

VENous INtervention (VEIN) 2 Project: Introduction

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Most leg ulcers are due, wholly or largely, to venous disease. Two important facts about such ulcers are now beyond reasonable doubt. Firstly, the more chronic the ulcer, the harder it is to heal; and, secondly, intervention to reduce venous hypertension speeds healing and reduces recurrence rates. So, it is clear that any patient with a break in the skin below the knee that fails to heal within two weeks should urgently be referred to a specialist who is capable of undertaking a full clinical and haemodynamic (duplex ultrasound) assessment of the patient and able to offer the full range of evidence-based interventions appropriate for that patient. Only in this way can the often underestimated

burden of chronic venous ulceration (CVU) be ameliorated.

The 10 chapters in this publication are aimed at surgeons, interventionalists, physicians, allied health professionals and health-care commissioners, and review in detail what is known about the epidemiology, aetiology, current and possible future management of CVU in the broader context of lower limb venous disease.

The authors very much hope that the VEIN-2 project will bring about increased knowledge and understanding, which will translate into improved practice and thus better outcomes for this often forgotten group of patients.

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