

From Prolonged Care to Swift Healing: How Evidence-Based Practice and Strong Compression Transformed a Patient's Journey

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Introduction

Compression therapy has long been recognised as the gold standard in treating venous leg ulcers and venous insufficiency. Despite its proven efficacy, many nurses struggle to implement appropriate compression levels due to a lack of confidence and the perceived complexities associated with the patient and application process. This hesitation can lead to suboptimal clinical outcomes, potentially prolonging healing times and increasing patient discomfort. The reluctance to apply correct levels of compression may stem from various factors including insufficient training, fear of causing harm, or uncertainty about selecting the correct pressure levels for individual patients. Consequently, patients may receive inadequate treatment, which can exacerbate their condition and increase healthcare costs. This poster presents the clinical outcomes of a large posterior lower limb ulceration that had persisted for 12 months and the outcomes from integrating the implementation of an adjustable compression wrap (ReadyWrap).



Method

This case study details an 86-year-old gentleman who resides with his wife and is currently housebound. He has a medical history of compensated heart failure, which has significantly influenced previous decisions regarding his compression therapy. For the past year, he has received treatment at his local GP practice. However, due to increasing pain and wound deterioration, he is no longer able to attend appointments and was subsequently referred to the district nursing service. His Ankle-Brachial Pressure Index (ABPI) measurements were recorded as 1.07 on the left leg and 1.15 on the right leg. Given his heart condition, treatment had consisted of moderate compression therapy (20-30mmHg). The presence of leg ulcers has also had a negative impact on his mental health, as he finds himself unable to perform his usual household activities. Following his referral, various compression options were implemented, including both bandages and hosiery. However, while these methods showed some positive outcomes, including reduced oedema and lower exudate levels, he continued to experience significant discomfort. In light of the vascular team advising strong compression (≥ 40 mmHg) and these ongoing challenges, the healthcare team decided to trial the ReadyWrap compression system. The primary goal of this new approach is to enhance comfort and improve his tolerance to compression therapy, potentially leading to better overall outcomes and quality of life.



Results

The patient demonstrated excellent adherence to the treatment plan incorporating ReadyWrap and this diligence resulted in complete wound healing within two months. The patient's ongoing compliance with the wrap system went on to be crucial in long-term maintenance and in the prevention of recurrence. The implementation of ReadyWrap for this patient and others has markedly decreased the time required to manage these complex cases. This efficiency gain has potentially created more opportunities for patient care and allowed the team to attend to a larger number of patients during their workday. Furthermore, the shift from traditional bandaging to ReadyWrap has yielded significant cost savings, proving to be a more economical solution. Consequently, this has enabled more strategic resource allocation within the local area. The adoption of ReadyWrap has created valuable opportunities for continuous professional growth within the district nursing team. This initiative ensures that the team remains current with the latest advancements in wound care, product selection, techniques and technologies. The implementation of ReadyWrap has significantly enhanced collaboration among various nursing staff including healthcare assistants within the team. This increased interaction has fostered a more unified and supportive work environment, where knowledge and expertise are freely shared, ultimately benefiting patient care. Moreover, the use of the ReadyWrap compression systems has contributed to a reduction in clinical waste. This aligns well with broader sustainability objectives and promotes an eco-friendly approach in district nursing practices. By minimising waste, the team is not only improving patient care but also demonstrating a commitment to environmental responsibility in healthcare delivery.



Discussion

Timely and appropriate intervention is critical for lower limb wounds, as delays and inappropriate selection can have severe consequences on the healing process. Postponing treatment may lead to a cascade of complications, including an increased risk of infections, wound deterioration, and extended recovery periods, impacting quality of life. This is particularly concerning for chronic wounds, such as venous leg ulcers, which already present significant challenges to healthcare professionals due to their intricate nature and the substantial resources needed for proper management. The complexity of these wounds demands prompt and appropriate care to promote effective healing. When treatment is delayed, the existing issues can worsen, making the wounds more difficult to manage and potentially leading to long-term health issues.



Conclusion

In conclusion, the patient's adherence to the ReadyWrap treatment plan led to wound healing within two months and its continued use aids in the long-term maintenance and prevention of recurrence. This approach not only improved patient outcomes but also reduced clinical waste, supporting sustainability goals in district nursing. Furthermore, the implementation of ReadyWrap has fostered ongoing professional development within the nursing team, keeping them abreast of current wound care technologies and techniques.



References:

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