COMPRESSION STOCKINGS IN THE PREVENTION OF VENOUS ULCER RECURRENCE

Introduction: Venous ulcers (UV) account for 80% of lower limb ulcers, affecting about 1% of the world’s population. Compressive socks are recommended to prevent a high rate (70% rate) of these wounds. Objectives: To present the scientific evidence on the efficacy, effectiveness and safety related to the use of compression stockings in the prevention of venous ulcers in patients with chronic venous insufficiency CEAP C5. Methods: Evidence was performed in Medline (PubMed), Embase, Lilacs and Cochrane Library. A total of 1,414 studies were identified, in which 316 were duplicates. From the reading of the titles and abstracts, two independent reviewers applied the eligibility criteria. The cases of divergence were resolved by a third reviewer. Results: Five studies of high methodological quality were included: one systematic review, two randomized controlled trials (RCT) and two cohorts. Regarding efficacy, two studies compared UV recurrence rates with and without compression and found that compression significantly reduced ulcer recurrence. The RCT compared UV recurrence according to the compression level of the socks, but found no significant differences. Regarding effectiveness, only one of the 25 patients who used compressive socks presented recurrence of the ulcer. Among patients who did not use or who did not use them properly, 79% had at least one recurrence. Moreover, wearing compression socks associated with resting and application of moisturizer cream on the lower limbs significantly reduced the recurrence of ulcers. The main adverse events reported by the studies were redness, swelling, skin irritation and rash. Conclusions: Evidence indicates that the use of compression stockings results in reduced UV recurrence depending on the degree of compression and adherence to the use of sock. High degrees of compression were associated with lower rates of recurrence and adhesion.

Keywords: Venous ulcers. Compression stockings. Prevention. Effectiveness. Efficacy.

REFERÊNCIAS


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