

In this together

Making compression better

Issue 2, 2018

Skin changes: what are they and what causes them?

Walk this way for health and wellbeing

Made to measure compression hosiery; why the right fit is so important

Understanding cellulitis and how to prevent it

Your venous leg ulcer treatment journey



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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



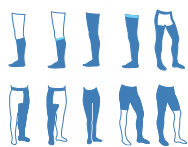
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Opinions expressed in the articles do not necessarily reflect those of Daylong. Any products referred to by the authors should only be used as recommended by manufacturers' data sheets.

Version number CR065 V.2 02/18.



veni mto



10 Styles

5 Panty Options

Standard Width
or Extra Wide

4 Grip top options



3 Compression
Classes



9 Colours

3 Leg Lengths

Footless Tights

3 Foot Lengths

Open or Closed Toe

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Sharing our knowledge and expertise, all Daylong

The world in which we live today is fast-paced and forever changing. In many ways this is a good thing as advances in knowledge and technology push the boundaries of what we know and can achieve. It can make it difficult, however, to keep up with the information we receive.

Developments in healthcare have come together with advances in compression technology resulting in better fabrics, better garments and more choice than ever before.

Medical research has led to an improved understanding of diseases and their treatment and the impact they have on the lives of people who suffer from them, and their families and carers. As a result of greater knowledge and progress, people now live for longer with complex conditions. There are now more people with disorders of the venous and lymphatic systems than ever before. A recent study revealed that approximately one in 170 adults had a diagnosed venous leg ulcer in 2013/14¹ and these numbers are set to increase.

The costs of caring for people with these conditions can no longer be ignored by the NHS. As a result, there is now a focus on prevention, successful treatment, encouraging self-care, and an emphasis on patient choice.

Developments in healthcare have come together with advances in compression technology resulting in better fabrics, better garments and more choice than ever before so people who need compression can pick something to suit their condition and just as importantly, their lives and abilities, so that self-care and everyday life is possible.

Here at Daylong we supply the largest range of compression to the NHS, as well as selling products direct through our online shop. We don't just sell compression, we are passionate about sharing our expertise and knowledge with everyone who has compression in their lives. We hope you enjoy this latest issue of our magazine. It brings together all the latest information on venous leg ulcers and oedema, while also outlining the compression choices available. Advice on health and wellbeing is provided too so you can make informed decisions about what is best for you. 



*Mark Hudston,
Marketing Director,
Daylong*

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



Made to measure compression hosiery: why the right fit is so important



Compression therapy is used as a key part of the management of conditions that arise from disorders of the venous and or lymphatic systems.

Compression therapy works by helping to move blood and fluid from the tissues back into the veins where it is then returned to the heart. By easing congestion in the tissues, swelling is reduced and wounds are encouraged to heal.

There are many ways in which compression therapy can be delivered,

including multi-layer bandaging, wraps, or hosiery garments.

Hosiery is commonly used in the long-term management of chronic oedema and lymphoedema to prevent swelling once it has been reduced, or to maintain healing once a venous leg ulcer has healed. It is now common for leg ulcer hosiery kits to be used instead of bandaging as a recent trial showed they are as effective as bandaging to heal venous leg ulcers in some patients (Ashby et al, 2014).



However, for compression hosiery to work well, it must fit well. Ill-fitting hosiery may not deliver the right amount of compression. This can mean it simply won't help, or worse, can result in damage to your skin and underlying tissue. For example, a garment that is incorrectly measured may be too tight, resulting in pressure damage to the skin and restrict blood flow. Too loose and it will simply not apply enough compression to work, and could wrinkle or fall down.

To ensure a good fit, and to get the maximum benefit from your compression, it is important to consult a healthcare professional to decide on the best style and class of compression garment for you. This will influence what choices are available. For example, if you have varicose veins with no swelling, a circular knit garment made of a thinner fabric might be suitable, while lymphoedema that is resistant results in long-term persistent swelling to the limb that may need a stiffer flat-knit garment that can help to provide more resistance to the swelling and bridge any skin folds that are present.

Next, the size of the garment is selected following the manufacturer's guidelines (these may vary depending on the choice of garment). Usually, this involves taking several measurements from fixed points on the limb. The measurements will then

fit into a range of standard sizes, enabling the correct product to be selected, just like when you buy your clothes. For some people, however, the standard sizes of

compression hosiery will not fit. If your limb is long, short or has a circumference outside of stock sizes, you might have difficulty buying a compression garment 'off the shelf'.

Made to measure hosiery, as the name suggests, is made to your unique measurements ensuring a comfortable fit and that compression is delivered correctly.

This is where made to measure hosiery comes in. As the name suggests, made to measure hosiery is manufactured to fit according to the wearer's unique measurements. This ensures that the garment fits, is comfortable and delivers the right amount of compression to the limb.

As with selecting and measuring for standard compression garments, different manufacturers will require different measurements to produce a unique tailored garment. So as with off the shelf hosiery, measurements must be taken according to the manufacturer's guidelines.

Once ordered, made to measure garments are manufactured for you, and are usually delivered within the week; not too long to wait for the perfect fit.

Ashby RL, Gabe R, Ali S, et al (2014) Clinical and cost-effectiveness of compression hosiery versus compression bandages in treatment of venous leg ulcers (Venous leg Ulcer Study IV, VenUS IV): a randomised controlled trial. *Lancet*. 2014 Mar 8; 383(9920):871-9. Epub 2013 Dec 6.



Product name: Credalast Velvet/Classic
Manufacturer: Credenhill



- Credalast circular-knit, made to measure garments use state of the art knitting technology for a seamless finish
- Two ranges for the management of lower limb venous conditions not associated with long-term swelling (oedema)
- Credalast Velvet stockings are produced with Tactel® Climate Effect technology means the garment is breathable and wicks away moisture to maintain optimum skin balance
- The Tactel® microfibres also offer outstanding comfort and softness
- Classic range offer greater stiffness and traditional stocking style.

Product name: Sigvaris range
Manufacturer: Sigvaris



- Four ranges of made to measure compression stockings:
- *Comfort*: A unisex stocking available in 6 colours
- *Cotton*: 100% cotton garment, ideal for all seasons and sensitive skin.
- *Magic*: Sheer and elegant stockings in six colours. Soft and comfortable to wear
- *Traditional 500*: A stocking offering an alternative to flat-knit garments. Effective for severe oedema. Contains natural rubber and is robust yet comfortable.



Product name: ActiLymph MTM Ease/Dura
Manufacturer: L&R



- ActiLymph custom-made compression stockings are flat knit for the management of chronic oedema and lymphoedema
- Stockings are made with a soft fabric which enables easy application and comfort during wear, while still delivering effective compression
- Ease range is ideal for most types of chronic oedema and lymphoedema
- Dura range of garments are available for people with resistant chronic lymphoedema who need a stiffer garment to reduce limb volume
- Available in sand and black.

Product name: JOBST Elvarex
Manufacturer: BSN Medical



- Flat-knit custom-made compression garment for the management of lymphoedema
- Air permeable and breathable fabric makes the garment pleasant to wear.
- Fabric means that the garment lies flat over skin folds
- Fabric micro-massages the skin during wear, which is beneficial for stimulating the fine lymph vessels below the skin's surface.
- Wide choice of compression classes, ensuring your garment delivers the right pressure for you
- Available in a range of colours.



Get the best from 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 fibres of your garment. If air drying, lying the

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 (*see p.30 for more details*).

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.

4 Beware of moisturiser

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

5 Replace

Replace your garment every six months, or sooner if it is showing signs of losing its effectiveness, such as a loss of elasticity, feeling looser than usual or if it is damaged in any way with fraying or holes. 

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



Walk this way for health and wellbeing

Walking is a great way to improve health and wellbeing. It's easy, completely free and you can set the pace. So, grab your shoes, get going and head for the great outdoors!



1. Almost everyone can do it

Walking is an activity that almost everyone can do (only 4% of people need help with walking outside or can't walk at all) so it is perfect for people who have poor health, or don't want to exercise intensively. It's just a question of heading outdoors and getting started.

2. It is good for your heart

Walking gets your blood pumping without putting excessive strain on your heart. Regular walking has been shown to reduce the likelihood of cardiovascular events including angina, heart attack, and stroke by more than 30 per cent. Walking for 30 minutes a day has been shown to

help reduce high blood pressure, making it great exercise for sedentary individuals, especially adults, to reduce the risk of heart and cardiovascular diseases.

3. It significantly reduces the risk of serious disease

Just 20 minutes of walking each day cuts the risk of early death by almost a third. Walking also reduces the risk of serious diseases including type 2 diabetes, colon and breast cancer and Alzheimer's disease by 20–50%.

4. It boosts mood...

Walking is highly recommended to improve mood and boost energy.



5. ...and vitamin D levels

Walking in the morning sun for 10–15 minutes is a great opportunity for your body to produce vitamin D, which is essential for bone strength and is thought to have a role in preventing cancer, multiple sclerosis and Type 1 diabetes.

6. It is low impact on joints

Walking is low impact, which means it puts less stress on the joints than high impact activities, e.g. running or jumping. This makes it a good way to exercise for those who do not want to put their joints under strain.

7. It reduces stress

As walking raises your heart-rate without sending it thudding through your chest, it relieves stress rather than causes it: unlike other more intense exercise which can result in the release of the stress hormone cortisol.

8. Walking improves balance and reduces the risk of fall

Walking helps to increase lower body strength, which is an important factor in maintaining balance.

9. Improves blood flow from the legs to the heart


Walking improves the return of blood from the legs to the heart in people with venous disorder and leg ulcers. This effect is enhanced when wearing compression while walking as it provides resistance to the ankle and foot muscles, making them squeeze blood in the leg veins, aiding its return to the heart.

Ready to go?

It is recommended that adults do at least 150 minutes of moderate physical activ-

ity, like walking, each week, while children should aim for an hour of activity each day. The NHS campaign 'Active 10' promotes walking briskly (quick enough to get your heart pumping) for 10 minutes every day to make a difference to your health.

If you are new to walking, it is recommended that you start with a 10 minute brisk walk a day and then gradually build up to more. You can then increase this duration further to 30 minutes a day. Then, walk for 30 minutes in the morning and 30 minutes in the evening.

You should also gradually increase the pace of your walking. When you are comfortable enough, you can try to walk 10,000 steps a day, and from there, the sky is the limit! 

Walk this way...

Active 10

<https://www.nhs.uk/oneyou/active10/home>

App and guidance on being active for 10 mins every day

Walking for health

<https://www.walkingforhealth.org>.

for information on all things walking, including advice on walking with a long-term condition

Ramblers

<http://www.ramblers.org.uk/go-walking/about-group-walks.aspx>

All things walking for all abilities.



Spring into gardening action!

Repetitive tasks and skin injury often result in worsening of arm lymphoedema in people who have had breast cancer treatment. Here we offer advice on how to protect your limb while gardening in the great outdoors.

1 Cover up

Wear protective gardening gloves, ideally ones that extend up the arm, to protect the skin from cuts and scratches while gardening

2 Keep the bugs away...

Use insect repellents that won't dry out the skin and don't contain harsh chemicals. Insect bites can result in damage to the skin, making it susceptible to infection.

3 ...and the sun too!

Wear sunscreen of SPF 30 or above to prevent painful sun damage to your skin.

4 Easy does it

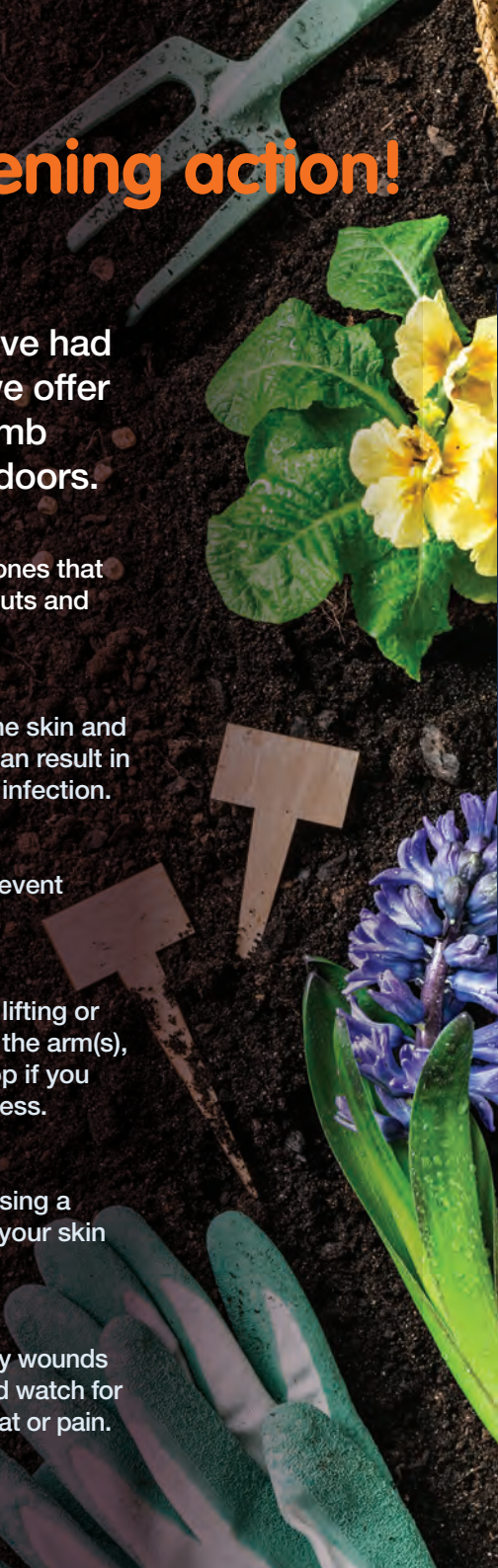
Be cautious and don't over do any heavy lifting or activities that involve repeated movement of the arm(s), such as raking. Take frequent breaks and stop if you experience aching, pain or feelings of heaviness.

5 Washing up

After all your hard work, wash your skin using a gentle soap and apply a moisturiser to keep your skin in good condition.

6 Wound watch

Apply a topical antiseptic or antibiotic to any wounds that you notice. Cover them with a dressing and watch for signs of infection such as redness, swelling, heat or pain.



It's a wrap!

You don't have to go to the movies to be amazed...

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Your leg ulcer problems solved

Our Daylong expert provides advice on dealing with problems associated with venous leg ulcers. If you have a question, please write to us at editorial@daylong.co.uk, and we will try to help

Q. Why do I need to keep a dressing on my leg ulcer? Won't it heal more quickly if I let the air get to it?

A. It's good to use a dressing for a few reasons. First, it provides a barrier between your wound and the environment, helping to protect it from infection. Second, the dressing will absorb any fluid your wound produces, helping to protect your skin from becoming too moist which can make it more susceptible to damage and infection, and cause increased pain. The dressing will also prevent your wound from sticking to any compression bandaging or garment you are wearing, helping to protect delicate healing tissue and keeping your compression product cleaner for longer. The dressing you use should be appropriate for your stage of wound healing. For example, a thin film dressing can be used for a shallow almost healed wound. If the skin surrounding your wound is fragile, a dressing containing silicone may avoid causing damage to the skin as may happen with some adhesives.

Q. I am wearing multi-layer compression bandaging but am really missing my daily shower. I really feel like cutting the bandages off as I am not due to have them changed for a few more days.

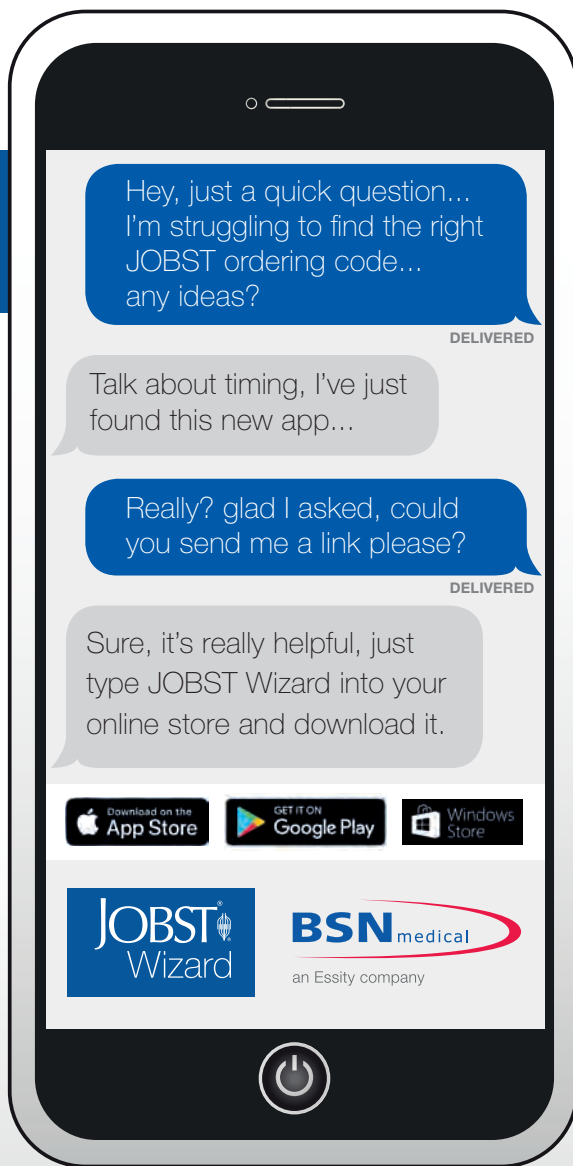
A. As you know, compression therapy is vital for healing your leg ulcer. Bandaging is usually used when the limb is swollen and/or a very large wound is present. In both cases, padding can be used to restore a cylindrical limb shape before bandaging is applied over the top, to ensure compression is delivered correctly. However, this can have the disadvantage of you having to wear it for several days and nurse visits to change the bandaging, removing some of your independence. Remember, bandaging is only used until your limb is ready for the next phase of compression. Once swelling is reduced and your wound is smaller, and providing your limb is cylindrical in shape, you could use a compression hosiery kit, garment or wrap which will allow you to apply and remove as and when you like, for activities such as showering and bathing. Discuss these options with your clinician.

The advice given here is for commonly encountered venous leg ulcer 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.

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What to expect on your venous leg ulcer treatment journey: from diagnosis to healing

Rosie Callaghan, a Nurse Specialist in Tissue Viability outlines what you can expect at each step of the way of your venous leg ulcer journey.



Rosie Callaghan is Tissue Viability Nurse Specialist, Worcester

Once you have been diagnosed with a venous leg ulcer, you begin a journey and you may not know what to expect along the way. This can be daunting and create worry and anxiety. However, although everyone is different, there is a common route to healing. You may deviate off the road at some points due to setbacks such as infection, but with the right management, you should get back on the right track.

What is a venous leg ulcer?

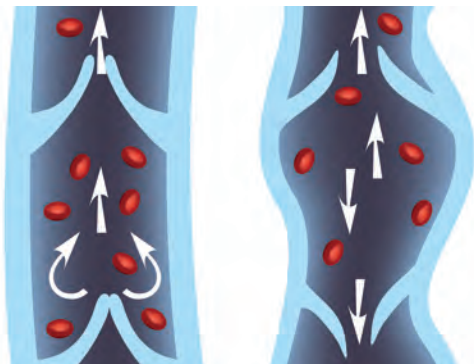
Venous leg ulcers arise when the valves in the veins of the legs are not working properly and struggle to prevent the backflow of blood in the legs as it is returning to the heart (*see figure opposite*). This means that some of the blood pools in the lower leg causing problems such as skin changes, swelling and eventually, ulceration (read more about skin changes on p.26–7).

The National Institute for Care and Health Excellence defines venous leg ulcers as ‘an open wound between knee and ankle that occurs in the presence of venous disease and that takes more than two weeks to heal’.

You will know that your ulcer is venous as your healthcare professional should have carried out a thorough assessment to establish this.

Your management

The management of a venous leg ulcer focuses on healing the wound by using



In a normal vein, the valves work to prevent the backflow of blood (left). If the valve is faulty, blood can flow backwards where it pools in the vein (right).

wound dressings and compression therapy, and addressing any factors such as lifestyle choices that may also delay healing.

Although a venous leg ulcer may heal with just the application of a wound dressing, this is a rare occurrence, and if healing does occur, it will probably not stay that way for long because the underlying cause has not been addressed; namely, helping the blood from the lower leg return to the heart. This is where compression comes in; it provides resistance to the muscles in the limb, helping to squeeze blood within the vessels, helping to clear congestion in the tissues.

Different compression methods may be used throughout your journey depending on factors such as the size of your ulcer, if swelling is present, the overall shape and size of your limb, and your preference.

For example, if your wound is large and producing a lot of fluid (known as wound exudate) it may need a large bulky dressing to manage the fluid and prevent leaking. At this stage, you will probably need to have multi-layer compression bandaging applied. This is so that padding can be used to make your leg into a cylindrical leg shape so that compression bandaging can be applied over the top of the dressing to deliver the correct amount of pressure. Likewise, if your limb shape is distorted due to significant swelling, padding will be used to restore a cylindrical shape and then compression bandaging applied.

However, it is well recognised that multi-layer bandaging can be bulky, hot, and uncomfortable, as well as inconvenient as normal clothing and footwear may no longer fit. It can affect your ability to bath and shower, and care for your limb. If you need bandaging, it is important to remember this phase of treatment does not need to be forever. It is simply to reduce wound size and swelling until a different compression option can be used.

Once your wound has reduced in size and is producing less exudate, and swelling has reduced, you can discuss other compression options with your healthcare professional.

Compression hosiery kits have been shown to be as effective as bandaging in healing venous leg ulcers in a recent trial. This means they can be used as an alternative for some people with a venous leg ulcer (limb right shape, wound not too big).



They can be applied and removed by the wearer or carer, helping the wearer to care for themselves without nurse visits needed for bandage application. Normal footwear can be used too. Hosiery kits are also ideal for preventing the recurrence of ulceration once your leg ulcer has healed. They are not suitable were the limb is swollen and still reducing in size; this means the hosiery will become too big as limb volume reduces.

Venous leg ulcers are more likely to come back in patients who do not wear compression hosiery once healing has occurred.

Similarly, compression wraps are available that enable self-application. They have the benefit of being adaptable as limb volume reduces, making them an option for cylindrical shaped limbs with swelling that is reducing.

All compression should be worn as directed by your healthcare professional. Garments are usually worn during the day to aid venous return.


While compression addresses the underlying cause of your venous ulcer, it is important that your wound and surrounding skin is also cared for to improve the chance of healing. As healing progresses, your wound should become smaller and should produce less fluid and be less painful. Your wound should be covered with a suitable dressing for it's conditions. A dressing is important as it protects the wound from infection and stops

it becoming too dry, which can delay healing. A sudden increase in exudate, pain, odour or the presence of redness, and heat may indicate infection, and you should contact your healthcare professional as soon as possible.

Once healed, take care of your skin by cleansing and moisturising. Wearing a compression garment in the long term has been shown to prevent recurrence. Patients who do not wear compression following

healing have been shown to have a very high rate of ulcer recurrence. You will undergo regular review to ensure your underlying health is OK and to reduce the risk of further skin breakdown.

Sadly healing is not possible for everyone, as lots of other health complications or terminal illness, can stop this from happening. However, symptoms such as odour, pain and leaking can be managed so that they have a minimum impact on quality of life. These symptoms are known to be the things that cause the most distress to people with venous leg ulcers, and their management is the thing that is desired more than healing.

Whatever your stage of the journey, be sure to discuss your options with a healthcare professional so that living with your ulcer has a minimal impact on your quality of life. 



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Understanding cellulitis and how to prevent it

Cellulitis is a skin infection that commonly occurs in people with skin that is vulnerable to damage. Here we explain what causes cellulitis, how to recognise it and when to seek help.

Cellulitis is a spreading infection of the skin and the underlying tissue. It is usually caused by staphylococcus or streptococcus bacteria.

Anyone can get cellulitis, as it occurs when a break in the skin's protective barrier provides the opportunity for bacterial infection. This could be caused by something as simple as an insect bite or a scratch while gardening.

People with conditions that cause cracks and breaks in the skin, such as eczema, athlete's foot, lymphoedema or venous leg ulcers, are known to be at an increased risk. Likewise intravenous drug use or the use of cannulae or other medical devices that pierce the skin can also cause the condition.

A weakened immune system (which could be caused by chemotherapy, immunosuppressant medication or conditions such as poorly controlled diabetes), can also increase the risk of developing cellulitis, since the body is less able to fight infection.

What to look out for

Cellulitis starts with a red, painful, hot, swollen and tender area of skin that will gradually spread without treatment. Blistering may occur. A general feeling of being unwell and/or tiredness may come before or at the same time as the skin symptoms.

When to get treatment

Cellulitis needs treatment with antibiotics at the earliest opportunity to kill the bacteria responsible. Antibiotics may be given orally if the infection is mild, or may require hospital admission and intravenous administration if severe. Any compression garments that are worn on the affected area may become too painful to tolerate, so compression should be reduced and, in some cases, removed until the infection is under control. Normal compression should be reapplied as soon as possible, according to your healthcare professional's instructions.

Reduce your risk of cellulitis

Cellulitis can be a recurring problem as simply having one episode increases the risk of it happening again. Recurrence




TOP TIP

Your healthcare professional may draw a line around the redness on your limb. This helps to monitor if the infection is spreading. If it is, the redness will move beyond the initial lines.



is particularly common in patients with venous insufficiency and lymphoedema, because of the fragility of the skin.

It is therefore important to keep skin healthy and in good condition to prevent breaks occurring, if you are at risk. This means good skin care and maintaining the

recommended compression regimen to promote wound healing and/or reduce any swelling present. Monitoring of the skin, regular moisturising and rapid treatment of any wounds, bites and scratches and areas of skin inflammation (eczema) should be carried out then monitored to ensure healing takes place. 



Dr Leanne Atkin, Lecturer Practitioner at the University of Huddersfield advises:

'Cellulitis is often misdiagnosed. Approximately one in three people are told they have cellulitis when in fact they don't. This is because there are several other conditions that can result in redness to the legs, including deep vein thrombosis, venous eczema and venous hypertension. If the redness is affecting both legs, as is common with venous eczema, it is unlikely to be cellulitis as it rarely affects both limbs. If you have any concerns or think you have cellulitis, arrange to be

assessed by a healthcare professional as soon as possible.

If cellulitis is diagnosed, patients are often told to stop wearing compression. This need not be the case; in fact compression can help to support the venous and lymphatic systems during the episode of infection. Every case is different so should be considered individually. Compression shouldn't be stopped routinely. Often, pain as a result of the infection means that compression cannot be tolerated. In this case, compression should be stopped but resumed as soon as possible once it is comfortable for the patient.'



The Eatwell Guide to a healthy, balanced diet

The Eatwell Guide provides advice on what and how much to eat in order to maintain a healthy diet. Aim to achieve balance over the course of a day, or even a week, to feel the benefits.



Drink plenty of fluids: aim for 6-8 glasses a day

Water, low-fat milk and reduced sugar or sugar-free drinks including tea and coffee all count towards your daily fluid intake. Fruit juice and smoothies also count but they contain free sugars that contribute to tooth decay, so these drinks should be limited to 150ml per day.



Eat five portions or more of a variety of fruit and vegetables

Fruit and vegetables, whether fresh, frozen, tinned, dried or juiced, should make up a third of what we eat every day. They are an important source of vitamins, minerals and fibre.

A third of your food should be carbohydrates

Starchy foods such as potatoes, bread, rice and pasta are a good energy supply and the main source of a range of nutrients in our diet.

Eating the wholegrain option as often as possible is a great way to slow the release of energy from these foods, while also increasing your fibre intake. Choose wholewheat pasta and brown rice, or simply leave skins on potatoes. Remember, there are also higher-fibre versions of white bread and pasta available too.

Eat small amounts of unsaturated oils and spreads

Unsaturated fats are healthier fats that mainly come from plants, such as nuts and seeds. They include vegetable, rapeseed, olive and sunflower oils. Unlike saturated fats, they do not raise blood cholesterol.

However, all types of fat are high in calories and should be eaten sparingly.

Include an important source of calcium in your daily diet

Having a daily intake of calcium in the form of milk, cheese, yoghurt or fromage frais is important for bone health. It is also a good source of protein and some vitamins. Try to go for low fat and low sugar products where possible, like skimmed milk, reduced-fat cheese or plain, low-fat yoghurt. Dairy alternatives such as almond and soya milk are also available.

Put some protein on your plate

Beans, pulses, fish, eggs and meat are good sources of protein, vitamins and minerals. Aim for at least two portions of fish every week – one of which should be oily, such as salmon or mackerel. Pulses such as beans, peas and lentils are good alternatives to meat because they're lower in fat and higher in fibre and protein, too. Choose lean cuts of meat and mince and eat less red and processed meat like bacon, ham and sausages.

Restrict foods that are high in fat, salt and sugar

Food such as chocolate, cakes, biscuits, sugary soft drinks and ice cream are not needed in the diet.

Aim to eat them as an infrequent treat and in small amounts.

Adapted from the Eatwell Guide, www.gov.uk/government/publications/the-eatwell-guide



Lymphaletics for children with lymphoedema and their families

The Children's Lymphoedema Special Interest Group (CLSIG), is a volunteer group of lymphoedema specialists working closely with the Lymphoedema Support Network (LSN) to promote lymphoedema services and provide support for children with this condition.

Our members are all healthcare professionals who are directly involved in treating children with lymphoedema. As well as providing direct care and support, we also try to raise awareness of the condition, promote the provision of effective services and ensure that patients and families of children with lymphoedema are provided with the help and information that they need.

Lymphoedema is an incurable condition that can cause swelling of any part of the body and can be very

disfiguring. It is not life-limiting but children often find that they cannot join in with sports or competitive activities because of their swollen limb. Lymphoedema is a relatively rare condition so children are unlikely to meet others who have the same problem. The main component of treatment is to wear compression garments on the affected limb(s) but this often causes embarrassment, name-calling or loss of confidence – it's hard enough being a teenager without the added difficulties of lymphoedema!

Lymphaletics

Every two years, the CLSIG host the Lymphaletics, a special day for children with lymphoedema and their families. The event aims to provide fun, activities and an opportunity for everyone to meet each other. Exercise helps control lymphoedema considerably and the day provides the opportunity to promote this




to the children and their families, and to build up their confidence. The day creates an environment where children can get together with others who are having the same issues, enabling us to strengthen their coping and adaptation strategies.

Where we do it ...

The fourth National 'Lymphaletics' will take place in the Concorde Sports Centre in Sheffield on the 15th September 2018. Around 100 families from around the UK take part and will participate in a fun day of sport/activities in a supportive environment to promote confidence and quality of life. Professor Peter Mortimer will be the key-note speaker in the education

session and the day will be supported by an exhibition of products used in the management of lymphoedema.

Why together we can do it...

This whole day is about teamwork and achievement! Our aim is for a fun day for the children and their families, that promotes adopting exercise as a way of managing lymphoedema while also building confidence. Lymphoedema management for children in the UK is greatly under-resourced to date and by raising awareness of the condition we hope to make sure that all children who have this condition access appropriate treatment. 

Contact us

If you would like to comment on this or any other features or contribute to a future edition of *In This Together*, please contact the Editor:

editorial@Daylong.co.uk



Skin changes: what are they and what causes them?

People with disorders of the venous and/or lymphatic systems will see a number of gradual changes occur to their skin with time. If these changes are noticed, steps can be taken to stop them becoming more severe. Here, we provide a visual guide to some of the most common.

Aching, tired legs

If your legs tire, ache and/or feel heavy after a period of standing this can be an early warning sign of venous and/or lymphatic disorder.



Spider veins

Spider veins are capillaries in the skin that are widened, giving them the appearance of spider legs. They could be an early sign of venous disorder, but also occur as part of normal aging.



Varicose veins

These are caused by weak or damaged valves in the veins of the leg that allow the backflow of blood. This causes the vein to stretch and enlarge so that it bulges and becomes visible.





Haemosiderin staining

Is seen as a purple or rust-coloured discolouration of the skin that, over time, may blacken. It is a sign that blood is pooling in the veins as a result of weak or damaged valves.



Swelling

Mild swelling can occur following standing or sitting for a while. It is caused by fluid (lymph) collecting in the tissues of the affected leg. In the early stages, the swelling will be soft when touched.



Venous leg ulcer

Venous leg ulcers occur when chronic pooling of the blood in the lower limb results in several changes that make the skin fragile and vulnerable to damage.



Venous eczema

This is also known as venous dermatitis or venous stasis dermatitis and is also caused by the pooling of blood in the leg veins. It can occur on one or both legs.



To find out more about skin changes and how to manage them, visit:

www.daylong.co.uk



The Leg Ulcer Charity

The Leg Ulcer Charity was set up in 2011 to inform and empower people with leg ulcers, their carers and healthcare professionals to help them to understand the condition and how to get the optimal treatment available.

Over the last 20 years, research has led to an improved understanding of leg ulcers and what causes them, and more importantly, how to cure them.


The Leg Ulcer Charity focuses on four main areas. First we aim to empower patients, their families and carers to understand that leg ulcers may be curable and to help them ask for the correct investigations and treatment.

Second, the charity supports research into the consequences of having a leg ulcer for the patient and the people around them. The research will also measure the impact of curing those leg ulcers that are curable.

Third, we are looking to support healthcare professionals to learn more about leg ulcers by supporting their professional development. We provide information and educational lectures and talks to nurses and other healthcare professionals interested in venous leg ulcers.

Finally our ultimate aim will be to raise enough money to be able to provide assistance to patients with leg ulcers who are curable but who are unable to find a cure.



The Leg Ulcer Charity has an annual general conference as part of the College of Phlebology International Veins Meeting held in London each March. This year, the main focus of the whole conference is understanding and treating venous leg ulcers. Ellie Lindsay OBE is the guest of honour at the meeting and will be giving the opening address. The meeting will be held in London from 14–16 March 2018 and there will be three days dedicated to venous leg ulcers. 

The Leg Ulcer Charity:
<http://legulcercharity.org/>

Leg Ulcer Charity Meeting at
The College of Phlebology

International Veins Meeting 2018:
<http://www.collegeofphlebology.com/meeting2018>



Lipoedema UK: offering support and raising awareness



Lipoedema is a chronic condition that is prevalent in women. It is characterised by the accumulation of fat below the waist, which can result in the hips, buttocks and legs looking out of proportion with the upper body. Less commonly, lipoedema can also affect the upper arms.


Lipoedema affects more women than men; It is believed that 11% of the female population may suffer from some degree of lipoedema.

One of the most frustrating things about lipoedema, however, is that the vast majority of doctors and nurses aren't trained to recognise it, so many women go their whole lives without obtaining a diagnosis.

Lipoedema UK's mission is to educate all doctors and healthcare professionals to recognise and diagnose lipoedema in the early stages, so that everyone with the condition receives appropriate advice and quality care.

Lipoedema UK support our members to work with their GPs and healthcare professionals to find treatments available in their area.

Lipoedema UK's conferences provide our members with the latest information from internationally renowned specialists, surgeons and researchers as well as practical advice and inspiration on exercise and compression.

Lipoedema Awareness Week this year is on the 11th–18th June, and we hope to take the opportunity to raise awareness of the condition. 



For further information about Lipoedema UK to access information on the condition, and to find out how you can help, please visit:

www.lipoedema.co.uk



Product name: Easy-Slide
Manufacturer: Credenhill

- The Easy-Slide range has been designed to specifically solve the problems associated with application of compression garments.
- Easy-Slide Arm has been specifically designed to alleviate the problem experienced when donning arm sleeves.
- Easy-Slide Arm is made from very smooth material, which has been treated within special coating. These qualities create a super – smooth aid that reduces friction significantly during application.



Product name: Actiglide
Manufacturer: L&R



- Actiglide is a unique hosiery applicator that enables compression hosiery to glide effortlessly up the leg and arm.

- Suitable for tights, socks, knee and thigh length compression hosiery and armsleeves

- For open and closed toe hosiery
- One size fits all
- Hygienic
- Can be used by hosiery wearer or when applied by a carer.

Product name: Rolly
Manufacturer: Sigvaris



- The Rolly is a revolutionary tool for putting on and taking off medical compression hosiery; effortlessly and with comfort

- The ribbed surface holds onto the cloth and the material can be moved up

or down without damaging the compression garment. It is ideal for removing small wrinkles, and adjusting the heel area, if required.

- Convenient, compact, conformable and easy to use.
- Can be used by hosiery wearer or by a carer.

Product name: Magnide
Manufacturer: Credenhill



- Magnide provides a solution for patients who wear compression stockings and tights with closed and open toe.
- Enables easy donning of hosiery
- Magnide is made from a smooth material that significantly reduces friction helping to minimise the physical strain experienced by clinicians, carers and patients.
- Available in 3 sizes.



Supporting you all Daylong



What is a Dispensing Appliance Contractor (DAC)?

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* based on our 2016 ISO 9001 audit