

# Acti-Glide: a simple method of applying compression hosiery

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Chronic venous insufficiency affects the productivity and wellbeing of millions of people worldwide and is the most common cause of leg ulcers (Hampton, 2003). Up to 1% of adults suffer from leg ulceration at some time, and the majority of these leg ulcers are venous in origin, caused by high pressure in the veins resulting from blockage or weakness of the valves in the veins of the leg (Nelson et al, 2000). Prevention and treatment of venous ulcers is aimed at reducing the pressure, either by removing or repairing the veins, or by reducing the pressure within the veins using an external appliance such as multilayer, short-stretch bandaging or compression hosiery (Nelson et al, 2000; Hawkins, 2001). This promotes venous return through graduated compression of the tissues and capillaries (Hawkins, 2001).

Compression bandaging has long been recognized as the optimum approach for managing venous ulcers. The correct use of compression therapy can lead to faster healing rates (NHS Centre for Reviews and Dissemination, 1997), and reduced nursing time (Jones and Nelson, 2001). However, there is a variety of reasons why some people may not be concordant with bandaging treatment. Bandages cannot be self-applied, so cause reliance on others (Hampton, 2003). Bandages can also be bulky, causing difficulty with the fitting of shoes (Hawkins, 2001; Johnson, 2002), and so affecting mobility. For these patients, an alternative and clinically effective solution is essential if the wound is to heal. An alternative treatment approach to bandaging is the use of below-knee graduated compression hosiery (Johnson, 2002; Hampton, 2003). Compression hosiery is also often used for ulcer prevention in vulnerable individuals (Armstrong, 1997; Nelson et al, 2000).

It is also known that clients are more likely to wear compression hosiery and look after it properly if they understand how it works (Dale and Gibson, 1992) and are able to apply the stockings themselves (Hampton and Collins, 2003 [AQ Ref?]). Applying compression stockings can present difficulties of its own, particularly for frail older people who may struggle to pull the tight hosiery over their foot. Difficulty in this can lead to possible non-concordance in the treatment.

Studies suggest that patient concordance with wearing compression hosiery could be improved (Peters, 1998). Provision of a simple method of independently applying

difficult hosiery would promote independence and free the patient from unnecessary nurse visits.

## Promoting quality of life while reducing cost to the NHS

Venous leg ulceration typically has a major impact on quality of life (QoL) and is a significant cause of morbidity for many patients in hospital and community settings (Jones and Nelson 2001). Pain, malodour and exudate can affect not only a person's day-to-day living, but also impact on their social and family life. Dependency on others and receiving help with daily living also seem to be significantly related to poor QoL (Hellstrom et al, 2004). Everything should be done to support the patient's independence and maximize their quality of life (Hellstrom et al, 2004).

Treatment of leg ulcers accounts for up to 50% of district nurses' time (Hampton, 2003). This means that not only are district nurses in a key position to disseminate information on effective prevention to patients, but in so doing they should contribute to a reduction in their leg ulcer treatment caseload (Peters, 1998). Visiting patients to undertake unnecessary bandaging places a major financial burden on NHS resources (Hampton, 2003), particularly when the cost of a district nurse visit is over £60 (Thambiaya, 1996). Therefore, any move to reduce nurse visits to a patient is a positive move for the health service.

## Acti-Glide

The Acti-Glide stocking applicator is a simple system that has been specifically designed to make application of compression hosiery an effortless process. Acti-Glide can be used for open and closed toe hosiery and is extremely useful for people with limited mobility or hand movement.

### ABSTRACT

Compression hosiery is often worn to help prevent aching legs and swollen ankles, to prevent ulceration, to treat venous ulceration or to treat varicose veins. However, patients and nurses may experience problems applying hosiery and this can lead to non-concordance in patients and possibly reluctance from nurses to use compression hosiery. A simple solution to applying firm hosiery is Acti-Glide from Activa Healthcare.

### KEY WORDS

Compression hosiery ♦ Venous insufficiency ♦ Application ♦ Acti-Glide

The Acti-Glide is slipped over the foot and then the hosiery is pulled over the slippery surface of the device (*Figure 1*). Once the hosiery is sited correctly, the Acti-Glide is gently pulled up and out of the stocking.

The simplicity of the system removes one of the barriers to regular use of compression hosiery, and so will help improve concordance with treatment.

The Acti-Glide is used on healed skin or, if there is an open wound it is sealed within an occlusive dressing. The fabric is such that it can be, and is, cleaned after each patient. This practice is even safer than using a single Doppler cuff for all patients within the clinic or domiciliary environment.

### A national audit in the use of Acti-Glide

An audit was led and collated by the author, to investigate the value of Acti-Glide to patients and nurses who use compression hosiery.

Thirty-six nurses across the UK, who were involved in day-to-day care of patients with leg ulcers in clinics and

private homes, were approached and asked to complete a questionnaire related to the use and application of Acti-Glide. They were provided with an Acti-Glide and were invited to use it in their practice over the course of 3 weeks.

These 36 nurses were caring for a total of 1164 patients, 833 (72%) of whom had venous ulceration. Of these, 710 (85%) were provided with compression therapy; 426 (60%) of these patients were using compression hosiery. Of these patients:

- ♦ 37% applied their own stockings
- ♦ 38% had help from carers
- ♦ 25% had help from professionals to apply their stockings.

Of the 839 patients with venous disease, 153 (18%) either did not have compression therapy prescribed, or had to use specialist garments. Both nurses and patients believed that 169 (20%) could apply compression stockings if they had assistance from a product such as Acti-Glide.

The nurses were asked to comment on the use of Acti-Glide. Responses were overwhelmingly positive. *Box 1* reports some of their comments.



*Figure 1. Applying compression hosiery using the Acti-Glide.*

**Box 1. Comments on the use and application of ActiGlide**

- ♦ 'Acti-Glide is an excellent invention, although from the survey we do not have many venous ulcers on our caseload. In the past we have and we always advise our patients to purchase an Acti-Glide when they go into compression hosiery.'
- ♦ 'Patients feel stockings go on easier causing them less pain and trauma.'
- ♦ 'Acti-Glide allows elderly patients to be independent when applying their compression hosiery. Also it frees district nursing time if carers can use the Acti-Glide to apply hosiery.'
- ♦ 'Patients/nurses able to fit stockings with greater ease. Patients less anxious about going into compression hosiery.'
- ♦ 'I can now get my stockings on and do not have to wait for the nurse to come.'
- ♦ 'Most elderly patients find it confusing and prefer the 'pixie' boot!'
- ♦ 'Found it hard to use. Very thin and starts slipping.'
- ♦ 'Acti-Glide is very useful in that it aids the patient to apply hosiery on a daily basis and to be compliant.'
- ♦ 'No longer visit clinic except for reviews.'
- ♦ 'Very useful. I would not be able to use the hosiery without it.'
- ♦ 'The ActiGlide is a very useful device and makes application of compression hosiery much easier for both patients and carers. However most of our patients are elderly and on low incomes, and are reluctant to pay for the Acti-Glide themselves. £15 seems like a huge amount of money to them, for something that they need from the health service.'
- ♦ 'Much easier to apply hosiery with Acti-Glide, especially when applying for the first time. Our patients, especially elderly ones do have some degree of difficulty applying hosiery and would undoubtedly find it easier with an Acti-Glide however many choose to struggle due to cost implications.'
- ♦ 'Easy to use. Match it to the right person and they will use it. Gives more choice. Glides and cleans easily. Undoes easily. Less bulky.'
- ♦ 'Patients happy to use – helps compliance.'
- ♦ 'Useful for demonstrating and allowing patients to practice. If on FP10 would use much more.'
- ♦ 'Patients say it is easy to remove after application of hosiery.'
- ♦ 'Encourages independence – less risk. Cost-effective. Greater compliance.'
- ♦ 'Fairly easy to use. Cost effective. Of all applicators, Acti-Glide is the most popular.'
- ♦ 'Makes whole process of application so much easier – less physical effort required.'
- ♦ 'Good for prevention of breakdown. Patients' carers have recommended it.'
- ♦ 'Patients and carers like Acti-Glide.'
- ♦ 'Empowers more patients. Makes nurses job easier. Less stress on the back. Better compliance.'
- ♦ 'Patients can not afford it but may try out if on FP10. Enables patient/carer to apply garment. Less of a struggle for the poor nurse especially with Class III.'

**Benefits of Acti-Glide**

- ♦ Acti-Glide comes in flat packaging for travel purposes which is easier to manage than frames
- ♦ There have never been any identified sensitivities to the material from which Acti-Glide is made
- ♦ For larger feet and legs, the last two eyelets can be omitted to make a wider aperture
- ♦ The guide wire is easy to use even for patients with limited dexterity
- ♦ Acti-Glide makes hosiery application easy, so preventing undue pressure on the carer's backs
- ♦ The simple application of the hosiery ensures that the garment is applied evenly without stretching the fabric and this allows the stocking to pulled to its full length.

**Availability of Acti-Glide**

Limited availability restricts its use to those patients who can afford the cost.

ActiGlide is not yet available on the Drug Tariff, but can be obtained through NHS Logistics, or purchased by the patient through retail pharmacies or the Leg Care Company. Further information is available from the manufacturer, Avtiva Healthcare.

**Conclusion**

The results of the audit show that use of Acti-Glide can increase patient concordance, reduce nursing costs and promote quality of life for the patient with – or at risk of developing – a venous ulcer, who uses compression hosiery, but is unable to do so independently. Access to such a product would decrease the number of nurse visits or nurse involvement and has the potential to empower the patient by increasing independence.

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Armstrong S (1997) Compression hosiery. *Prof Nurse* 12(7 Suppl): S10–1

Moffatt CJ, Dorman MC (1995) Recurrence of leg ulcers within a community ulcer service. *J Wound Care* 4(2): 57–61

Dale JJ, Gibson B (1992) Information will enhance compliance. Informing clients about compression hosiery. *Prof Nurse* 7(11): 755–6, 758–60

Hampton S (2003) Jobst UlcerCARE compression hosiery for venous leg ulcers. *Br J Community Nurs* 8(6): 279–83

Hawkins J (2001) A new cohesive short-stretch bandage and its application. *Br J Nurs* 10(4): 249–53

Hellstrom Y, Persson G, Hallberg IR (2004) Quality of life and symptoms among older people living at home. *J Adv Nurs* 48(6): 584–93

Johnson S (2002) Compression hosiery in the prevention and treatment of venous leg ulcers. *J Tissue Viability* 12(2): 67–74

Jones J, Nelson EA (2001) Use of compression hosiery in venous leg ulceration. *Nurs Stand* 16(6): 57–60, 62

Nelson EA, Bell-Syer SE, Cullum NA (2000) Compression for preventing recurrence of venous ulcers. *Cochrane Database Syst Rev* 2000(4): CD002303

NHS Centre for Reviews and Dissemination. (1997) Compression therapy for venous leg ulcers. *Effective Health Care* 3(4)

Peters J (1998) A review of the factors influencing nonrecurrence of venous leg ulcers. *J Clin Nurs* 7(1): 3–9

Thambiaya K (1996) Evaluation of a leg ulcer clinic. *Nurs Stand* 10(31): 58–62

**KEY POINTS**

- ♦ Leg ulcers are found in up to 1% of the population at some point.
- ♦ Treatment and prevention can be costly in nursing time.
- ♦ Patient independence should be promoted wherever possible.
- ♦ Application of compression hosiery can be difficult due to the tightness of the stocking.
- ♦ The use of Acti-Glide simplifies the application of hosiery, reduces cost and promotes patient independence.