

Recommended primary care pathway for early intervention with compression

Mild venous disease or mild swelling

Start of pathway - diagnostic check^{1,2}

- **Venous disease** – this should only be mild (not moderate or severe)
- **Mild swelling** – this is oedema that reduces overnight and limb elevation

Ensure patient meets all below criteria

- ✓ Intact sensation
- ✓ There is good peripheral perfusion (ie no signs of limb ischaemia)
- ✓ There is no deep pitting and no skin folds
- ✓ Appropriate shape and size of limb (below knee measurement should not be significantly wider than the calf)
- ✓ No systemic clinical concern

STEP 1 - Assess and record

- ✓ The CAUSE and history of the swelling
- ✓ Ensure they have intact sensation
- ✓ Ensure no systemic concerns that require investigation
- ✓ Ensure there is good peripheral perfusion and no signs of limb ischaemia
- ✓ There must be no deep pitting oedema or skin folds
- ✓ They must have a standard leg shape - the ankle is narrower than the calf

STEP 2 - Management with mild compression

To prevent delay in management, in the absence of Ankle Brachial Pressure Diagnostic (ABPI), prescribe Class 1 British Standard Hosiery or reduced compression (circa 17mmHg)

Recommended products via FP10 prescribing

- ✓ Activa® British Standard Hosiery
- ✓ Medi UK Duomed Soft® British Standard Elastic Hosiery

STEP 3 - Longer term management

If the Class 1 hosiery proves therapeutic, please continue with repeat prescriptions every 3 months.

Further information

- 1 Wounds UK[2021] Best Practice Statement: Compression Hosiery, A patient-centric approach (3rd edition) Wounds UK, London [View the BP Statement](#)
- 2 [Lohmann-Rauscher Early Intervention Pack](#)
- 3 Activa® British Standard Hosiery - [Order form](#)
- 4 Medi UK Duomed Soft® British Standard Elastic Hosiery - [Order form](#)

Refer immediately for advice or review when:

- ★ Criteria for management with mild compression cannot be met
- ★ Early intervention management not tolerated or possible
- ★ Significant swelling is present which is not controlled with class 1 compression

Mobile patients

Accelerate Lymphoedema Service if criteria below is met

Housebound patients known to Community Nursing Services

Accelerate Lymphoedema Service - referral for joint assessment

Conditions to be met for a patient to be successfully referred

THE PATIENT HAS AT LEAST ONE OF THE FOLLOWING:

- ✓ Chronic oedema / lymphoedema
- ✓ History of repeated cellulitis related to oedema
- ✓ Lymphorrhoea (wet legs)
- ✓ Primary lymphoedema
- ✓ Secondary lymphoedema to cancer
- ✓ Systemic causes have been ruled out

CRITERIA FOR NON-ACCEPTANCE OF REFERRAL:

- 🚫 Known ischaemia of the affected limb
- 🚫 Varicose veins
- 🚫 Routine Doppler in the absence of swelling
- 🚫 Venous or other ulceration
- 🚫 Unstable cardiac / renal failure
- 🚫 Absence of swelling
- 🚫 Housebound patients not known to community services

Please provide full referral details so that virtual review and initial treatment plan can be provided

[Lymphoedema referral link](#)

To access EMIS forms for general practice:

Go to 'Consultations', click arrow underneath 'Add' button, then 'Document', then 'Create Letter'. Click on the magnifying glass when the document selector window appears, enter part of the referral name or Accelerate into the search box and press 'Enter'. Select the appropriate referral from the list and click OK.