**Characteristics of an Arterial Leg Ulcer**

Arterial leg ulcers typically:
- Occur on the anterior shin, ankle bones, heels or toes
- Have pain which is relieved when legs are lowered below the level of the heart
- Have ‘punched out’ wound edges
- May have mummified or dry and black toes

The surrounding skin or tissue often has:
- Shiny or dry skin
- Devitalised soft tissue with dry or wet crust
- Thickened toe nails
- A purplish colour when the leg is lowered to the ground
- Loss of hair
- Cool skin

**When to Refer**
- Uncertainty of diagnosis
- A low ABPI < 0.8 or a high ABPI > 1.2
- Symptoms impact on quality of life
- Multiple aetiology
- Signs of infection
- Ulcer appears ischaemic
- Failure to heal

**Assessment**
- **History**
  - Medical
  - Medications
  - Wound
  - Psychosocial / activities of daily living

**Characteristics of the wound** (see table below)

**Diagnostic investigations**
All patients with a leg ulcer should be screened for arterial disease, including an Ankle Brachial Pressure Index (ABPI)
* Assessment should only be undertaken by a trained health professional

**Wound Bed Management**
- Cleanse the wound gently with warm water or normal saline. Pat dry.
- In general, debride necrotic or devitalised tissue; however, do not debride dry gangrene or eschar
  * Debridement should be undertaken only by a trained health professional
- Maintain a moist wound environment, however, if dry gangrene or eschar is present, it is best left dry
- Topical antimicrobial dressings may be beneficial when wounds are chronically or heavily colonised

**Management**
- Promote oxygenation through avoidance of:
  - Smoking
  - Dehydration
  - Cold
  - Stress and pain
- Refer to vascular surgeon for restoration of blood flow by revascularisation, if appropriate
- Ensure optimal pain management strategies

**Prevention**
- Reduce risk factors:
  - Cease smoking
  - Control diabetes mellitus
  - Control elevated lipids
  - Control hypertension
  - Anti-platelet therapy
  - Control weight
- Refer to vascular surgeon for assessment if appropriate
- Exercise the lower limbs
- Protect legs and feet:
  - Ensure soft, conforming, proper fitting shoes
  - Refer to podiatrist for general footcare, orthotics and offloading as necessary
  - Protect legs (e.g. padded equipment, long clothing)
  - Use pressure relief devices e.g. high density foam or air cushion boots for those with limited mobility
- Keep the legs warm (e.g. socks, rugs)
- Eat a nutritious diet

**References:**

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