

A Guide to Venous Leg Ulcer care

This guide will help you understand what a venous leg ulcer is and what you can do to support your healing.

What is a Venous Leg Ulcer (VLU)?



A venous leg ulcer is a wound on the lower leg or ankle that hasn't healed after two weeks.

It often happens because veins in the legs are weakened or damaged. Veins are like tubes that carry blood back to the heart. They have tiny valves inside that help keep the blood moving in the right direction.

When these valves are damaged — due to age, injury, or surgery — blood can flow backward and collect in the veins. This raises pressure in your leg, which over time can cause swelling, skin changes, and sometimes a wound.

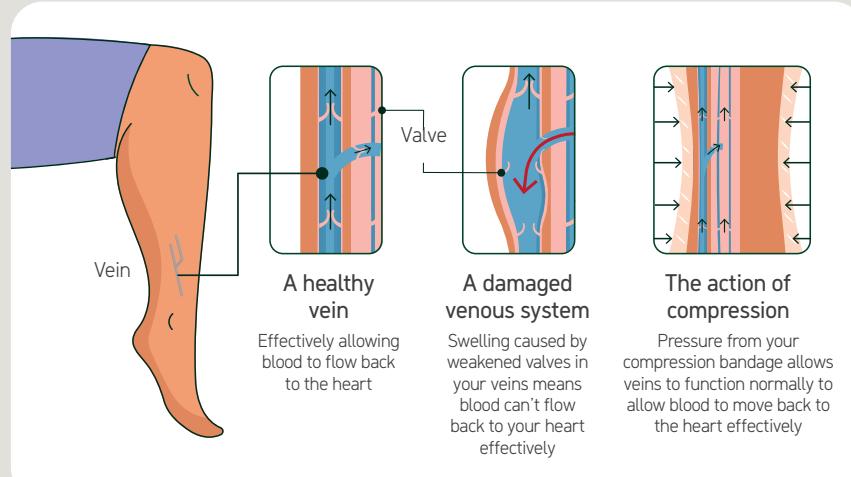
Venous leg ulcers may take time to heal and can reoccur due to the underlying vein condition. Regular care is important to support your healing and overall well-being.

Remember, you are not alone. Doing small things every day can really help!

Risk factors: Certain factors can increase the risk of a venous leg ulcer.

These include:

- age
- pregnancy
- having varicose veins
- limited mobility
- history of blood clots
- leg injuries
- overweight
- family history



What can I do?

Your doctor or nurse will clean and treat your venous leg ulcer at the clinic or at home when the community nurse visits. But what you do every day is important too.

The choices you make every day can support healing and improve your overall well-being. This booklet gives you easy tips on what you can do — and why it helps — so you and your doctor or nurse can work as a team.



✓ Wear a compression bandage or hosiery/garments that help your veins work better

✓ Exercise daily

✓ Eat healthy foods and drink a lot of water

✓ Get enough sleep so your body can rest and heal

✓ Learn how to recognise signs of infections, such as redness, pain, or fever

When to call your nurse or doctor:

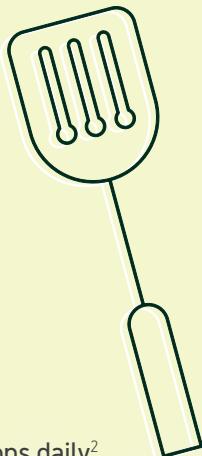
Contact if you notice any of the following:

- **Increased pain:** Significant or unmanageable pain
- **Wound changes:** Increased pain levels and swelling
- **Leaking fluid:** If the bandage is soaked with fluid

Your doctor or nurse is here to help — don't hesitate to reach out!

Healthy diet suggestion

Nutrients and minerals within food, can help build and repair skin. What you eat is important, so make sure you are eating a varied diet high in vitamins, minerals, and protein¹. Please check with your doctor or nurse to learn about a balanced diet.



Protein

Protein helps repair skin and body tissue. Try to eat two portions daily².

Protein examples:



Meat (chicken, beef, turkey, pork)



Beans
(baked beans, lentils, peas, split peas, chickpeas)



Fish (salmon, cod, sardines)



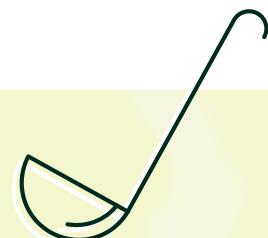
Dairy (cow, goat, sheep milk, cheese and yoghurt)



Nuts



Eggs



Vitamins and minerals

Fruit and vegetables rich in vitamin C, help wound healing by supporting collagen production, improving the skin's ability to stretch without tearing. Try to eat five portions daily – fresh, frozen or dried³.

Vegetables and fruit examples:



Vegetables
(broccoli, cabbage, carrots, peas, sweetcorn, cucumber, aubergine etc.)



Fruit
(banana, berries, pineapple, apples, orange, apricots etc.)

Drink water daily

Try to drink five to eight glasses of water daily, to help nutrients and oxygen move through the body. It also keeps your skin hydrated, improves blood circulation, and reduces swelling in your legs. If you have a fluid restriction order due to heart or kidney issues, follow the direction of your healthcare team.



Any exercise can make a difference



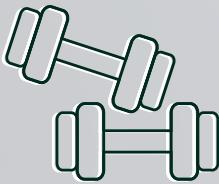
Walk as often as possible wearing your compression garments or bandages. Movement helps circulation, reducing swelling and supporting healing.



Elevate your legs. Raising your legs helps send blood and fluid back from the legs to the heart, which helps improve circulation.



Keep moving even when sitting. Use these simple sitting-down exercises to keep yourself mobile. If you feel joint pain or lower back pain, stop. You may feel a tight pulling in the muscle you are exercising. This is normal. If you find any of the exercises painful, stop. Ask your nurse or doctor for help.



Ankle rolls



- Sit up straight on a chair with your legs flat on the floor.
- Raise your leg and roll your foot round in a circle.
- With your leg still raised, point your toes up and down.
- Repeat for the other leg.

Heel raises



- Sit up straight on a chair with your legs flat on the floor.
- Keep your toes on the floor and raise your heels up.
- Lower your heels back to the floor.
- Try pressing your hands down onto your knees and bring your leg up.

Toe raises



- Sit up straight on a chair with your legs flat on the floor.
- Keep your heels on the floor and lift your toes up.
- Lower your foot back to the floor.

Leg raises



- Sit up straight, your feet flat on the floor and back supported.
- Straighten out your leg.

Compression

Why is compression important?

Compression therapy is the most effective treatment for venous leg ulcers. Compression therapy applies pressure to your lower legs to help the veins function properly and return blood to the heart. This reduces swelling and improves blood flow, making it easier for your wound to heal and less likely that new ones will form.



There are several types of compression therapy, including:

- Compression bandages
- Wraps
- Hosiery/stockings

Your nurse or doctor will tell you which is the right compression for your leg.



You can make compression therapy even more effective by keeping active and doing foot and ankle exercises.

Stick with it - it's worth it!

Compression is a key part of healing, and it works best when used daily. It is normal to feel some discomfort at first, but this should improve as you get used to wearing compression bandages. If you experience any issues, contact your nurse or doctor for advice on how to make them more comfortable. Once you see the difference it makes, you will appreciate the benefits of wearing your compression.



Wound infections

A wound infection happens when germs enter the wound and grow, causing problems with healing.

An infection may stay just in the wound (local infection) or spread to surrounding areas (spreading infection) and, in some cases, reach other parts of the body (systemic infection).

It's important to recognise the signs and symptoms and when to seek help. This way, you can act quickly to prevent the infection from becoming more serious or even life-threatening.



Talk to your nurse or doctor if you spot any of these signs

Recognising signs of infections

It can sometimes be hard to tell if your wound is infected. Watch for these possible signs of infection:



A sudden increase in wound pain from what you normally feel



A new odour, which could mean there may be germs or dead tissue in the wound



A sudden increase in fluid from your wound



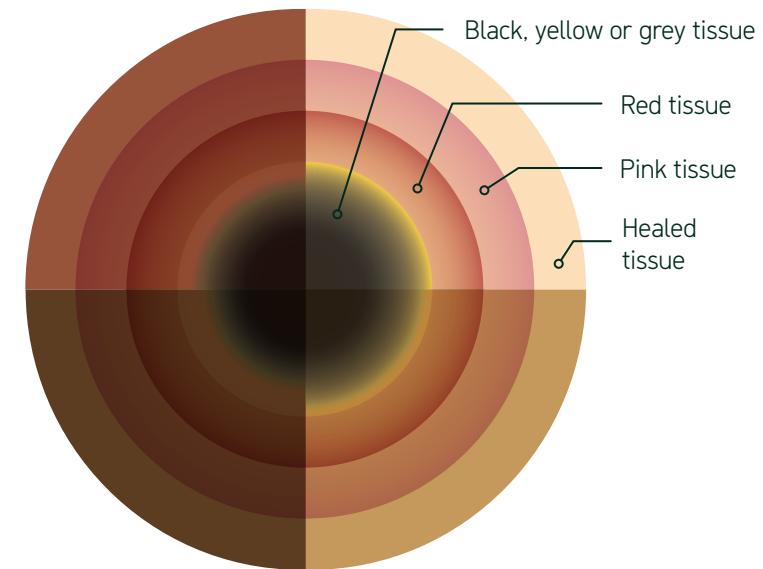
Changed tissue colour. Green, yellow or dark skin tissue could be a sign of an infection

The skin and tissue health

If you are involved with supported self care, it is important to look after your skin to recognise changes in temperature, colour or condition.

Speak to your nurse or doctor urgently if you see any changes.

The Wound Colour wheel in different skin tones⁴



Black, yellow or grey tissue:

This often indicates signs of dead skin where there is a lack of blood supply. There may also be an unpleasant smell which can signal the start of an infection.

Pink tissue: This often means your wound is on the way to recovery. Pink skin is often very delicate and appears in the final steps of healing.

Red tissue:

Bright red tissue usually means healthy, new growth. It should be covered and kept moist with a dressing to protect it. However, if the tissue looks dark red, is delicate, or bleeds easily, it may indicate an infection and should be checked by your nurse or doctor.

Dressing change

What to expect

Changing your dressing is an important part of caring for a venous leg ulcer. Most often, your doctor or nurse will change your dressing in the clinic or at home, but it is helpful to know what to expect and what each step involves.



3.

Applying a new dressing: A new dressing is placed on the wound to protect it and maintain moisture, which is essential for healing.



4.

Applying compression: Lastly, if needed a compression bandage or stocking is wrapped around the leg to reduce swelling and improve blood flow.



Australia

'How to change my dressing' video

If there are times when you need to change the dressing at home, follow the steps carefully to keep the area clean and protected. You can scan the QR code here for a helpful video on how to change the dressing.



New Zealand



1.

Cleansing and debridement: After removing the old dressing, your nurse will cleanse the wound and perform debridement to remove any dead tissue. This step helps the wound heal faster and reduces the risk of infection.



2.

Moisturising the surrounding skin: The skin around the wound will be moisturised to promote hydration and good skin care.

Each dressing change can feel a bit different depending on how your wound is healing, and your nurse or doctor will adjust the care to fit your needs. Set a goal to discuss with your nurse or doctor.

My notes

Use this space to write questions or observations.

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Set your goals & track your habits

This is your journey — your goals matter

Take a moment to think about what is most important to you. Talk with your nurse or doctor about your goals and review your progress together. Share how you are feeling, what is working and what feels challenging.

Build healthy habits & track your progress

Ready to make a change that supports your healing? Use the habit tracker on the following pages to record your daily actions.

Celebrate your progress

At the end of each week, look back at all your completed activities and feel proud of each one. Every step will help you get closer to healing!



Weekly reflection

Reflect on what went well this week? Did you notice improvement?

Reward yourself! After completing a week of habit tracking, treat yourself to something relaxing, a favourite hobby, music, or any small reward that feels good to you. You have earned it!

Set goals, track habits, and celebrate your wins. You're making strides toward healing!

Movement helps circulation, reducing swelling and supporting healing.

Frequently asked questions



Can I fly with a venous leg ulcer?

You can travel short distances with a venous leg ulcer but long flights are not recommended. This is because the risk of deep vein thrombosis (DVT) or blood clots increases if you have vein issues. Always speak to your nurse or doctor before booking any flights.



What do I do if my wound smells?

If your wound has a smell, it may indicate germs or dead tissue. Keep the area clean and continue using your dressings and compression therapy as directed. If the odour persists or worsens, contact your nurse for further evaluation.



My wound itches all the time. What do I do?

Itching can be a sign of healing, but it may also indicate irritation. Avoid scratching the area, as this can cause further damage. Keep the wound clean. If the itching continues or worsens, contact your nurse or doctor for advice.



When should I change my wound dressing?

Leave the dressing on for as long as you can and always follow your healthcare professional's directions for dressing changes. This avoids disturbing the wound. If the dressing is under compression bandages, it can stay on until you change the bandage. Talk to your nurse or doctor urgently if your dressing is wet with fluid from the wound.



Why do I need to keep a wound dressing on? Won't it heal quicker if I let the air in?

Keeping a wound dressing on is important for protecting the area from infection and further injury. Dressings provide a moist environment that promotes healing and helps new tissue grow. Letting air in can dry out the wound, potentially slowing the healing process. Always follow your nurse or doctor's advice on wound care.



Can I shower?

Yes, you can usually shower with a venous leg ulcer. If you're wearing a compression bandage, do not remove it — use a waterproof cover to keep it dry. Ask your nurse for guidance on how to shower with your bandage in place. When showering, avoid using harsh soaps or chemicals that could irritate your skin. Always follow your nurse's advice for the best care.



Do I need to wear my compression at night?

Yes, it's generally recommended to wear your compression at night unless your nurse advises otherwise. Keeping the compression on helps maintain consistent pressure, which is important for healing and reducing swelling. If you have concerns or experience discomfort, be sure to discuss them with your nurse.



How can I manage pain?

Elevate your legs above heart level when resting. This can help reduce pain and swelling by improving circulation. Engage in gentle exercises or stretches as advised by your nurse or physical therapist. Practice deep breathing and meditation to help reduce stress. Talk to your nurse: Always communicate with your nurse or doctor about your pain levels.

My goals

Use this space to write down your priorities; like feeling more comfortable, moving more, or sleep better.

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Celebrate your progress

Look back at all your completed activities and feel proud of each one.

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.....
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Week 1

My Habit tracker to record my daily actions this week

Simply tick the boxes and aim to complete each habit every day



Eat five portions of fruit and vegetables every day

M T W T F S S



Eat two portions of protein every day

M T W T F S S



Drink six to eight glasses of water every day

M T W T F S S



Have a walk every day

M T W T F S S



Rest with your legs raised every day after exercise

M T W T F S S



Sleep 6-8 hours

M T W T F S S

Week 2

My Habit tracker to record my daily actions this week

Simply tick the boxes and aim to complete each habit every day



Eat five portions of fruit and vegetables every day

M T W T F S S



Eat two portions of protein every day

M T W T F S S



Drink six to eight glasses of water every day

M T W T F S S



Have a walk every day

M T W T F S S



Rest with your legs raised every day after exercise

M T W T F S S



Sleep 6-8 hours

M T W T F S S

Weekly reflection

Use this space to reflect on what worked well and what felt challenging.

My priorities

Use this space to write down your priorities; like meeting with friends, going for a swim, going out for a walk. Talk to your nurse or doctor to support you.

Week 3

My Habit tracker to record my daily actions this week

Simply tick the boxes and aim to complete each habit every day



Eat five portions of fruit and vegetables every day

M T W T F S S



Eat two portions of protein every day

M T W T F S S



Drink six to eight glasses of water every day

M T W T F S S



Have a walk every day

M T W T F S S



Rest with your legs raised every day after exercise

M T W T F S S



Sleep 6-8 hours

M T W T F S S

Week 4

My Habit tracker to record my daily actions this week

Simply tick the boxes and aim to complete each habit every day



Eat five portions of fruit and vegetables every day

M T W T F S S



Eat two portions of protein every day

M T W T F S S



Drink six to eight glasses of water every day

M T W T F S S



Have a walk every day

M T W T F S S



Rest with your legs raised every day after exercise

M T W T F S S



Sleep 6-8 hours

M T W T F S S



For your notes

Your experience is important. Discuss and share with your nurse or doctor about your feelings and observations



Supporting you and your caregivers towards a future free from wounds

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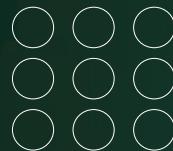
Your doctor or nurse is here to help –
don't hesitate to reach out!

Please fill in contact information:

Doctor's phone number:

Nurse's phone number:

Facility's phone number:



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We drive change that improves the health and wellbeing of patients and those who care for them - while reducing the environmental footprint of healthcare.

Developed in collaboration with Luxmi Dhoonmoon, Nurse Consultant Tissue Viability, UK.

References: 1. Rotherham Doncaster and South Humber NHS Foundation Trust. Dietary advice for wound care [Internet]. Doncaster: RDASH; 2021 [cited 2025 Oct 12]. Available from: <https://malnutritionandfoodfirst.rdash.nhs.uk/wp-content/uploads/2021/05/DP8199-Dietary-advice-for-wound-care.pdf>. 2. Rotherham Doncaster and South Humber NHS Foundation Trust. Dietary advice for wound care [Internet]. Doncaster: RDASH; 2025 [cited 2025 Oct 12]. Available from: https://malnutritionandfoodfirst.rdash.nhs.uk/wp-content/uploads/2025/06/DP8199_Dietary_leaflet_11.231.pdf. 3. Dhoonmoon L, Fletcher J, Kariwo K, Atkin L, Marshall A, Gunowa NO, et al. Best practice statement: addressing skin tone bias in wound care – assessing signs and symptoms in people with dark skin tones [Internet]. London: Wounds UK; 2021 [cited 2025 Oct 12]. Available from: <https://wounds-uk.com/best-practice-statements/addressing-skin-tone-bias-wound-care-assessing-signs-and-symptoms-people-dark-skin-tones>.

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