

Leg ulcer - venous

Diagnosis

See your GP if you think that you may have a venous leg ulcer. A venous leg ulcer is diagnosed based on your symptoms and a physical examination of your affected leg.

Your GP, or nurse, will check the size, depth and position of your ulcer. They will ask you whether it has been leaking fluid, whether the ulcer is painful, and what that pain is like. They will also try to determine the cause of the ulcer by asking you about any underlying conditions that you may have, such as diabetes, or deep vein thrombosis, and any previous injuries, ulcers, or surgery that you may have had to your affected leg.

The physical examination will involve your GP, or nurse, examining your leg both when you are standing and when you are lying down. They will look for signs of a venous leg ulcer, such as pitting oedema (swollen areas filled with fluid that temporarily hold the imprint of a finger when pressed), and venous eczema (itchy, irritated skin caused by high blood pressure in the veins of your leg).

Your GP, or nurse, will also check for signs that your leg ulcer is infected, such as a foul odour, pus, and cellulitis (bacterial infection in the deep layer of skin).

Doppler studies

In order to confirm a diagnosis of venous leg ulcer, and rule out a condition affecting your arteries (larger veins that carry blood from your heart to the rest of your body) your GP, or nurse, will also do a test, known as a Doppler study, to check for arterial insufficiency (high blood pressure due to poor blood flow).

Like venous insufficiency, arterial insufficiency refers to blood not flowing properly through your arteries. Signs of arterial insufficiency include hair loss in the affected area, and the skin in the affected area being pale and cold to the touch.

Your GP, or nurse, should perform a Doppler study on both of your legs. The test involves taking a measurement of your blood pressure in each leg, at the ankle, and comparing it with the blood pressure in your arm. When the measurements are compared, they can show whether or not you have arterial insufficiency.

However, there are some conditions that can make the results of Doppler studies unreliable. For example, you may need to be referred for specialist treatment if you have:

- **diabetes**,
- **atherosclerotic disease** (gradual hardening of the arteries),
- **rheumatoid arthritis** (inflammation and destruction of the joints), or
- **systemic vasculitis** (inflammation of the blood vessels).

You may also be referred for specialist treatment if your GP, or nurse, is unsure about your diagnosis, or about what has caused your venous leg ulcer.