



The Impact of Lower Limb Chronic Oedema on Patient's Quality of Life - WMAI Bursary Grant 2012



I wish to thank the Wound Management Association of Ireland for awarding me a research/education bursary in 2012. This bursary assisted me to conduct a piece of research on lower limb

chronic oedemas as part fulfilment of a Masters in Nursing Sciences.

Chronic oedemas of the lower limb(s) are incurable, debilitating and progressive conditions that can have detrimental effects on an individual's psychological, social and physical well-being. However, there is a paucity of published studies which specifically focus on the lower limb and on the broad concept of chronic oedema. Therefore a descriptive survey design was used to explore the impact of lower limb chronic oedema on patient's quality of life in an Irish context. Utilising a condition-specific tool, the Lymphoedema Quality of Life tool (LYMQOL), questionnaires were distributed among patients (n=122) attending various MLD clinics, a vascular clinic in a large teaching hospital and to various public health centres peripheral to the identified teaching hospital. A total of 90 questionnaires were completed yielding a response rate of 74%.

One of the most important findings of this research were the many psychological, physical and social consequences that living with lower limb chronic oedema has on the persons quality of life. The obvious physical change in the shape and size of the affected limb(s) is one of the most challenging and devastating problems associated with chronic oedema (Green, 2008).

Concerns regarding poor bodily image were strongly highlighted in this study with many patients stating that their chronic swelling affected their appearance and caused difficulties with clothing and footwear. Furthermore, findings from this study indicate that patients with lower limb(s) chronic oedema experience a wide range of physical problems. Physical symptoms of limb heaviness and limb weakness were experienced by many participants while limitations on physical functioning were also reported with mobility being most affected. In addition emotional symptoms including irritability, anxiety and tension were reported by many patients. Issues with social functioning and the ability to engage in leisure activities were also identified by participants.

Previous studies have highlighted improvements in quality of life following appropriate treatments (Sitzia & Sobrido, 1997; Hardy & Taylor, 1999; Kim & Park, 2008), therefore it is of concern that best evidence is not informing resource planning around the management of this condition. Knowledge, awareness and the development of adequate services in Ireland is required to care for patients with lower limb chronic oedema and subsequently improve their quality of life. This study adds to the nursing body of knowledge by identifying the challenges endured by patients with lower limb chronic oedema and therefore highlighting the need for the reappraisal of services in relation to this specific client group.

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