“Look After Your Legs”

A Health Promotion Initiative for People with Healed (or almost healed) Leg Ulcers

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Background

Venous leg ulcers are a major cause of morbidity especially in older people (Baker et al. of Life (Wissing, Ek & Unosson, 2003). The strategies are of paramount importance but in an isolated, this poses major problems. It has been an inner city Community nursing team organised four quarterly health promotions to encourage patients whose leg ulcers were fully or almost healed to self-manage their condition in order to avoid re-ulceration. The health promotions were named ‘Look After Your Legs’. Patients were identified and invited via their primary practices and the event was held at a local leisure centre between June 2003 and March 2004. There were short talks by health professionals on issues such as foot care, appropriate shoes, skin care and regular exercise. A key part of each health promotion was a talk by an “experienced patient” who detailed their experience of living with leg ulcers and highlighted the importance of compliance. The final session was facilitated by health psychologists and was designed to elicit the difficulties which the attendees had experienced in self-managing their leg ulcers, to encourage them to explore solutions and to consider how they could better incorporate self-management into their daily routines.

Methods

Quantitative questionnaires were administered at three time points; pre-intervention, immediately post intervention and three months afterwards. The questionnaires were based on the Theory of Planned Behaviour (Ajzen & Fishbein, 1980) and the questions related to key self-management behaviours that affect leg ulcer healing. A qualitative questionnaire was also used to elicit attendees’ views of each health promotion.

Results

A total of 35 individuals obtained ethical approval to reduce the number of intervention questionnaires, 19 post-intervention and eight attended the health promotions. We were unable to quantitatively evaluate the initial health promotion which questionnaires we could distribute; we received 14 pre-intervention and eight at three months. The responses suggested that the attendees appreciated that change would be beneficial and planned to make behavioural changes in most areas. Although the numbers completing the three-month follow-up questionnaires were low, all reported improved self-management.

Conclusions

The primary message of the day was to reinforce the use of support stockings/socks in order to become ulcer free as this is the key to successful self-management (Jones & Nelson, 1998). The health promotions were successful and the second phase will involve facilitating self-support groups.

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References


