**Laughter really is the best medicine (for leg ulcers)**

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Forget technology. The best prescription for patients with venous leg ulcers is good quality nursing care – and the occasional belly laugh!

A five-year study led from the University of Leeds has shown that ultrasound therapy does nothing to speed up the healing process of leg ulceration - contrary to what had been expected.

Traditional methods of nursing care, which are cheaper and easier to deliver, work just as well, the authors conclude.

"The 'healing energy' of low-dose ultrasound can make a difference to some medical conditions but with venous leg ulcers, this is simply not the case," said Professor Andrea Nelson from the University of Leeds' School of Healthcare, who led the study.

"The key to care with this group of patients is to stimulate blood flow back up the legs to the heart.

The best way to do that is with compression bandages and support stockings - not 'magic wands' - coupled with advice on diet and exercise.

Believe it or not, having a really hearty chuckle can help too.

This is because laughing gets the diaphragm moving and this plays a vital part in moving blood around the body."

Venous leg ulcers are common in people with varicose veins or mobility problems whose 'muscle pumps' in the feet and calves struggle to drive blood up to the heart.

These ulcers can be painful and unsightly, having a significant negative impact on health and quality of life.

Although most leg ulcers will clear up with good nursing care, a significant proportion of the lesions will take 12 months or longer to heal.

The older and larger ulcers become the harder they are to get rid of, hence the search for solutions that could speed-up the healing process.

A number of small studies had suggested that ultrasound could be the answer.

Professor Nelson (University of Leeds), working with colleagues from the Universities of York and Teeside, and many NHS Trusts, have now shown that this is not the case.

The researchers concentrated on 'hard to heal' ulcers that had not cleared up after six months or longer.

Drawing on patients from across the UK and Ireland, they found that adding ultrasound to the standard approach to care  - dressings and compression therapy - made no difference to the speed of healing or the chance of the ulcers coming back.

Ultrasound also raised the cost of care per patient by almost £200.

"Rising levels of obesity mean that the number of people who suffer from legs ulcers is likely to grow," Professor Nelson said.

"We do need to find ways to helping those patients who ulcers won't go away, but our study shows that ultrasound is not the way to do that.

We need to focus on what really matters, which is good quality nursing care.

There really is no need for the NHS to provide district nurses with ultrasound machines.

This would not be money well spent."

The study was funded by the National Institute for Health Research (NIHR) Health Technology Assessment Programme (HTA).

Full details of the findings are published online today in advance of publication in the *British Medical Journal* and *Health Technology Assessment*.

**For further information:**

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**Notes to editors:**

1. The paper: *'Use of weekly, low dose high frequency ultrasound for hard to heal venous leg ulcers: the VenUS III randomised control trial'*, is available online in advance of publication in the British Medical Journal (BMJ  2011;342:d1092).
2. The report: '*VenUS III: a randomised controlled trial of therapeutic ultrasound in the management of venous leg ulcers'* is available online in advance of publication in Health Technology Assessment (DOI: 10.3310/hta15130; see [www.hta.ac.uk/1451](http://www.hta.ac.uk/1451)).
3. One of the UK's largest medical, health and bioscience research bases, the University of Leeds delivers world leading research in medical engineering, cancer, cardiovascular studies, epidemiology, molecular genetics, musculoskeletal medicine, dentistry, psychology and applied health. Treatments and initiatives developed in Leeds are transforming the lives of people worldwide with conditions such as diabetes, HIV, tuberculosis and malaria. [http://www.leeds.ac.uk](http://www.leeds.ac.uk/)
4. The National Institute for Health Research Health Technology Assessment (NIHR HTA) programme commissions research about the effectiveness, costs, and broader impact of health technologies for those who use, manage and provide care in the NHS. It is the largest NIHR programme and publishes the results of its research in the Health Technology Assessment journal, with over 550 issues published to date. The journal's 2008 Impact Factor (6.91) ranked it in the top 10% of medical and health-related journals. All issues are available for download free of charge from the website, [http://www.hta.ac.uk](http://www.hta.ac.uk/)
5. The National Institute for Health Research provides the framework through which the research staff and research infrastructure of the NHS in England is positioned, maintained and managed as a national research facility. The NIHR provides the NHS with the support and infrastructure it needs to conduct first-class research funded by the Government and its partners alongside high-quality patient care, education and training.  Its aim is to support outstanding individuals (both leaders and collaborators), working in world class facilities (both NHS and university), conducting leading edge research focused on the needs of patients