****Ulcers - advice to patients

**Introduction:**

An ulcer is where an area of skin has become an open wound and you can see the underlying tissue. Debris and dead tissue collects around it and some develop hard skin. It is important that this is removed regularly (debrided) to promote healing and to remove dead tissue which can slow the healing process and ensure that the wound edges can be seen properly. Sometimes this will make the wound bleed and this is normal.

**Taking care of ulcers:**

If you have been directed to change the dressing:

* Clean the ulcer with lukewarm saline solution (salt water) and do not immerse for more than five minutes
* Use a sterile dressing to redress the ulcer
* The dressing will need to be changed regularly to ensure the ulcer is healing well and not infected. If you are unable to do this yourself, then ask someone to help you. Your doctor can arrange for a nurse to help you if there is nobody else who can help you
* Cover the ulcer with a sterile dressing plus a little tape to hold dressing in place. Never wrap tape completely around the toe or foot to avoid cutting off circulation
* Ensure that the dressing is not too tight
* Inspect your foot carefully when changing the dressing. If any problems develop, seek immediate help either from the clinic or your GP
* When resting, keep your foot elevated as much as possible to encourage healing
* If you have not been asked to change your dressing, please don't touch it unless it gets wet or loose. If this happens, change your dressing as soon as you are able. Don't leave a foot ulcer uncovered as this is an infection risk.

**General Care:**

Below are some tips to protect your ulcer. If you have neuropathy, your foot ulcer may not hurt you as much as you would expect.

* Rest with your feet up as much as possible if you have been asked to. You may need to consider taking time off work
* Make sure that your heels are protected if you are sitting with your feet up
* If you are resting in a chair, support your feet and legs on a stool or low table with pillows on it so you can take the weight off of the heels.
* When doing any of the above do not wear shoes or slippers on your feet
* Wear weight-bearing surgical shoes if you have them, or shoes advised by your podiatrist
* Smoking reduces the amount of oxygen available for wound healing. If you smoke, consider reducing the amount that you smoke or consider giving up smoking.

**Look out for swelling and discharge**

 If you have swelling:

* Has your shoe become tight?
* Has the colour changed?
* Is the redness of the skin around the ulcer spreading?
* Are there any bluish marks?
* Has the ulcer itself changed colour?

If you have discharge:

* Has the ulcer become wet when it was dry before?
* Is there blood or pus discharging from it? Does the wound smell more than usual?
* Has the ulcer become painful or uncomfortable when it was not previously, or is the foot throbbing?

If you are diabetic:

* Do you feel unwell with fever, or have flu-like symptoms?
* Is your diabetes poorly controlled, when it previously was not?
* Have you developed any new ulcers or blistering?

**If any of the above occur seek medical advice immediately from your GP or A&E out of hours.**

Remember ‘SEPSIS’ and know the symptoms:

* “Slurred" Speech
* Extreme shivering, muscle pain or fever
* Passing no urine
* Severe breathlessness
* It feels as though you are going to die
* Skin mottled

**If you have any of these symptoms, seek medical attention immediately and let the doctor know that you have the symptoms of SEPSIS.**

**Contact**

Appointments team

Tel: 01375 364465

Hours of operation: 10am – 4pm