Compression therapy as the cornerstone of the treatment of lower leg ulcers

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This issue is a special issue on compression therapy. Compression therapy can be seen as the cornerstone of lower leg ulcer management, but it is still surprising how many gaps and barriers we find in this field. Compression therapy is often neglected, misunderstood, not used in the right way or introduced too late.

One might question why we are not still there. Perhaps there have been failures in the implementation of compression therapy in primary and home care. Additionally, different medical and paramedical specialists have variable knowledge in the indications, contraindications and carrying out of compression therapy. Fortunately, patients with venous leg ulcers with coexistent peripheral arterial disease are increasingly receiving proper compression treatment, as are patients with diabetic foot ulcers. Based on expert opinion, the only contraindications for compression are severe peripheral artery disease, severe cardiac insufficiency and compression of epifascial arterial bypasses.

This special issue aims to shed light on this important area. Compression therapy goes beyond venous leg ulcers and lymphoedema: We should strive towards compression therapy with all lower leg ulcers, regardless of the cause, in the absence of contraindications. This will surely lead to shortened healing times and improved quality of life of the patients.

In addition to this special Issue, the European Wound Management Association (EWMA) is working on a Compression Therapy Campaign. The campaign's objectives include to raise the awareness about the evidence of compression, reach out to primary care, raise awareness about the role of compression therapy in other indications than venous leg ulcers, understand and raise awareness about the human factors influencing the use of compression therapy and examine and influence the language of compression therapy.

Please enjoy our special issue and continue your daily efforts in implementing compression therapy more widely.

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