Orthopaedic Connection

Legs Still Swollen? Pay Attention, Please

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Transforming patient information into patient understanding.

Last week we told you that it was OK to wait 24 hours or perhaps we could stretch it to 48 hours. This is especially true if the leg swelling isn’t accompanied by other signs and symptoms like shortness of breath. Longer lasting or recurring edema, even if fairly slight merits a medical visit.

It should be pointed out that prompt attention is needed if leg swelling is painful, warm, in one leg only, or accompanied by chest pain or shortness of breath.

As in any condition we treat, identifying the cause of leg swelling is terribly important. The treatment of the underlying cause is beyond the scope of this article because it is so variable.

What follows is treatment of the edema itself.

1. Sodium restriction

Reduce the intake of salt (NaCl, i.e. sodium chloride). It is the most important and first thing to do. Decrease salt and decrease the amount of fluid your body retains. Smart move.

2. Diuretic drugs

These are prescribed to help your kidneys get rid of extra water and sodium. But you can’t do this without reducing salt intake too or the diuretic won’t work.

If edema is due to bad veins or lymphatics you will need additional measures. Read on.

3. Exercise

“Ugh, groan.” I heard that. It always comes back to exercise doesn’t it? In most cases moving and using the muscles can help blood and fluids get back to the heart. Occasionally exercise can increase fluid leaking into tissues. If so, get medical advice before continuing.

4. Elevation
Elevate affected limb above your heart 30 minutes 3 times per day. Also do this while sleeping.

5. Compression stockings

These keep pressure on your leg(s) to prevent fluid from collecting. They should be put on as soon as you get out of bed. Stockings up to the knee (not above) are usually adequate for this purpose.

Act sooner, not later
Whatever the cause, the longer swelling stays it can become painful and cause skin changes that lead to sores that won’t heal and infection. Risk of complications increases if you are a slow healer for any reason or have diabetes. We hope these thoughts can help you in management of this very common condition.

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Gratiot County Herald Archive and Office Website.
I sincerely appreciate all of you loyal readers and patients present and future and welcome all newcomers!
Besides what you read today there is a huge treasure trove of Orthopaedic and musculoskeletal information at www.orthopodsurgeon.com. It contains the Website Library, Your Orthopaedic Connection and complete archive of every GCH article I have written.
I specialize in you. Be well.

Dr. Haverbush