

External links for Venous Leg Ulcers

Here are some external links to specific documents produced together/ or by our partner associations and industry peers.

European Wound Management Association (EWMA) 2023: Lower leg ulcer diagnosis and principles of treatment

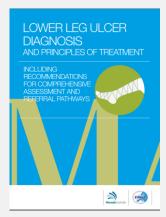
The European Wound Management Association (EWMA) and Wounds Australia have developed this document 2023. The focus is on the diagnostics of infection, arterial and venous insufficiency, leg oedema and atypical causes. It Including recommendations for comprehensive assessment and referral pathways.

Canadian Association of Wound Care (Wounds Canada) 2019: Best Practice recommendations For The Prevention and Management of Venous Leg Ulcers

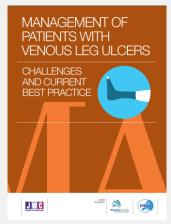
This paper offers a practical, easy-to-follow guide incorporating the best available evidence that outlines a process, or series of consecutive steps, supporting patient-driven care. The Wound Prevention and Management Cycle guides the clinician through a logical and systematic method for developing a customized plan for the prevention and management of wounds from the initial assessment to a sustainable plan targeting patient self-management.

European Wound Management Association (EWMA) 2016: Management of patients with venous leg ulcers, challenges and current best practice

The European Wound Management Association (EWMA) and Wounds Australia have developed this document 2016, aiming to highlight some of the barriers and facilitators related to implementation of VLU guidelines as well as provide clinical practice statements to overcome these and 'fill the gaps' currently not covered by the majority of available guidelines.











Expand your knowledge and discover new evidence to achieve better patient outcomes



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Wounds International 2015:

Simplifying venous leg ulcer management: consensus recommendations.

An international group of experts in leg ulcers and venous disease met in December 2014. The group recognised that a very high proportion of all leg ulcers have venous disease as a causative or contributory factor (i.e. are VLUs or mixed aetiology ulcers) and so may be appropriate for compression therapy. Their discussions centred on identifying how to encourage wider adoption of compression therapy by simplifying the key principles involved.





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