THE DONNING

OF GRADUATED COMPRESSION STOCKINGS:

COMPLEX PROCESS BUT EASY ASSESSMENT?

M CHAUVEAU¹, G THINEY², F CROS², P CARPENTIER³

1 Fontenay aux roses, France 2 Laboratoires Innothera, Arcueil, France 3 Centre de recherche universitaire de La Léchère, France.

INTRODUCTION

Compliance with compression therapy remains unsatisfactory.

Non compliant			
2% to 42%	3 randomized controlled trials (VLU)	MOFFATT C et al.	
10% to 80%	7 real-world studies (VLU)	Int Wound J 2009;6:386-393.	
63%	3144 patients referred to a tertiary venous practice -USA-	RAJU S et al. Ann Vasc Surg 2007; 21:790-795.	
31.5%	Inquiry in 332 pharmacies (2223 patients) -France-	GILLET JL, ALLAERT FA. Phlébologie 2013; 66:14-21.	

INTRODUCTION

Determinants of non compliance

Lack of conviction about the efficacy

Inappropriate choice of garment

Incorrect application

Difficulty in putting on the stockings

Discomfort

Skin irritation

Pain

Unaesthetic device

MOFFATT C et al. Int Wound J 2009;6:386-393 C5-C6. Review of literature.

INTRODUCTION

Determinants of non compliance

Lack of conviction about the efficacy

Inappropriate choice of garment

Incorrect application

Difficulty in putting on the stockings

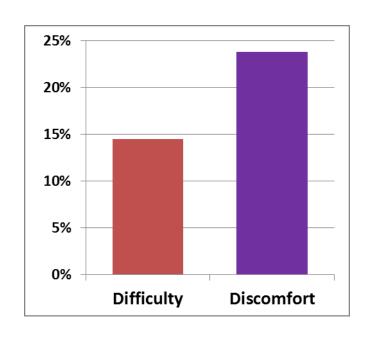
Discomfort

Skin irritation

Pain

Unaesthetic device

MOFFATT C et al. Int Wound J 2009;6:386-393 C5-C6. Review of literature.



GILLET JL, ALLAERT FA. Phlébologie 2013; 66:14-21.

OBJECTIVE

To present a simple and reliable method to assess the difficulty in donning GCS, as experienced by patients.

Results of sensory analysis,

will be compared to results of **Clinical trial**

Sensory analysis

aimed at quantifying the sensations

evoked by various activities or external stimuli

THINEY G, SOUFFLET I, OUCHENE A. Utilisation de l'analyse sensorielle pour l'évaluation des bas de compression veineuse élastique. J Orthop 2008; 9:1371-1376.

THINEY G, BECKER F, OUCHENE A. Observance et compression veineuse élastique. Etude de la facilité d'enfilage et des sensations au porter précoces. Phlébologie 2007; 60:293-302.

Sensory analysis

Performed in the IFTH* sensory laboratory

By an expert panel of trained women (n= 12)

^{*} Institut français du textile et de l'habillement

Sensory analysis: 4 phases

1- Preliminary trials by the panel → the best procedure for donning (putting on and putting off the stocking) has been previously finalized.













Introducing the forefoot



Pulling up till the instep



Passing the heel











Sliding the textile up on the leg

Sensory analysis: 4 phases

- 1- Preliminary trials by the panel → the best procedure for donning (putting on and putting off the stocking) has been previously finalized.
- 2- For each step of the donning process, a sensory descriptor was defined, in a consensual way, by the whole panel.

In this study, 3 sensory descriptors were used:

the global effort for putting on the stocking

the effort for passing the heel

the global effort for putting off the stocking

Sensory analysis: 4 phases

- 1- Preliminary trials by the panel \rightarrow the best procedure for donning (putting on and putting off the stocking) has been previously finalized.
- 2- Sensory descriptors, corresponding to the differents steps of the donning process, were choosen, in a consensual way, by the whole panel.
- 3- Training of the panel with the set of 3 GCS to be tested:

A (15-20 mmHg), B (20-30 mmHg),

C (20-36 mmHg)

- calibration of the quotation of each descriptor using the whole range of the scale $(0 \rightarrow 10)$, over the complete set of products.
- 4- Final quotation of sensory descriptors for the 3 stockings → analysis

Clinical trial

- Performed in the CRULL* (Spa research center of La Léchère, France)
- Involved 23 women (65-79 yrs), C1s-C5s
- Stockings were put on according to the same procedure as in sensory analysis, then worn during 3 hours, then put off.
- Subjects quoted (0 \rightarrow 10) the same three sensory descriptors.
- Each subject tested the 3 stockings (A, B, C), on 3 different days.
- No training with the products before the trial: no calibration of the quotations over the whole range of efforts required by the 3 products.

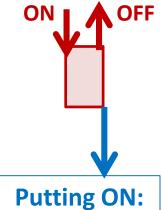
* Centre de recherches universitaire de La Léchère

Sensory analysis

Clinical trial

stockings

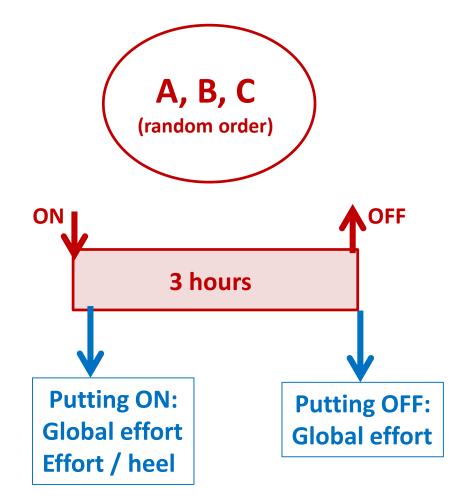
A, B, C (random order)



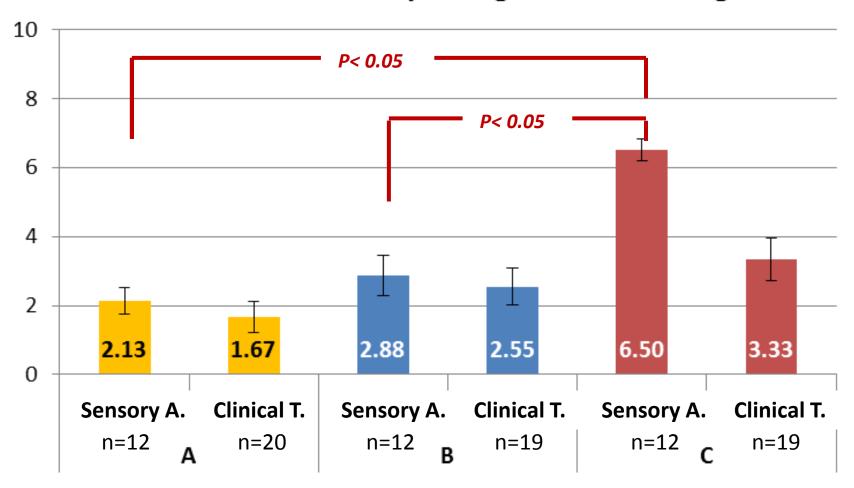
answers

Global effort Effort / heel

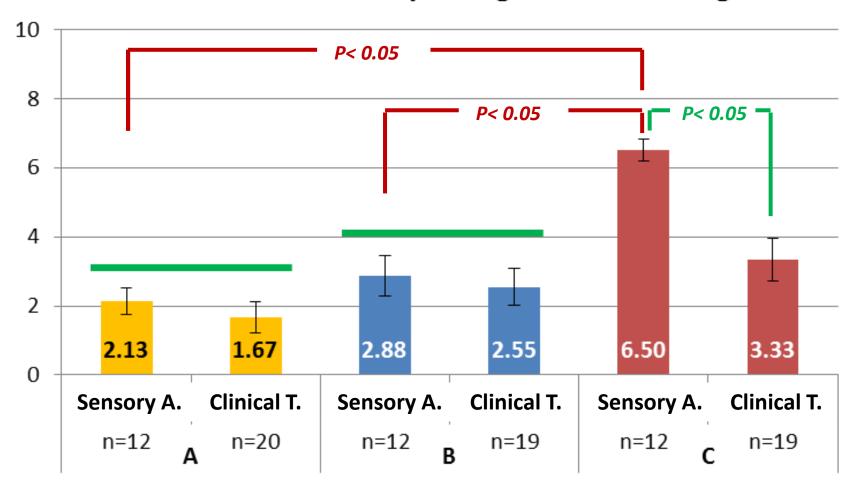
Putting OFF: Global effort



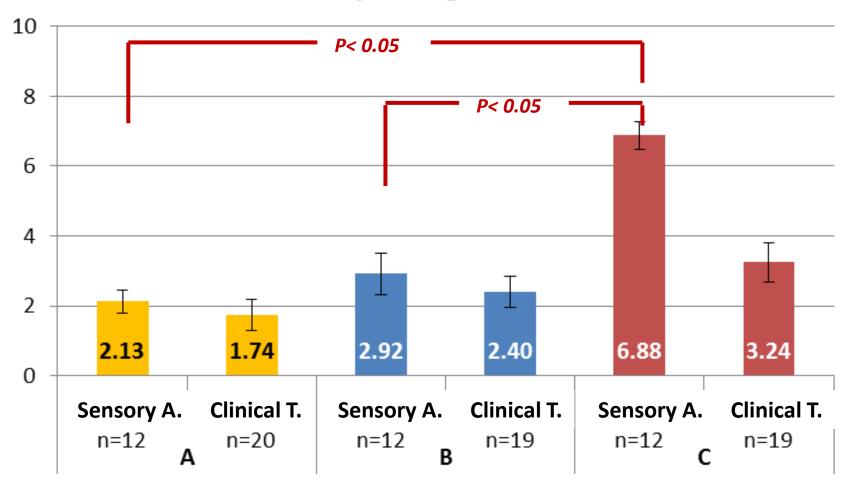
Global effort for putting on the stocking



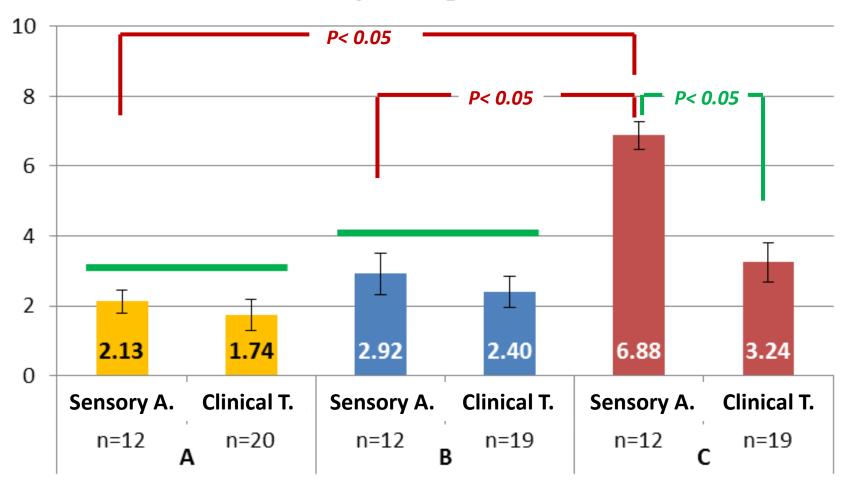
Global effort for putting on the stocking



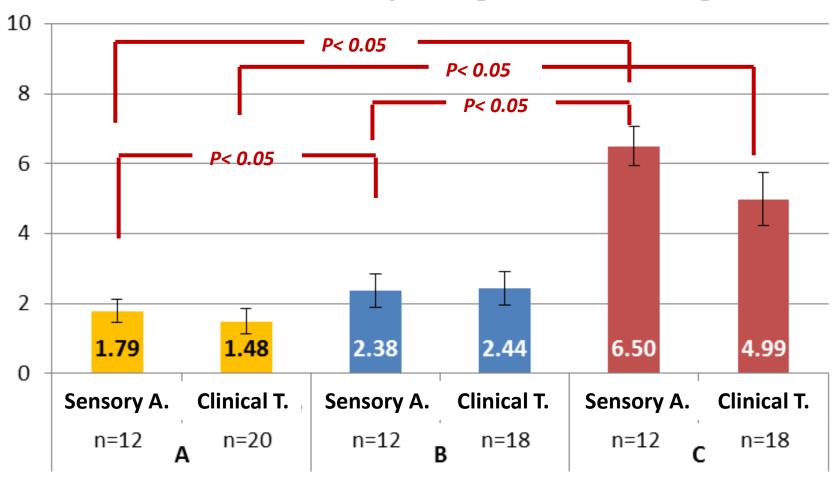
Effort for passing the heel



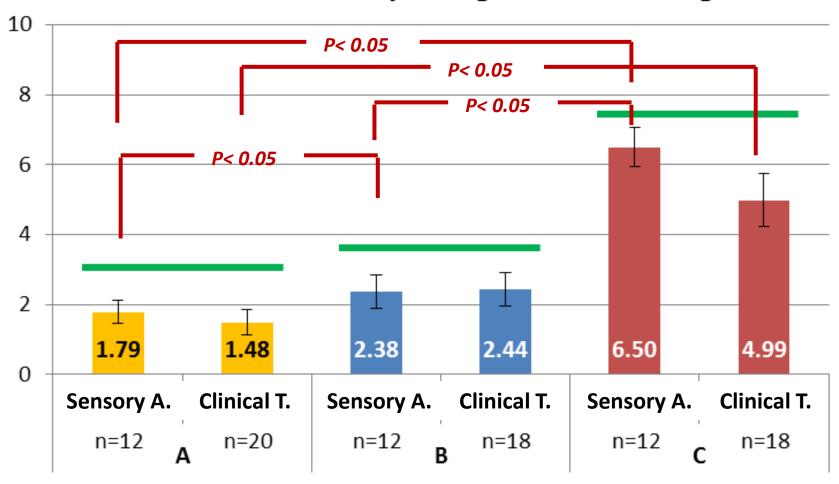
Effort for passing the heel

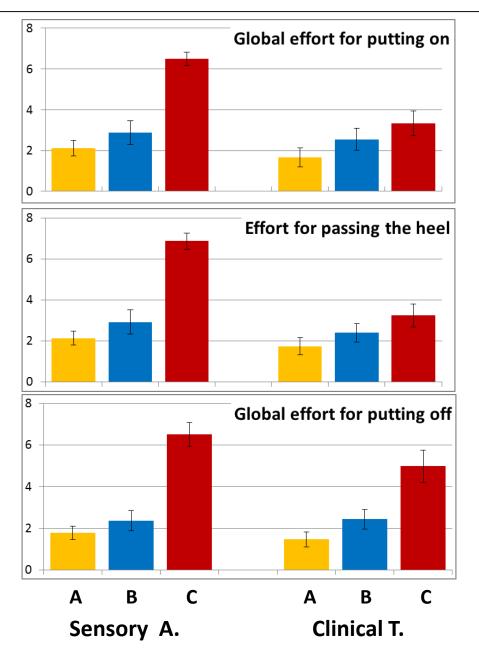


Global effort for putting off the stocking



Global effort for putting off the stocking





Sensory analysis vs Clinical trial:

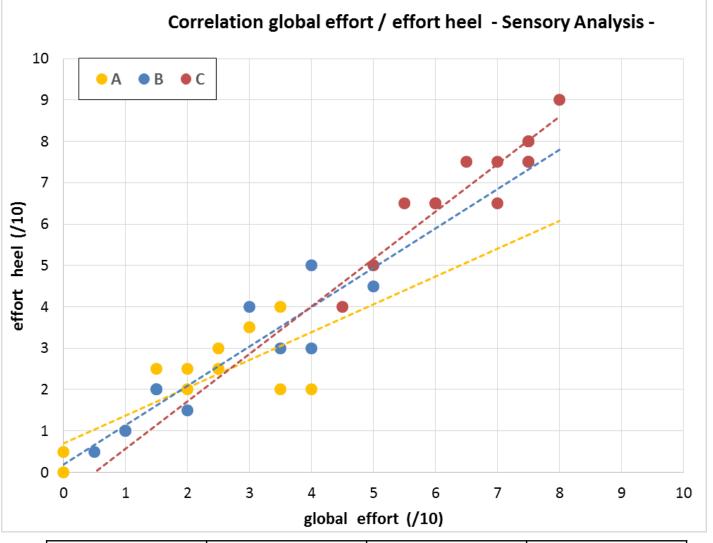
Increasing difficulty from A to C:

In both studies

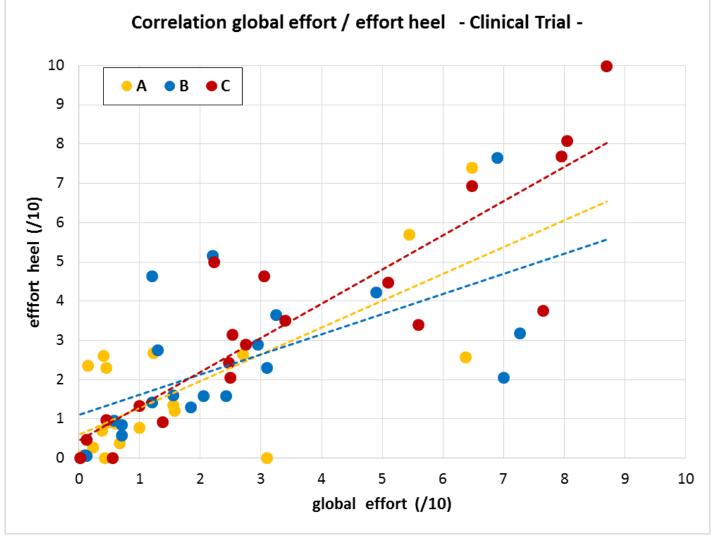
Effort's quotations:

don't significantly differ,

except for putting on C



	А	В	С
r Pearson	0.7561	0.9540	0.9303
р	0.004	< 0.0001	< 0.0001



	А	В	С
r Pearson	0.7362	0.6073	0.8899
р	< 0.0001	0.005	< 0.0001

CONCLUSION

1- Sensory analysis, performed by a small expert panel, is able to predict with a good agreement the difficulty in putting on and putting off stockings experienced by patients.

2- The difficulty for sliding the heel into the GCS is a marker of the overall difficulty in putting on.

Questioning patients on this point seems to be the most appropriate simple way to assess the acceptabilty of different stockings.