



Quality
Standards

Information and Data Brief: Venous Leg Ulcers



Find out why a particular quality standard
was created and the data behind it

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Quality Standards are:

- Concise sets of easy-to-understand statements outlining what care should look like for people living with certain conditions.
- Based on the best available evidence.
- Accompanied by quality indicators that enable organizations to monitor the quality of their care.
- Designed for health care providers to help them understand what care they should be offering, and how to measure it.
- Intended to also help patients, residents, families, and caregivers know what to ask for in their care.

What is included in this Brief

Wounds are a breakdown in the protective function of the skin and represent a significant burden for patients, their caregivers and families, clinicians, and the Ontario health system. There are several types of wounds.

This brief includes data and information on Venous Leg Ulcers.

Methodological details, references, acknowledgments and additional information are available at the end of this brief.

Why this Quality Standard is needed:

- Leg ulcers can cause social isolation and affect a person's ability to work because of pain, treatment requirements, and frequent health care appointments.¹
- Venous leg ulcers account for 80% to 90% of all leg ulcers.¹ Leg ulcers are most commonly caused by venous disease, a result of poor venous circulation.
- The rate of recurrence for venous leg ulcers is high, ranging from 19% to 48% after 5 years.²
- The data reported here account only for a portion of the affected population because patients with venous leg ulcers outside of acute care cannot be identified.
- Also, the data do not speak to how these wounds are cared for due to lack of information on the actual management of leg ulcers.

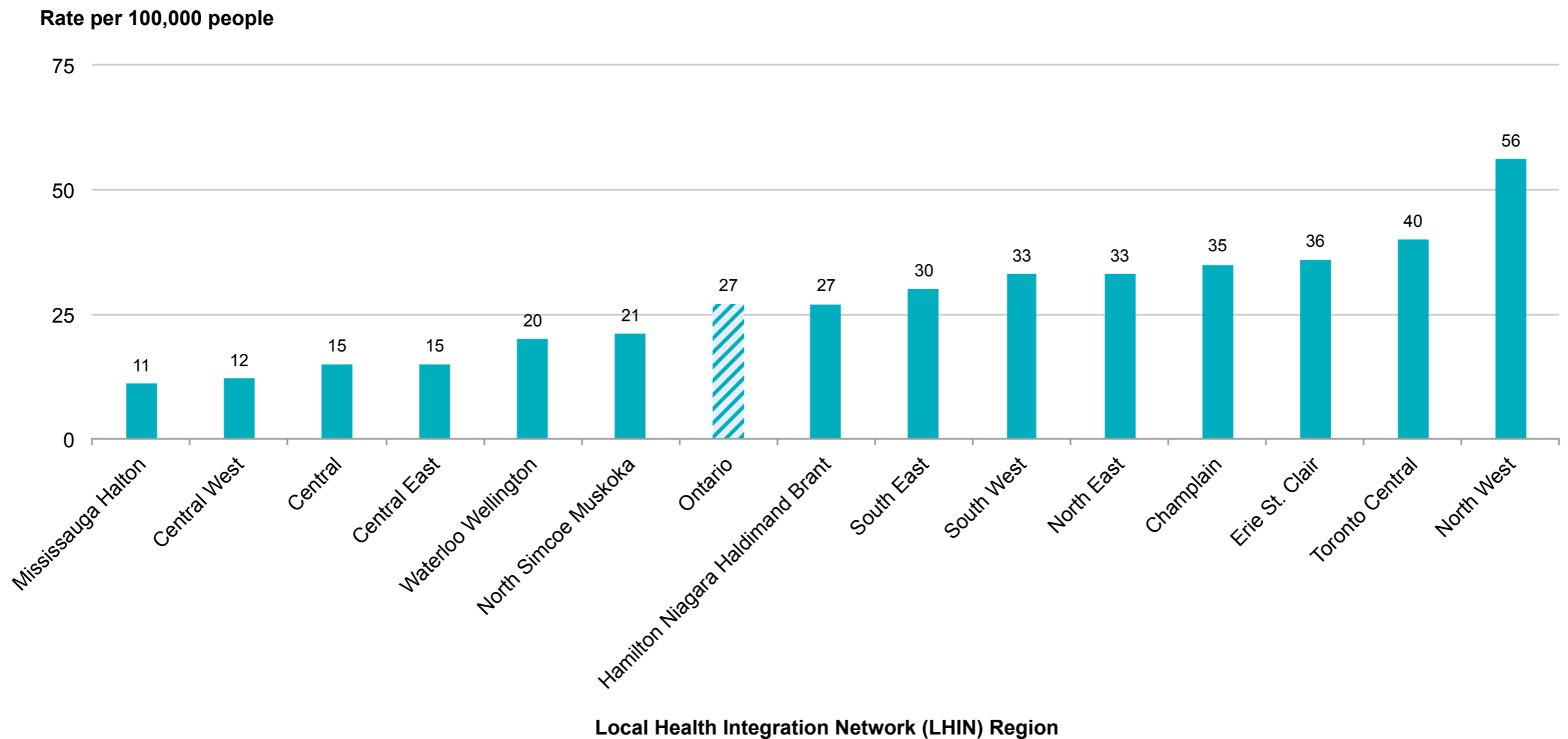


Venous Leg Ulcer: The Data

KEY FINDING

Hospitalization for people with venous leg ulcers varied almost five-fold across regions in Ontario.

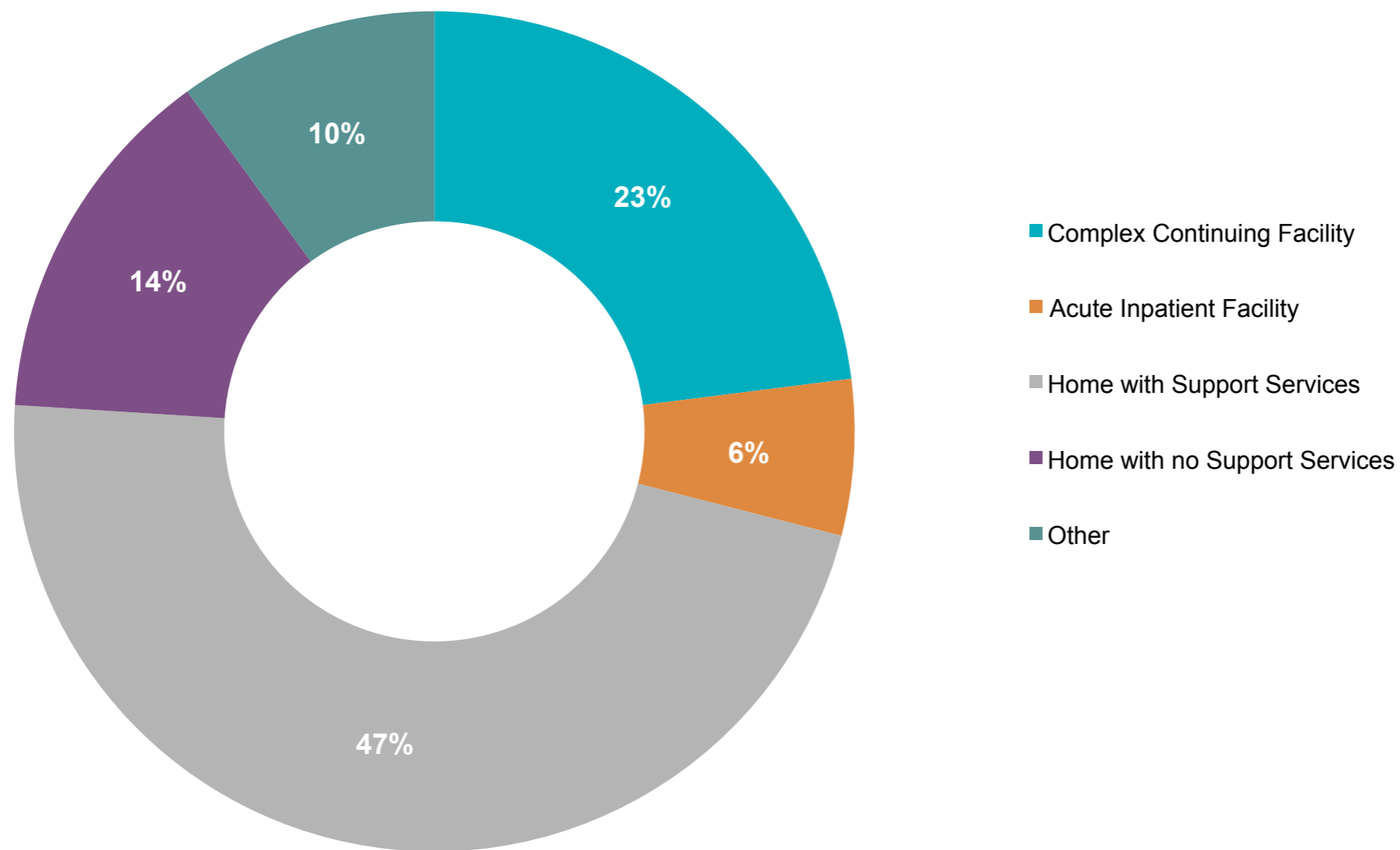
Hospitalization rates for Venous Leg Ulcers per 100,000 people in Ontario, by LHIN region, 2014/15



KEY FINDING

Patients hospitalized with a venous leg ulcer transition to a variety of settings, highlighting the importance of collaboration within and across settings.

Anticipated Discharge Destination for Patients with Venous Leg Ulcers in Ontario, 2014/15



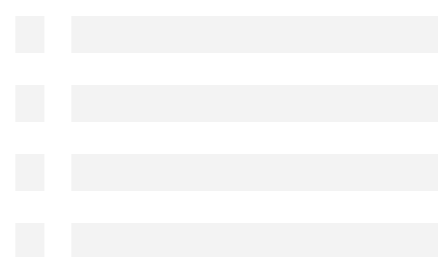
Methodological notes: Venous Leg Ulcer

Indicator	Numerator	Denominator	Source	Notes
Hospitalization rates for venous leg ulcers per 100,000 population in Ontario, by Local Health Integration Network (LHIN) region, 2014/15.	Number of people in the denominator who were hospitalized for a venous leg ulcer.	Number of people in the population.	ICES Diabetes Atlas.	Population aged 12 and over who report that they have been diagnosed by a health professional as having diabetes.
Anticipated discharge destination for patients with venous leg ulcers in Ontario, 2014/15.	Discharge Destination upon discharge.	All cases of diabetes that are prevalent on April 1 of 2014/15.	Ontario Diabetes Database, Discharge Abstract Database, Registered Persons Database, Ontario Health Insurance Plan provided by the Institute for Clinical Evaluative Sciences (Denominator): Discharge Abstract Database, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO (Numerator).	Only amputations of the lower extremities are included.



References

1. Wound Ostomy and Continence Nurses Society. Guideline on management of wounds in patients with lower-extremity venous disease. Mount Laurel (NJ): The Society; 2011.
2. Reeder SWI, Eggen C, Maessen-Visch MB, de Roos K-P, Martino Neumann HA. Recurrence of venous leg ulceration. *Rev Vasc Med*. 2013;1(4):63-5.



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Additional Resources

This Information Brief is intended to support the quality standard for Venous Leg Ulcers, which can be found in full on the [Quality Standards page](#) of the Health Quality Ontario website.



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For more information:

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