

VENOUS ULCERS CONSIDERED TO BE 'DIFFICULT' AND THEIR IMPACT ON THE QUALITY OF LIFE OF PATIENTS: RESULTS OF THE TRAJECTOIRE SURVEY

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Introduction: The TRAJECTOIRE survey sought to describe the typology of ulcers deemed to be “difficult” and to assess their repercussions on quality of life.

Methods: Observational survey. The investigators reported, at most, the first 8 in-patients or out-patients in whom they deemed the ulcer to be difficult. An assessment of the wound was made at baseline and a EuroQoL-5D (EQ5D) quality-of-life questionnaire was completed by the patient. If the patient was seen again within 30-120 days, the evolution of the wound was documented and a new EQ5D was completed.

Results: 168 investigators included 1005 patients (64% women; 91% out-patients; 62% already seen; age: 73 ± 12 years). 48% of the patients had undergone vascular exploration and compression therapy was used in 76% of cases. 31% and 25%, respectively, had a history of venous surgery or phlebitis. The ulcer was recurrent in 55% of cases and more than one wound was present in 34% of patients. 22% of the ulcers had been present for more than 6 months. Diabetes or heart failure was observed in 20% and 11% of cases, respectively. An increase in surface area, the development of erythema and abundant exudation were the most commonly reported signs. On the EQ5D, the pain/discomfort and anxiety/depression dimensions were significantly the most reported. 652 patients were seen again by the investigating physicians. The EQ5D was significantly improved in the event of a favourable course of the ulcer.

Conclusion: Ulcers deemed to be “difficult” in routine practice are associated with important impact on the EQ5D which is very sensitive when an improvement in wound condition occurred.