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# Walk On

## Helping former drug users manage leg ulcers

by Amy Oprean

It is one of the lesser known consequences of injection drug use, but one that stays with former users for the rest of their lives. Chronic venous insufficiency, or CVI, which occurs when veins cannot pump a sufficient amount of blood from the legs back to the heart, is a result of veins that have collapsed from damage. Symptoms begin with swelling and enlargement of varicose veins, followed by discoloration and thickening of the skin around the legs and ankles. In its most severe stages, ulcers form and can cover the entire lower leg.

Although common in the elderly population, CVI can also occur much earlier in people who have injected illicit drugs, especially in their legs, feet and groin. Wayne State researcher Barbara Pieper, Ph.D., professor of nursing in WSU's College of Nursing, is working to understand the link between injection drug use and early onset CVI to develop better methods for the prevention and management of the disease.

As a nurse practitioner providing wound care in WSU's university health care center for nearly 20 years, Pieper has seen an extensive amount of injection-related CVI. "Venous leg changes tend to occur as we age," Pieper said. "But while you typically don't see the disease in the general population until you get to the 65 and older age group, I see people with advanced CVI in their 30s and 40s. These are essentially young people with an older person's disease."

Although previous studies by Pieper and her collaborator Thomas Templin, Ph.D., professor of psychology in WSU's College of Nursing, suggested

a link between injection drug use and early onset CVI, their most recent study has the relationship more defined than ever before. The study, funded by National Institute of Nursing Research of the National Institutes of Health, assessed the experience of more than 700 people with varying drug consumption habits at 12 different drug treatment centers in Metro Detroit. They found that injecting illicit drugs into the groin, legs and feet was the greatest risk factor for developing early onset CVI. Those who injected in their legs – with or without injecting in the arms – were nine times more likely to develop venous ulcers than those who injected just in the arms and upper body, and 35 times more likely to develop venous ulcers than drug users who had never injected at all.

In addition, subjects who had injected drugs into their legs had lower daily physical activity scores, and in some cases, were at higher risk of falls. "These results show that we have relatively young people who aren't exercising or even walking because of the chronic pain in their legs – making them much more susceptible to other health problems associated with an inactive lifestyle."

Among Pieper's future plans for her research is an investigation of how to motivate those with CVI to continue exercising, as well as determining whether exercise improves CVI status. She also hopes to spread awareness of the consequences of this disease. "This is a chronic problem that will continue to evolve and probably worsen as people age, so the more we can do to protect the legs early on could really reduce long-term health care costs and help people with CVI live healthy, active lives."



### About Dr. Barbara Pieper:

Dr. Pieper received a B.S.N. from Michigan State University, and a M.S.N. and Ph.D. in nursing from Wayne State University. She joined Wayne State as a faculty member in 1980.

To learn more, visit: <http://www.nursing.wayne.edu/Faculty/Directory/ab5813fp.html>