

A Guide for Patients and Families

Care of Patients with Ischaemic Ulcer

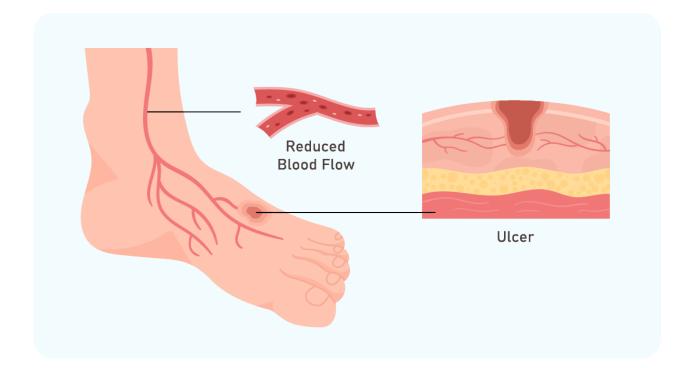


What is Ischaemic Ulcer?



Ischaemic ulcer (wound) is a chronic wound that can occurs when there is poor blood flow in your legs. The arteries are responsible for carrying nutrient- and oxygen-rich blood to the various tissues in the body.

Ischaemia, which refers generally to a restriction in the blood supply, can lead to arterial ulcers when it stems from a narrowing of the artery or damage to the small blood vessels inthe extremities. The reduced blood flow then in turn leads to tissue necrosis and/or ulceration. Most ischemic ulcers occur on the feet and legs. These types of wounds can be slow to heal.



Arterial vs Venous Leg Ulcers

Venous and arterial ulcers are both types of ischaemic ulcers, which occur due to lack of blood flow in general. Venous ulcers occur specifically due to problem with veins, while arterial ulcers occur due to problems with arteries.

Arterial Ulcers



- Toes and feet, shin
- Ulcer deep, pale
- Skin is shiny, hairless, pallor on elevation, cool temperature
- Mild or absent edema
- Intermittent, severe, resting pain
- Decreased or absent pulses

Venous Ulcers



- Usual around ankel
- Ulcer superfical, pink beefy red, irregular edges
- Skin leathery, brown and pink discolouration, stasis dermatitis present
- Significant edema
- Aching, mild pain
- Pulses usually normal

Most Common Causes of Arterial Ulcers



- Diabetes mellitus
- Renal failure
- High blood pressure
- Vasculitis (inflammatory damage of blood vessels)
- Restrictions to blood vessels due to peripheral vascular disease
- Chronic vascular insufficiency

- Trauma
- Limited joint mobility
- Increased age
- Arteriosclerosis (hardening of the arteries)
- Atherosclerosis (thickening of the arteries, due to the build-up of fatty materials)

Signs and Symptoms



- Deep, open wounds on the legs, ankles, or feet
- Cold to touch
- Absent or diminished pulse
- Delayed capillary return
- Pain and discomfort

Diagnosis and Treatment

The primary goal of the treatment of arterial ulcers is to increase circulation to the area, either surgically or medically.

Surgical Option



Surgical options range from revascularisation to restore normal blood flow to amputation and rehabilitation in patients who cannot be revascularised.

Non-Surgical Option

Photo to ask Lily

As for non-surgical measures, modifying contributing factors can slow or stop the progression of the local ischemia. Additionally, there are boots and pumps available to augment perfusion to the affected limb.

Care and Management



WOUND CARE

Keep ulcer wound clean and protected with proper dressing.



SHOES

Wear shoes that fit properly and **DO NOT** rub or put pressure on your feet.



MEDICATION

Take medication to control blood sugar level and pain control.



LIFESTYLE CHANGES

- Quit smoking
- Maintain a well-balanced diet
- Exercise regularly
- Lose weight if you are overweight
- Follow your doctors advise to manage chronic diseases, such as high blood pressure and diabetes



REGULAR APPOINTMENTS

Attend regular follow-up appointments to monitor the healing process and adjust appropriate treatment plan as necessary.

Complications (if any)

Left untreated, arterial ulcers can lead to serious complications, including infection, tissue necrosis, and in extreme cases amputation of the affected limb.

Others

You may wish to proceed to your own attending or nearest hospitals for medical attention and advice if there are any signs of infection, such as:

- Bleeding
- Odour
- Redness, increased warmth, or swelling around the wound
- Increased pain
- Fever or chills
- More drainage than before or drainage that is yellowish or cloudy



