

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 / are met

Housebound patients known to Community Nursing Services

Accelerate Lymphoedema Service - referral for joint assessment

Criteria 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](#)