

Patient information from BMJ

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Leg ulcers

Leg ulcers can be painful and sometimes take a long time to heal. But with treatment almost all ulcers get better eventually.

You can use our information to talk to your doctor and decide which treatments are right for you.

What are leg ulcers?

A leg ulcer is a sore with broken skin on your lower leg that won't heal. Leg ulcers sometimes start after a knock or bump breaks the skin on your lower leg. A wound can turn into a leg ulcer if it doesn't heal.

You are more likely to get leg ulcers if you have a condition called **chronic venous insufficiency**. This means that there are problems with the veins in your lower legs. The ulcers that can be caused by this condition are called venous leg ulcers.

You are more likely to have this condition if you have ever had **deep vein thrombosis** (a blood clot in a vein in your leg).

This information is for people who have venous leg ulcers. It doesn't cover people with diabetes who get diabetic foot ulcers.

What are the symptoms?

Leg ulcers are shallow, moist wounds where the skin is broken. They're often red or yellowish. They can be any size and some even stretch all the way around the leg. They get smaller as they heal.

If you get rough, bumpy tissue in your ulcer it's usually good news. It shows your ulcer is healing.

What treatments work?

As well as treatments to help to heal ulcers there are treatments that can help prevent them if your doctor thinks you are at high risk of getting them. There are also things you can do yourself to help prevent them.

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Things you can do yourself

If you have chronic venous insufficiency too much blood can sometimes pool in your lower legs when you're not moving. This can cause swelling and make ulcers more likely.

To make this less likely, doctors often recommend that you put your **feet up** whenever you sit down. It's also a good idea to raise the foot of your bed slightly.

Exercising regularly and eating a **balanced diet** can also help keep your circulation working as well as possible.

Smoking can affect your body's ability to heal and can cause problems with your blood vessels. So if you smoke it's best to stop.

If you are **overweight**, losing weight can reduce your chance of getting leg ulcers. If you'd like help with stopping smoking or losing weight your doctor can help.

Try to avoid bumping or scratching your legs. Breaking the skin can make an ulcer more likely.

Treatments to prevent leg ulcers

If you've had an ulcer, wearing **compression stockings** can help to stop you getting another. These are special medical stockings that come up to the knee. They compress your lower legs so that it's harder for the blood to pool and for swelling to happen.

It's very important that you follow your doctor or nurse's instructions on how and when to wear them. For them to work properly you'll need to wear them all the time apart from when you're in bed.

The most common reason for ulcers not getting better is people not wearing the compression stockings enough.

Simple moisturising creams can help prevent skin from breaking, by keeping the skin moist and stopping it from drying out. You apply this to the unbroken skin, not onto a wound itself. You should talk to your doctor first about what to use and how to use it.

Treatments to help leg ulcers heal

Doctors usually recommend that leg ulcers are tightly bandaged and that these bandages are changed regularly.

A drug called **pentoxifylline** can help your ulcer to heal. It works by helping keep the veins in your legs open wide enough that blood can flow through them properly.

This is the first drug treatment that most people with venous leg ulcers are offered. You'll need to keep wearing the bandages, too.

You take pentoxifylline as tablets. Although it can help with healing it can cause side effects in some people, including, nausea, diarrhoea, and indigestion.

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Drugs called **micronised purified flavonoid fractions (MPFFs)** can help leg ulcers to heal. They tend to be used in people who have large ulcers that don't heal with other treatments. These drugs are not available in some countries, including the UK.

It's important to keep your ulcer clean. Warm tap water is usually enough to remove any pus or dead tissue. But sometimes doctors and nurses use other treatments. They might gently scrape away the dead tissue with a scalpel or use a chemical to wash it away.

As well as compression treatment your doctor might suggest treatments for the veins in your leg to help heal your ulcer. These might include:

- surgically removing veins that are causing you problems
- laser treatment to seal the veins (called endovenous laser treatment)
- injecting special foam into the veins (foam sclerotherapy).

What will happen to me?

Your ulcer will almost certainly heal eventually if you follow your doctor's treatment advice. If treatment goes well your ulcer should heal in less than three months. But it sometimes takes much longer. Some ulcers need up to a year to heal.

Some people worry that, like the foot problems sometimes caused by diabetes, leg ulcers can lead to having part of their leg amputated. This is not true. Leg ulcers caused by chronic venous insufficiency do not lead to amputations.

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