to make sure that it is safe for you 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

Why use Flamigel® RT

Protecting the skin against radiotherapy-induced dermatitis with Flamigel® RT



Flamigel® RT is a hydro-active colloid gel (not a moisturiser/emollient) which delays the onset and reduces the incidence of radiotherapy-induced moist desquamation.

Care advice for Flamigel® RT

- ✓ Creates optimal healing conditions to accelerate cell renewal
- ✓ Reduces redness and irritated skin
- ✓ Protects the skin
- ✓ Reduces pain
- ✓ Hydrates the skin and restores moisture balance
- ✓ Provides a barrier against contamination
- ✓ Cools the skin

Flamigel® RT helps to continue the prescribed radiotherapy treatment by delaying the onset and reducing the incidence of radiotherapy-induced moist desquamation (RIMD).

Care. Always ask your Health Care Professional's advice.



Clean

Clean the skin with clean water or with a specific wound cleanser if advised by your nurse or doctor.



Dry

Dry the skin gently with a clean towel by patting the skin.



Treat

Using your fingers apply liberally Flamigel® RT 3 times per day to the treated area. Use from day 1 of treatment.

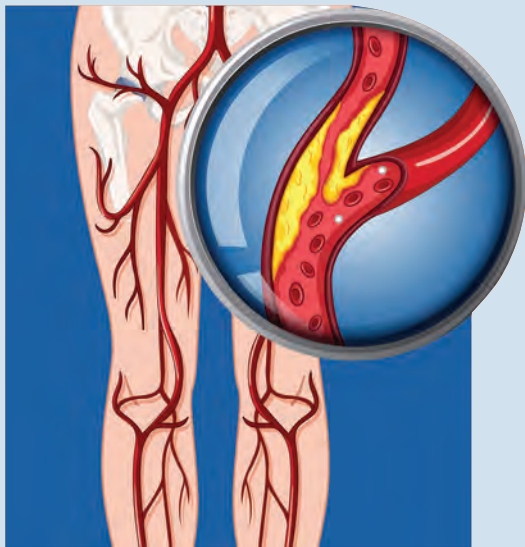


Signs and symptoms of peripheral arterial disease

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.

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

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.

arterial status has not 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/cg147>



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.

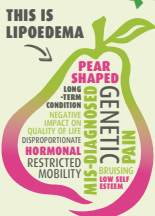


Lipoedema Diet and Lifestyle Questionnaire

Diet is one of the most challenging and puzzling aspects of lipoedema. Why do women with lipoedema put on weight disproportionately to others eating the same diet and living the same lifestyle? To unravel this mystery, Lipoedema UK and De Montfort University have launched a Lipoedema Diet and Lifestyle Questionnaire. If you have lipoedema please take part to help us to uncover the best diet to beat lipoedema.

www.lipoedema.co.uk

LIPOEDEMA DIET & LIFESTYLE QUESTIONNAIRE



Do you have lipoedema and find it a struggle to manage lipoedema symptoms on conventional diets?

Do you notice that certain types of diet and lifestyle affect your symptoms?

If so, please find out more below...

What is our research about?

To find out how your diet and lifestyle habits impact on your lipoedema condition.

Who are we?

Lipoedema UK and De Montfort University are conducting a diet and lifestyle survey in relation to managing lipoedema.

Who can participate?

Members and non-members of Lipoedema UK who have been clinically diagnosed with lipoedema, or have all the symptoms and are convinced they have it, but do not yet have a diagnosis, and have not had any type of liposuction treatment. But don't wait, places are limited.

Why participate?

Your response will help us develop future dietary interventions studies for lipoedema patients.

Interested?

For more information and to enrol, scan the QR Code or visit: www.lipoedema.co.uk/survey-2020/

Not yet a member?

Join today: www.lipoedema.co.uk/membership



Help us to stand up for legs and feet! 11–15 Oct

**LEGS
MATTER!**

The Legs Matter Coalition is working together to increase awareness, understanding and action on lower leg and foot conditions among the public and healthcare professionals.

Our annual Awareness Week for 2021 is 11–15 October. It will be

packed full of free events and activities, from our online virtual events in the

Legs Matter Lounge to regional events organised by healthcare professionals involved in lower limb care.

Legsmatter.org has a wealth of useful downloadable, printable resources for patients and healthcare professionals. We also have informational videos and recordings of sessions from our 2020 Awareness Week.

#legsmatter.

www.legsmatter.org

**STAND
UP FOR
LEGS**



Super Nan and the Secret Support Network Book

by Michelle Freke

This delightful book, written by LSN member, Michelle Freke, tackles the tricky questions young children often ask when they see their loved one's swollen limbs for the first time. Written in Super Hero style, with fabulous illustrations and a section at the back with helpful answers to commonly asked questions, this book aims to raise awareness of lymphoedema, its causes, symptoms and treatment. It also aims to ease the initial shock or fear that young children may experience when a family member or friend has lymphoedema.

It costs £10.00 including postage and packaging and can be purchased via our website.

www.lymphoedema.org.



The 21 Challenge
Movement for all!

LEG CLUB
www.legclub.org

APRIL 5-11

Come and join the virtual world of vWIN Vein Week Sports & Activity Day, linking up with a truly international activity event.

A great way to support Vein Week is by enjoying yourself with friends and family with the Leg Club/vWIN Vein Week 21 Challenge, highlighting the importance of keeping your calf muscle pump working by movement.

The range is huge and can include such activities as 21...

- > laps of the garden
- > star jumps
- > km/mile bike ride or run
- > leg lifts (for those doing armchair exercises)
- > golf swings or putts/games or sets of tennis
- > seconds of any activity of your choice!

Create a short 2 minute video which we'll edit down to 21 seconds for the committee to upload and celebrate Vein Week.

Please submit your video by March 15th by emailing it to:

ellie.lindsay@legclub.org

International Vein week and the 21 challenge

An International Leg Club Committee (ILCC) will be a partner in this year's inaugural International Vein Week. The health event, organised by the vWIN Foundation, takes place between 5–11 April and aims to raise venous-lymphatic awareness to both healthcare professionals and the general public. The ILCC in collaboration with the vWIN Foundation will be supporting the initiative through a calendar of events and a '21' movement challenge. We hope you join us and send a video of your challenge!



Daylong delivers compression straight to your door for free

Whether you need to get your first compression garment or need your usual garment renewing, follow our three step process to get it delivered straight to your door.

1. Clinic visit

First time

When you need a compression garment for the first time, you will need to see a healthcare professional to confirm that it is safe for you to wear compression and that it is the right treatment for you. Once your healthcare professional gives the go-ahead, you can discuss which garment is best for you, you will be measured and will then receive a prescription.

Renewal

If you have been wearing compression for a while, you may have a repeat prescription. This is a white form attached to your green prescription that enables you to get a new garment without seeing your clinician. If you have lost your repeat prescription, contact your healthcare professional to order a new one. Your repeat prescription is valid for 6–12 months, after which you will need a review to check your compression is still right for you, as there may have been changes in your general or limb health.

2. Prescription

Once you have your prescription, send it to Daylong using our **FREEPOST** address:

**FREEPOST RTHL-YUAG-GCST,
Daylong, 10 Cossall Industrial Estate,
Ilkeston, Derbyshire, DE7 5UG.**

You can request free envelopes from our customer service team, or write the address on a normal envelope.

Alternatively, You will need to ask your healthcare professional to send your prescription to us electronically using Daylong (reference No. FJ708) as the preferred dispenser.

Did you know you can nominate Daylong as your preferred supplier of compression hosiery today? It's a free and easy way to get your prescription for compression hosiery. Find out more at www.daylong.co.uk



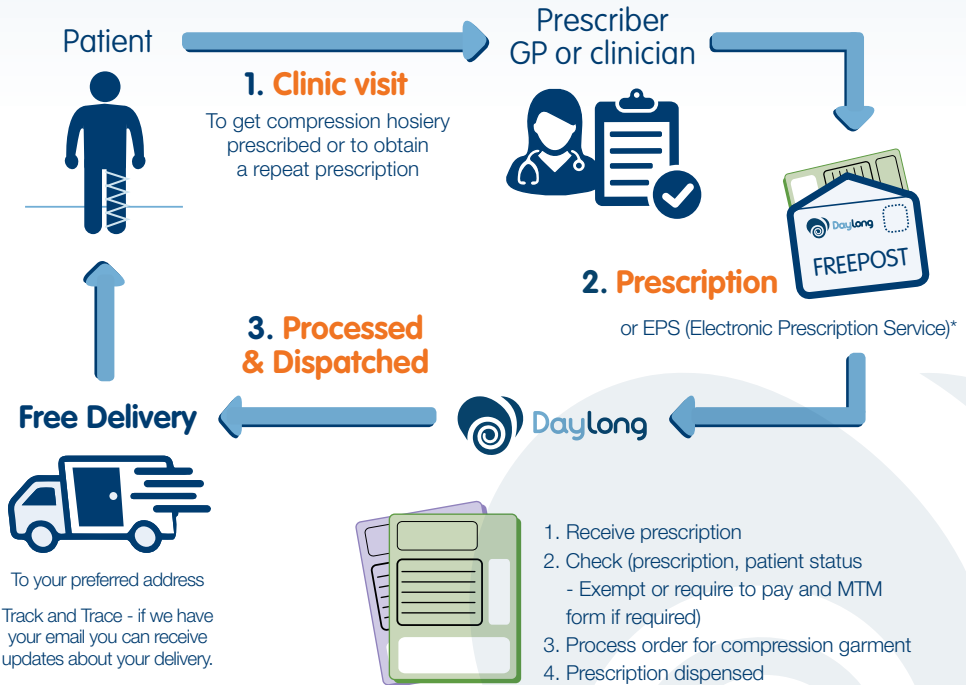
3. Processed & Dispatched

Once we receive your prescription, we will check that we have all the information we need, and will dispatch your garment straight to your door for **FREE** via first class post. Our specialist knowledge of compression hosiery and garments allows us to dispense prescriptions quickly, usually within 3-5 working days* on receipt of the prescription, direct to your preferred address.



RE-Mind
prescription service

The Daylong Re-Mind Reminder service lets you know when you need to order a **NEW** pair of compression garments on prescription. Our **FREE** service helps keep patients informed and empowered.



* Requires patient nomination

JOBST®

Empower
your life and
join the
community



LymphConnect® is here to help!

Your free lymphoedema and lipoedema
online resource:

www.LymphConnect.co.uk

