Graduated compression hosiery (stockings)

Vascular services

What is compression hosiery?
Compression hosiery are elasticated stockings which give support to your legs. In graduated compression hosiery, the pressure given by the stockings is greater at the ankle and reduces towards your knee. The stockings can be knee-length or thigh-length depending on your condition and prescription.

Why do I need compression hosiery?
The veins in your legs carry blood back to the heart. The calf muscles in your legs are responsible for pumping the blood through the veins back to the heart. The veins have one-way valves to ensure the blood flows in the correct direction.

Damage to the veins and the valves can lead to the blood being unable to get out of the legs and collecting there, instead of being pumped back towards the heart. As a result, the pressure in the veins increases which can lead to the symptoms you may have been experiencing, such as:

- Swelling of the ankles
- Pain
- Aching in the leg
- An itching or burning sensation in the leg
- Darkening of the skin
- Leg ulcer

Possible causes of poor function of the veins include:

- Varicose veins
- A blood clot in the leg (this is also called deep vein thrombosis (DVT))
- Faulty valves in the veins deep inside the leg causing high pressure in the veins.

What are the benefits of compression hosiery?
By wearing compression stockings, symptoms due to the conditions listed below can improve:

- Varicose veins
- An open or healed leg ulcer
- Swollen legs due to different causes e.g. pregnancy, immobility after you have had venous surgery
- Deep vein thrombosis
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Compression stockings apply pressure to your legs, which increases the blood flow in the veins back up to the heart. They work by squashing the veins and squeezing the blood back up your leg. This then helps to prevent venous leg ulcers and reduce swelling, pain, itching and the burning sensation in your legs.

If you have had a leg ulcer, wearing compression stockings may prevent the leg ulcer from forming again.

What are the risks of compression hosiery?

• Compression hosiery can cause skin damage if applied to a leg with a reduced blood supply. However, in this case compression hosiery would not be recommended to you.

• If your leg increases in size and the stockings become too tight, they may cause skin damage.

• If you lose weight and your legs become thin, the compression stockings may become too loose and may not work.

• Some people can be allergic to the stockings, but this is very rare. If you have an allergic reaction to the stockings, remove them and seek advice from your nurse/doctor.

• If the stockings are not replaced regularly as advised by your nurse/GP, they will no longer work.

• If you get an infection in your leg (cellulitis), your leg may swell up and become hot and painful. In this case, you may find it too uncomfortable to wear the stocking. If this happens, you should seek advice from your GP, leave the stocking off and rest with your leg elevated.

• Your ankles should be elevated higher than your heart to reduce the swelling in your leg.

If you experience any pins or needles in the feet, numbness, discolouration, reaction to the stockings, shortness of breath or increased pain in the legs, remove the stockings and inform your nurse or GP.

What are the alternatives?

Compression stockings are not a cure and need to be worn long-term to be effective. The alternative treatments available to you depend on the condition you are being treated for.

Your doctor will discuss your options with you, and you can refer to our other leaflets for more information about these.

If varicose veins are the reason for you wearing the compression hosiery then varicose vein surgery, ultrasound-guided foam sclerotherapy and radio frequency ablation may be alternative treatments.
How to apply your compression stockings
You should apply your compression stockings first thing in the morning, before you get out of bed (before your legs begin to swell).

1. Turn the stocking inside out up to the heel. If you are putting on open-toe stockings, place the slipper aid over the foot (slipper aids are provided in stocking box).

2. Pull the foot of the stocking over your foot.

3. Gradually ease the stocking up over the heel and ankle.

4. Ease the rest of the stocking up the leg. Avoid pulling too hard at the top of the stocking.

5. Check toe and ankle pieces are in the correct place:
   - The top of the knee-length stocking should be 2 finger spaces below the crease of the back of the knee.
   - The top of the thigh-length stocking should sit 2 finger spaces below the crease under your buttock.

6. Remove slipper aid from foot.

You must wear your stockings all day but remove them at night. There are various aids available to assist in applying your stockings and your nurse can give you more information about these if you need it.

How to remove your compression stockings
• Remove your stockings prior to going to bed.
• Remove carefully trying not to damage the skin

Washing and drying your stockings
Washing
• Wash in warm water with a non-biological washing detergent. Do not use fabric conditioner.
• Stockings can be washed in the washing machine on a delicate cycle at 40°C.

Drying
• Do not use direct heat (fire or radiator) or a tumble dryer to dry your stockings. This will damage the elastic and the stockings will become ineffective.
• Roll them in a towel to remove excess moisture.
• Hang stockings on the washing line to dry.
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What class stockings should I wear?
Compression stockings are classed 1-3 with class 1 being the lowest strength. Your doctor/nurse will prescribe the class of stocking you require.

How often should the stockings be replaced?
You will be advised by your nurse/GP how often you will require new stockings and you will need to throw the old stockings away as they will lose their elasticity and will not work as well.

Once compression stockings are prescribed for your legs you will need to wear them permanently, as long as there is enough blood getting into your legs (arterial circulation is good).

How you can improve the way your veins work

Diet and weight control
Extra body weight puts extra pressure on the veins in the legs, managing your weight can help to heal your leg ulcer. It is also important to eat a healthy, well balanced diet including fruit and vegetables; this will also aid wound healing.

Skin care on your legs
You should note any skin changes and report them to your nurse/GP. Ensure your skin is moisturised with an unfragranced ointment or cream e.g. 50/50 paraffin. Apply ointment in a downward motion in the evening after removing your stockings.

Please be aware there is a fire risk with paraffin-based products e.g. 50/50 paraffin or emulsifying ointment; avoid using such products near a naked flame or cigarette.

Avoid injury
Be careful not to bang your legs on furniture or sharp objects as any injury may cause a wound which may take a long time to heal.

Walk or exercise regularly
This will help to keep the calf muscle pump working properly. If you are immobile, perform foot and ankle exercises.

Move feet up and down
Rotate feet round and round
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Avoid standing for long periods
If this cannot be avoided, activate the calf muscle pump by taking the weight off your heels and standing on your toes and rolling back onto your heels with toes off the ground. This will encourage the venous blood supply to return to the heart.

Elevation
Rest every day with your legs elevated, so that your feet are above your waist height.

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You will need replacement stockings on

Contact details
If you have any queries or concerns please contact the Vascular Nurse Specialists. If no one is available, please leave a message on the answer phone with your name, hospital number (RXK number) and contact number.

Vascular Nurse Specialists
0121 507 5909

Further information
Circulation Foundation
www.circulationfoundation.org.uk
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For more information about our hospitals and services please see our websites www.swbh.nhs.uk and www.swbhengage.com, follow us on Twitter @SWBHnhs and like us on Facebook www.facebook.com/SWBHnhs.

Sources used for the information in this leaflet
Royal College of Nursing Clinical Practice Guidelines: ‘The nursing management of patients with venous leg ulcers’, 2006