The social aspect of Leg Clubs and how that aids healing

Mrs PR is an 84-year-old lady with type 2 diabetes, arthritis and a hernia. Some 10 years previously, a car door had slammed on her leg and there were problems with the skin ever since.

She had a leg ulcer develop in 2015 when she had fallen between two cars and hurt her leg. She was helped up by passers-by who made sure she was safe. Her doctor refused to attend and sent her to A&E where they bandaged her leg. She then had another fall and again hurt her leg. She found she had to use a zimmer frame or 2 sticks to enable her to walk.

The wound did not appear to heal and she was concerned, so her GP sent her to her local Leg Club and she was glad he did. She felt very awkward on the first visit, but she was made to feel very welcome and the nurses explained the physiology of why her wound was not healing and what they needed to do to help her to heal. The wound healed and Mrs PR stopped attending Leg Club.

Leg Clubs were developed in order to support and empower the Club Members who attend. It is not an ulcer service that cares just for the legs. It cares for the whole person. That care does not end when the ulcer heals, as Leg Club is for everyone who is at risk of leg ulcers, who may have a leg ulcer or who has a healed ulcer. The aim is to keep the legs healthy beyond healing.

Mrs PR realised she had made an error in stopping the Leg Club attendance, as her leg then began to cause her problems. She was welcomed back into the Leg Club by the many volunteers, club members and the very knowledgeable nurses.

The cause of Mrs PR’s leg ulcers or any leg ulcer is not the injury from car doors or falling, it is the disease that is present inside the leg. The disease is associated with blood supply (or lack of blood supply). In arterial disease, the blood is not effectively reaching the tissues and the tissue will break down. In venous disease, the blood is not effectively being returned to the heart due to ineffective valves in the veins and that means there is pooling of blood in the lower part of the limb with oedema. The nutrients and oxygen cannot reach the tissues and the slightest blow will cause a wound that will be difficult to heal without compression.

The viscosity of the blood and high levels of blood glucose caused by diabetes can affect the nerves and cause neuropathy and also lead to poor blood circulation, which makes it hard for the nutrients and oxygen, needed for skin repair, to reach the tissues. Not only will the tissue injure easily and break down, it will also be difficult to heal.

The knowledge of the nurses in Leg Clubs and the support of the club members and volunteers all lead to successful outcomes. The nurses understand the need to restore blood supply to the area and how to achieve that. The club member becomes part of the team and can relax in a non-threatening atmosphere, which reduces stress, which also can aid healing.

The diabetes and venous disease will always be with Mrs PR and always threaten to break down the tissues. As long as she is under the care of the Leg Club and supported by her peers, then there is an excellent chance that the potential wound will be identified and dealt with before it becomes a problem.