

# Physiological Considerations for Compression Bandaging

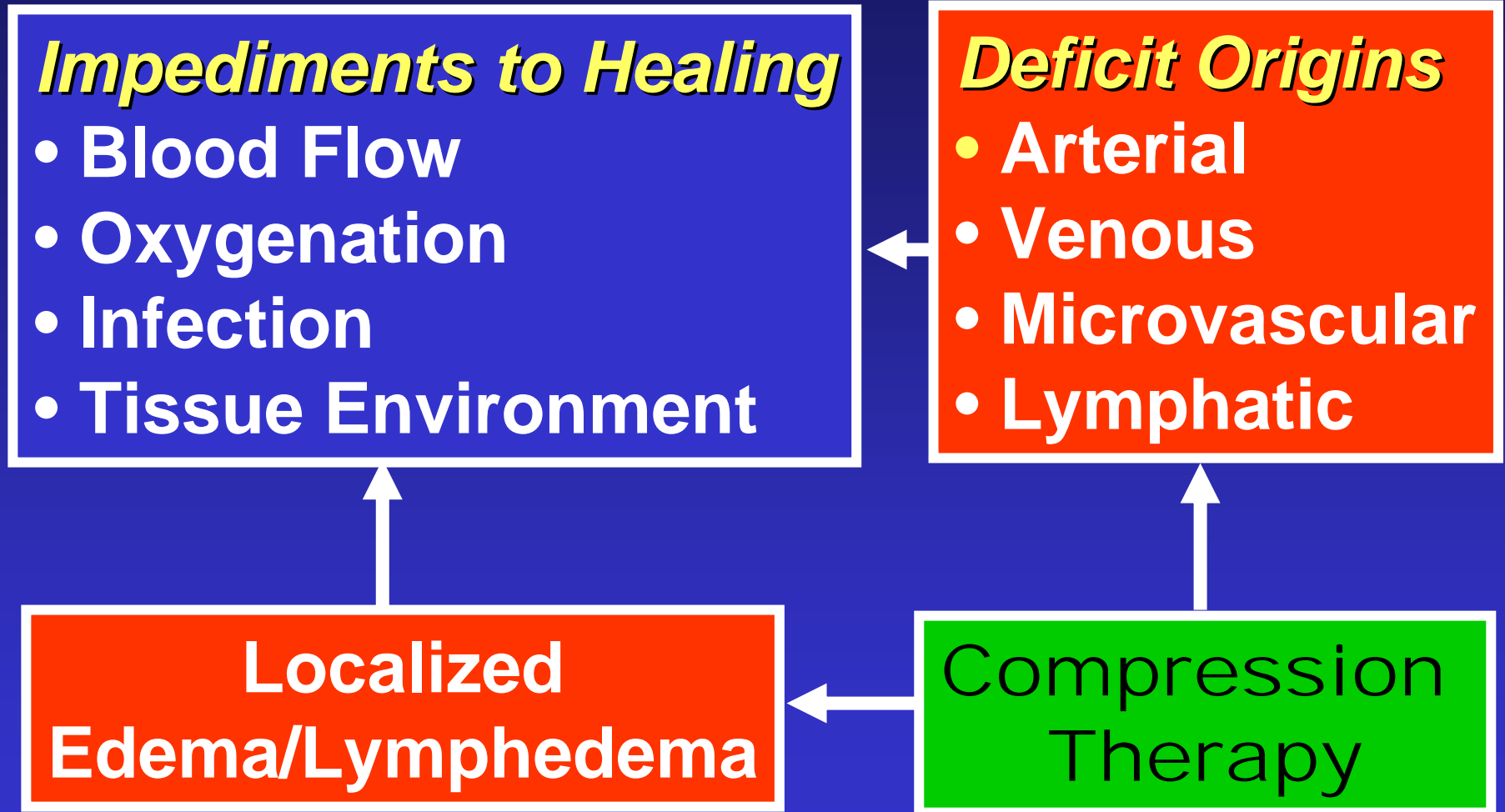


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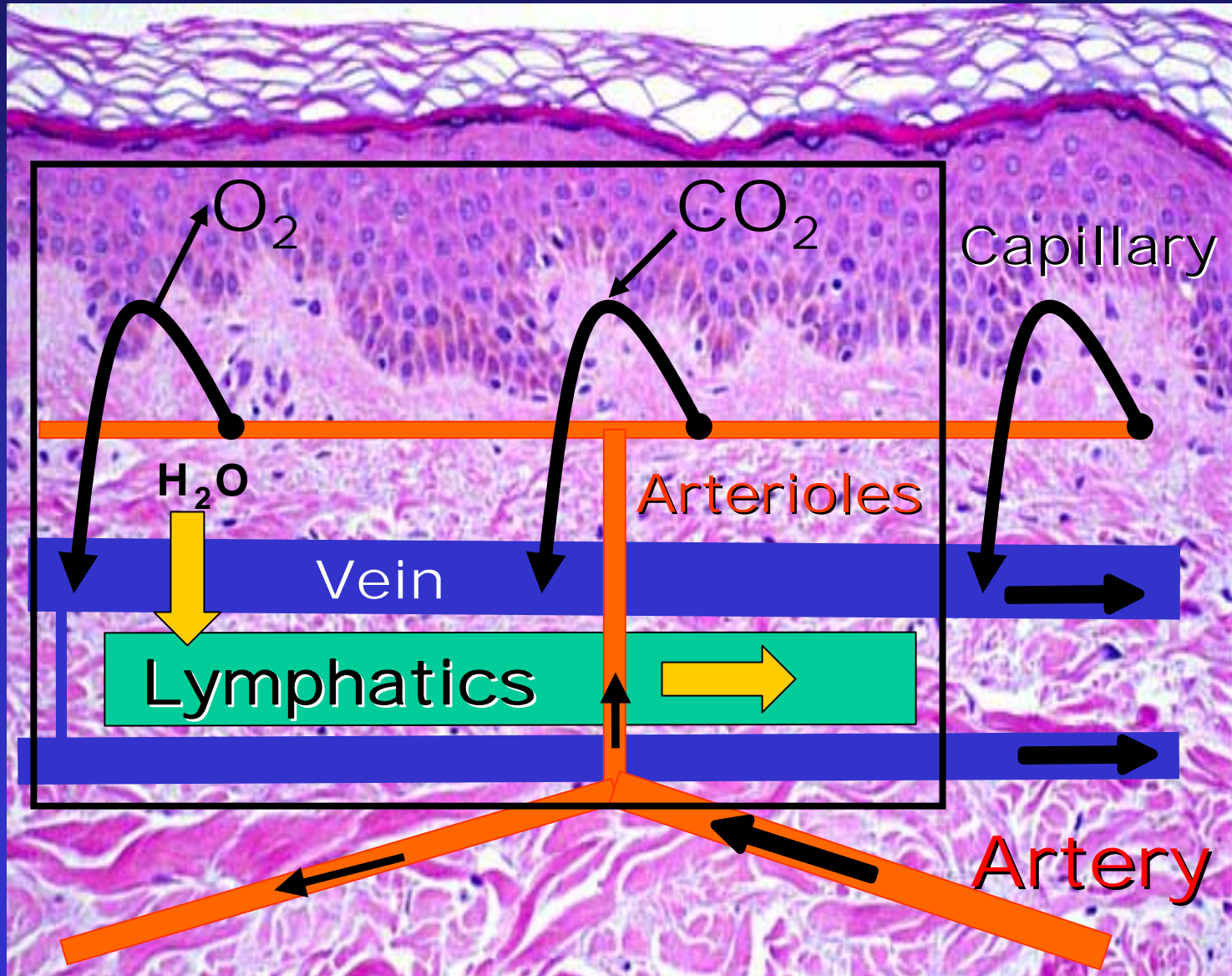
**At the completion of this presentation  
participants will be able to:**

- 1. State the difference between edema and lymphedema**
- 2. State at least one process that can cause edema**
- 3. Describe the basic processes involved in lymphatic transport**
- 4. Describe long-stretch and short-stretch bandages and their use**
- 5. Contrast the effects of resting vs. working pressures**
- 6. Describe Laplace's law as it applies to bandaging**

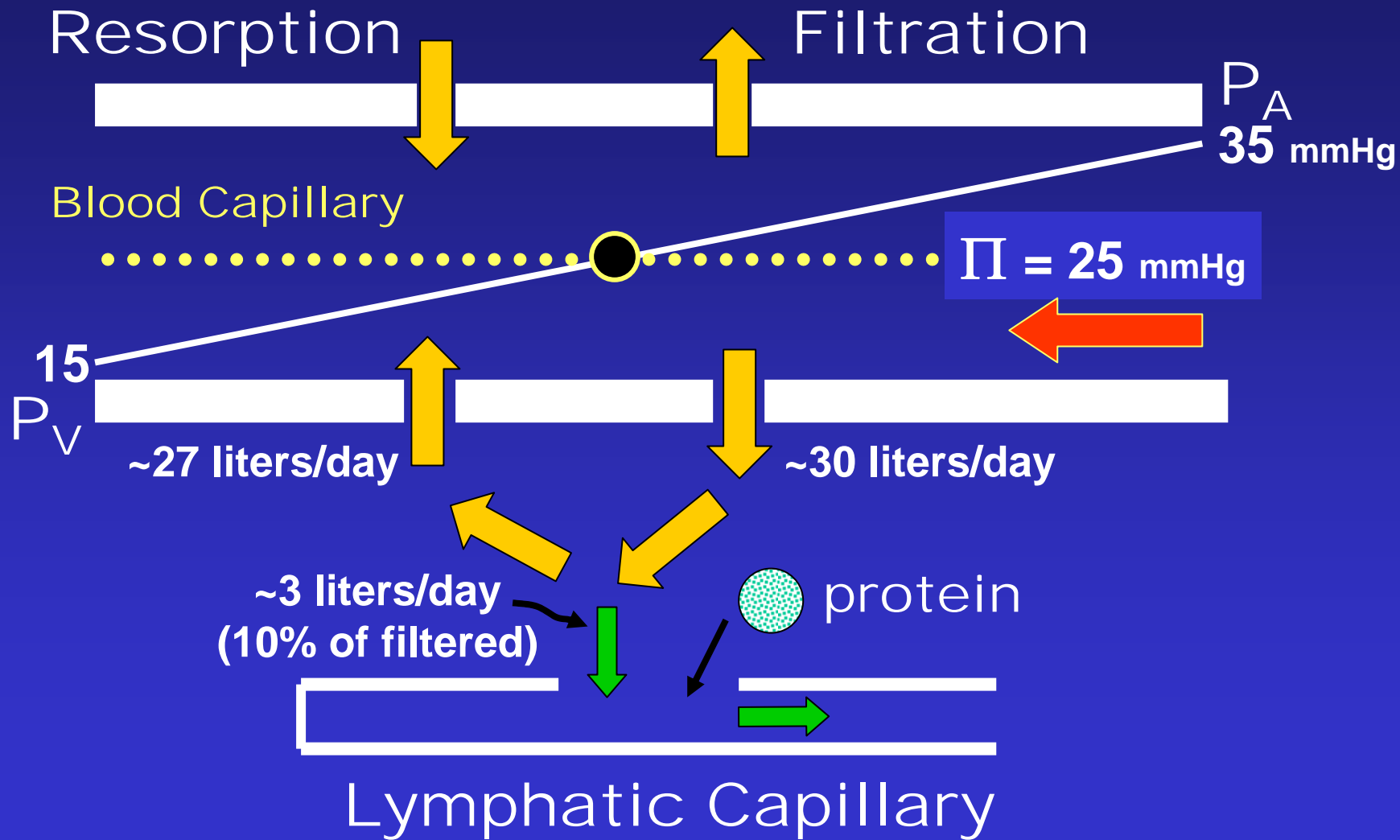
# Relationship to Wound Healing



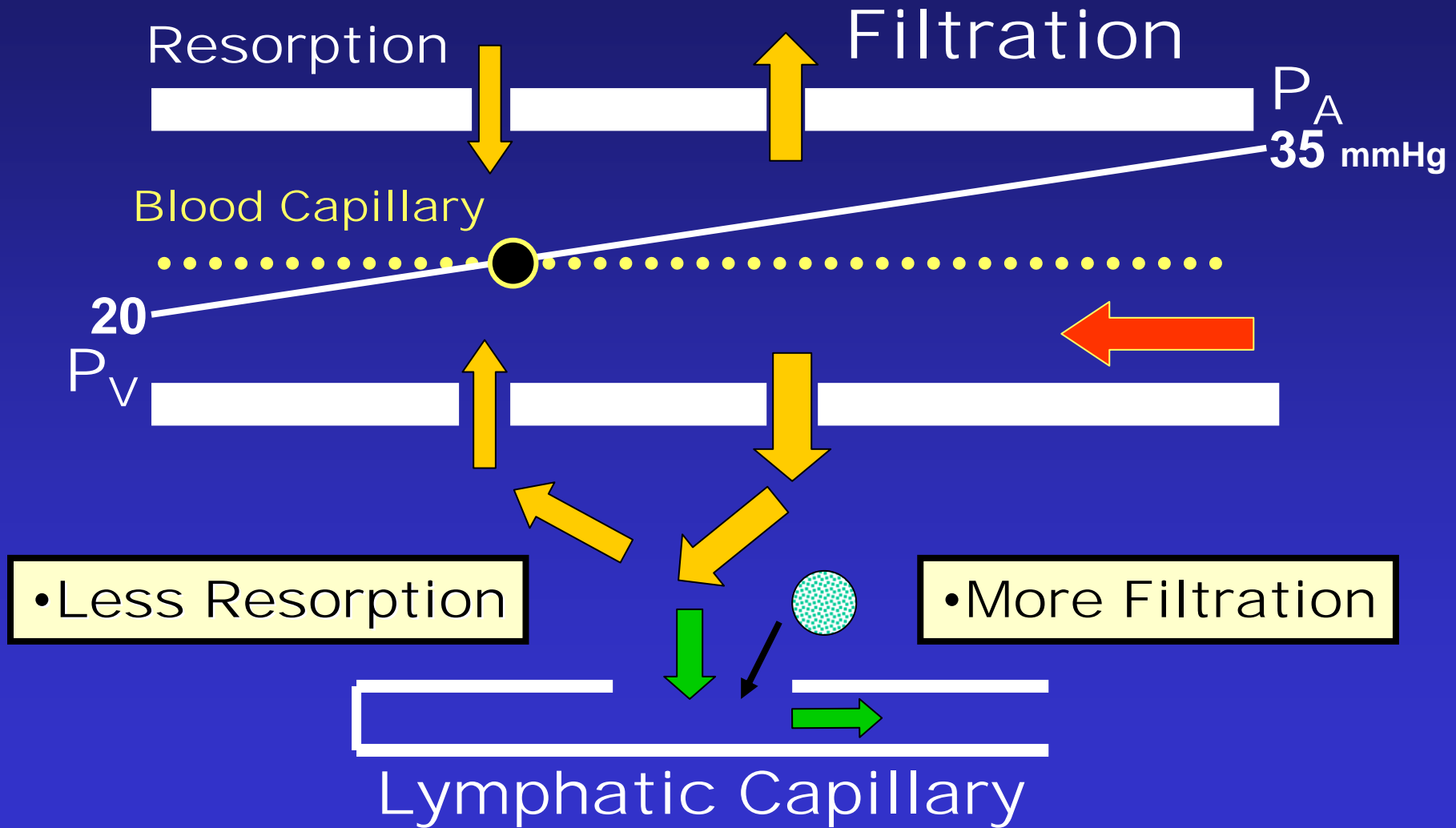
# Circulation Schema



# Normal Fluid Balance



# Increased Venous Pressure or Capillary Permeability



# If Net Filtration Exceeds Lymphatic Transport Capacity

Overload = Edema

+ [Protein]

= Lymphedema

## Therapy Options

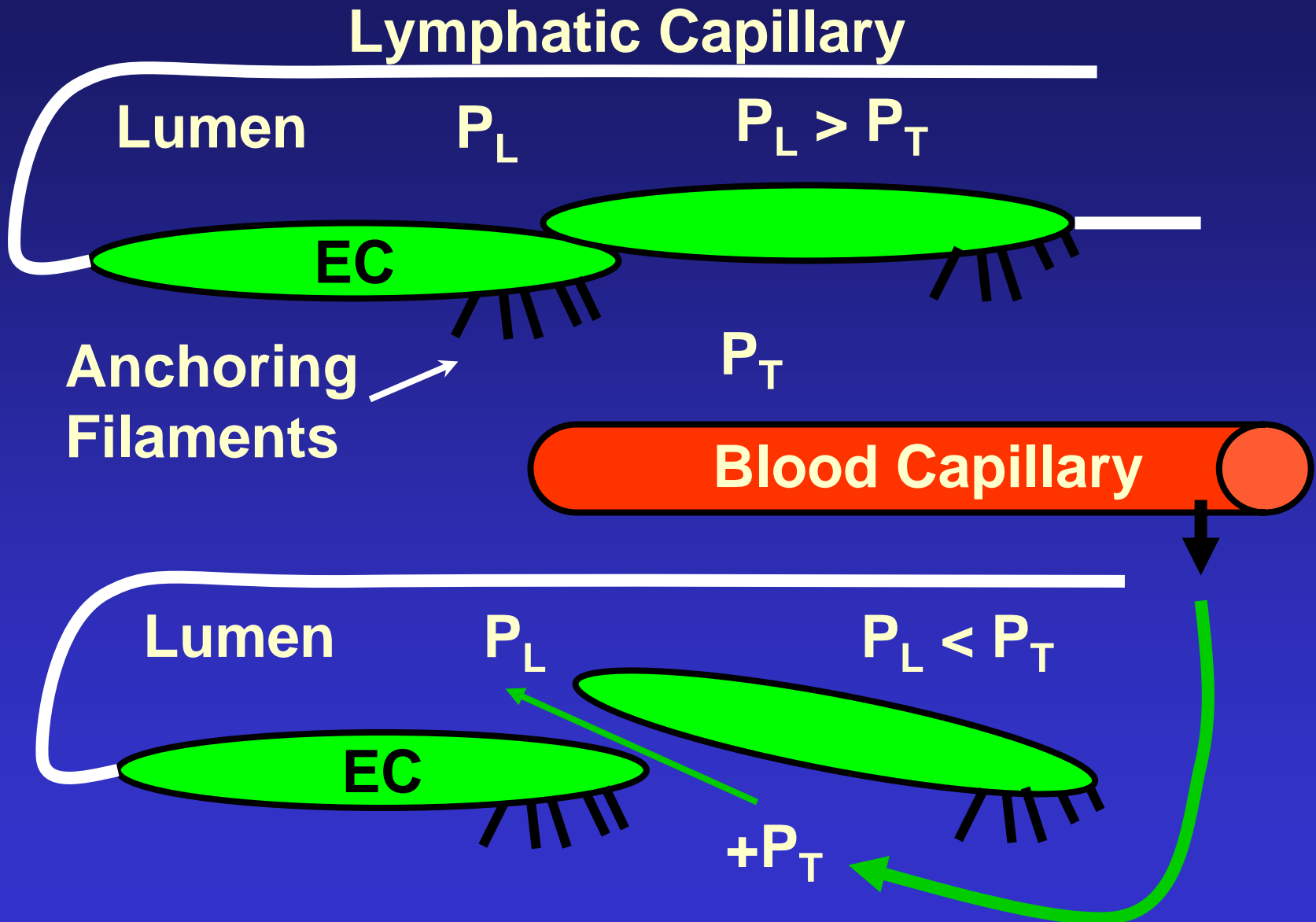
- Reduce Filtration
- Increase Transport

# Normal Lymph Transport

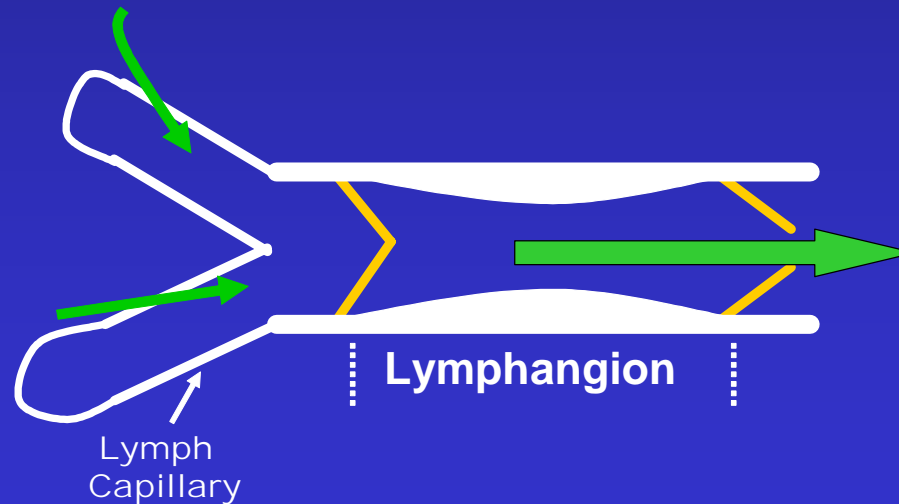
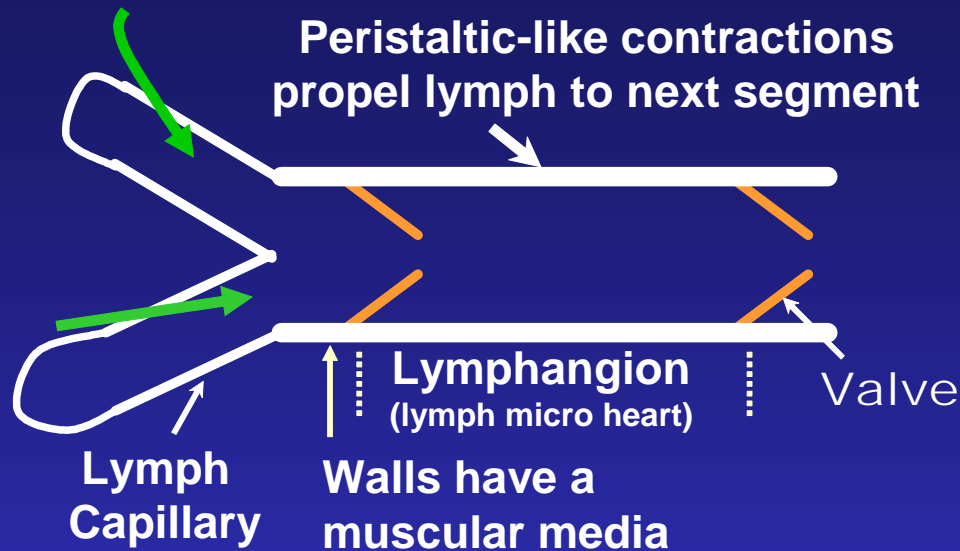
- Lymphangion Contraction
- Skeletal Muscle Pump
- Arterial Pulsations
- Body Movements
- Respiration

**All are Dynamic Processes**

# Lymphatic Capillaries

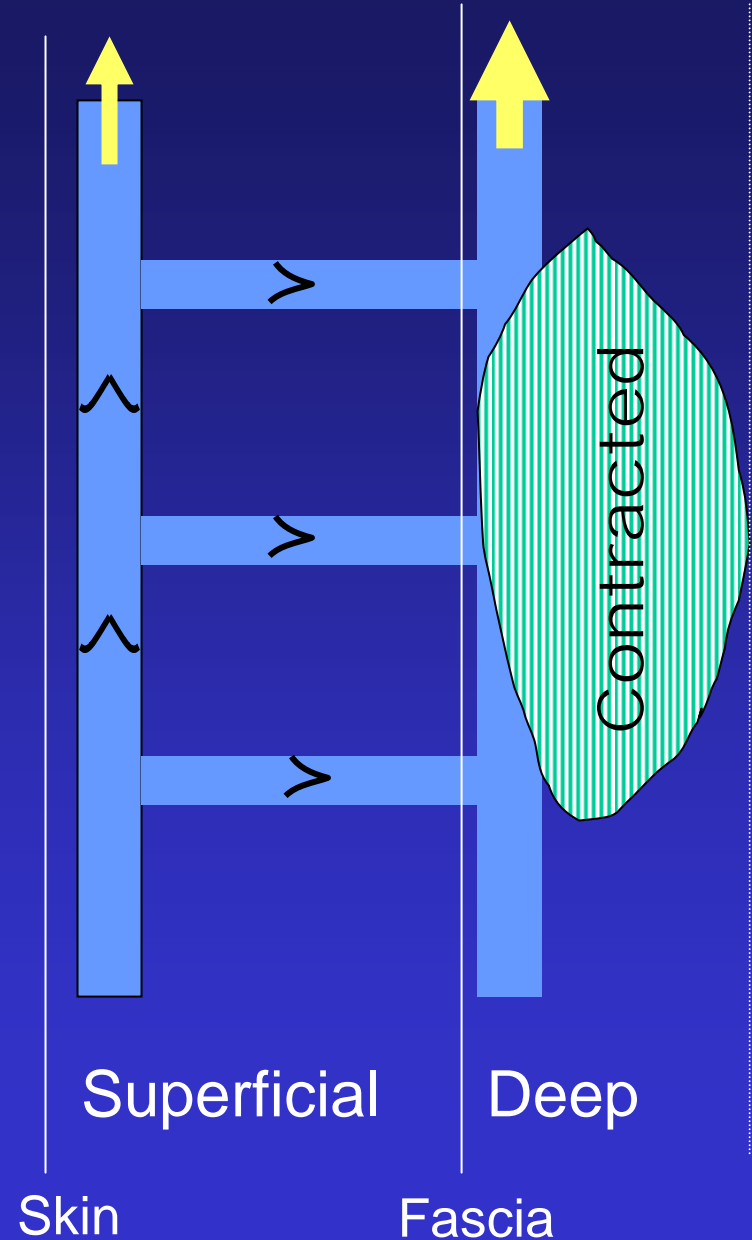
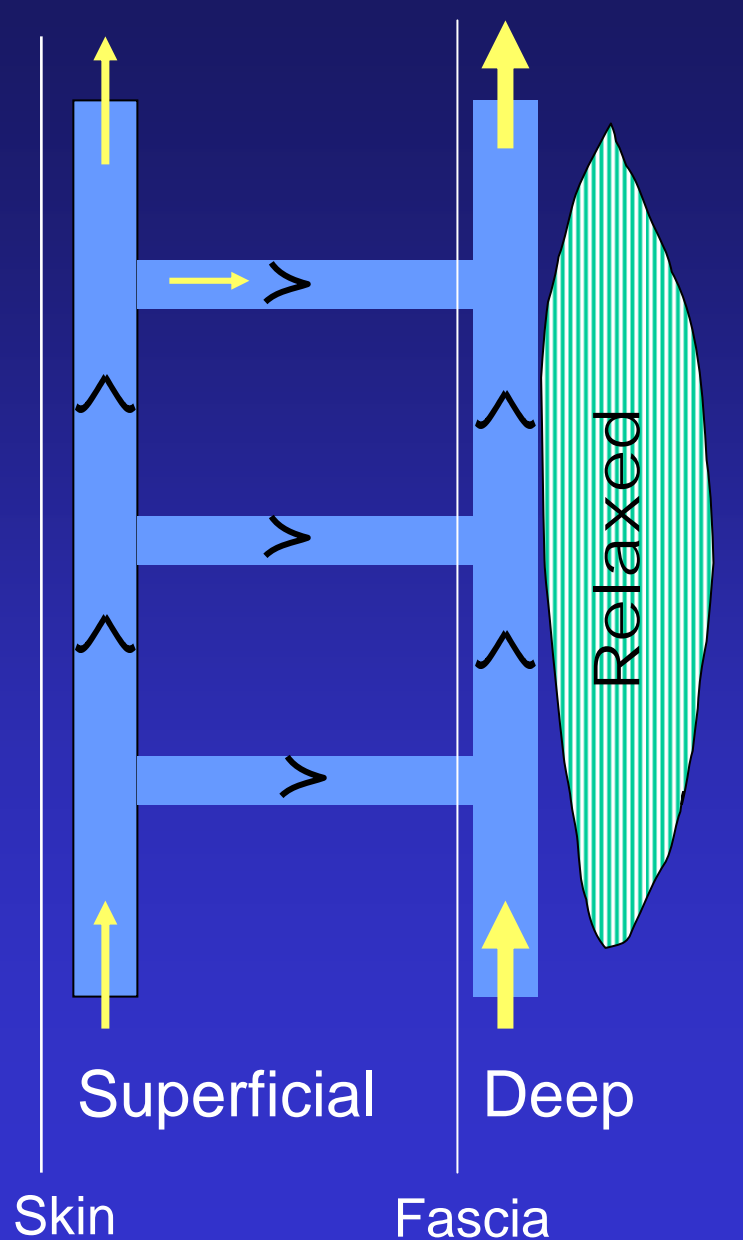


# Lymphatic 'Hearts'

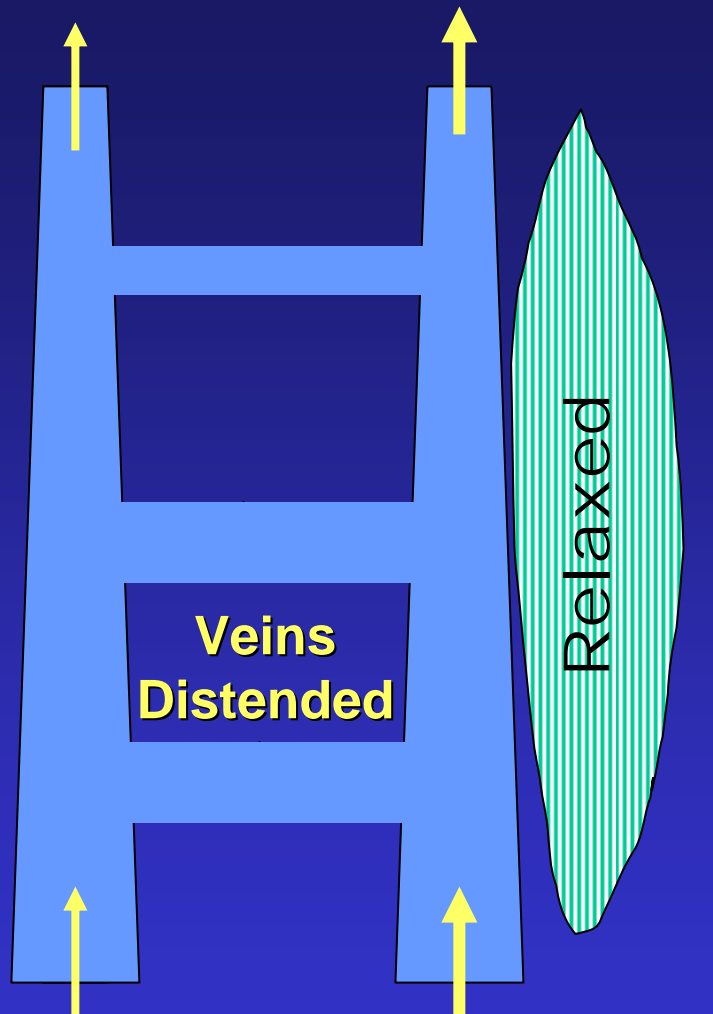


Contraction force is preload and afterload dependent - analogous to heart

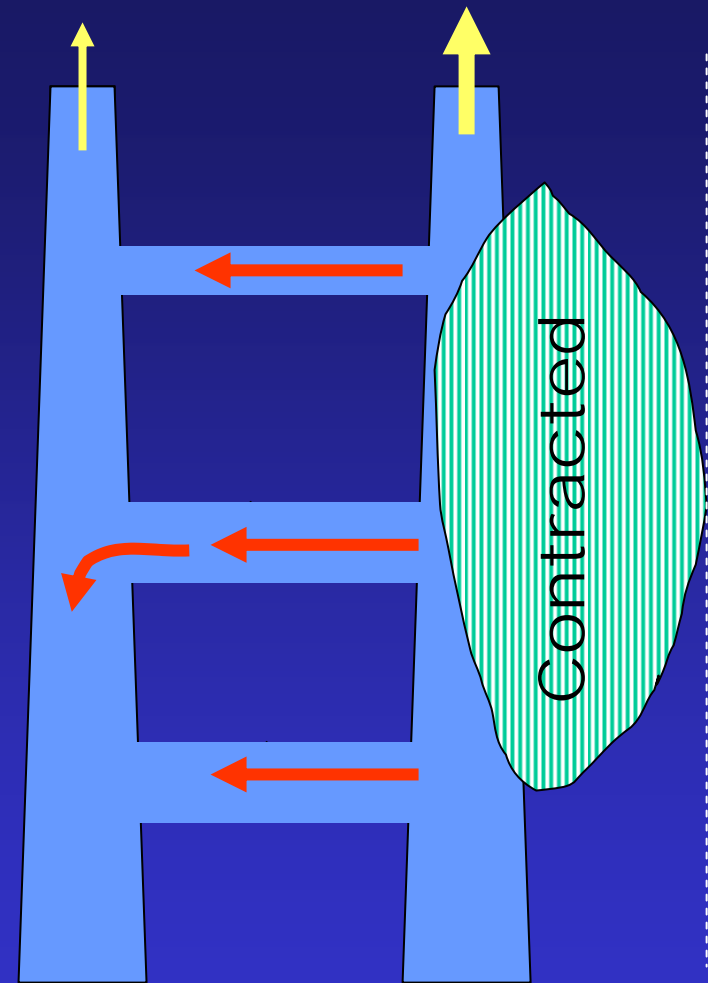
# Calf Muscle Pump and Normal Valves



# Calf Muscle Pump and Valve Dysfunction

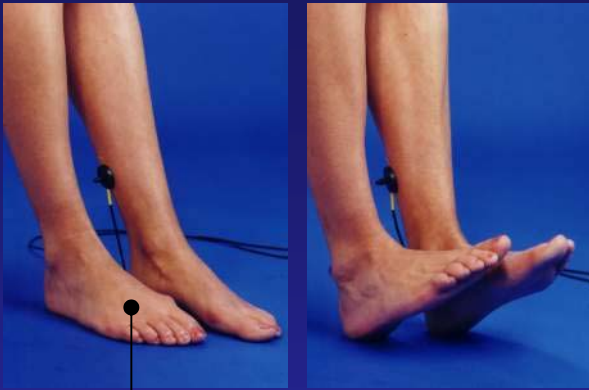


**Resting Venous Pressure  
INCREASED**



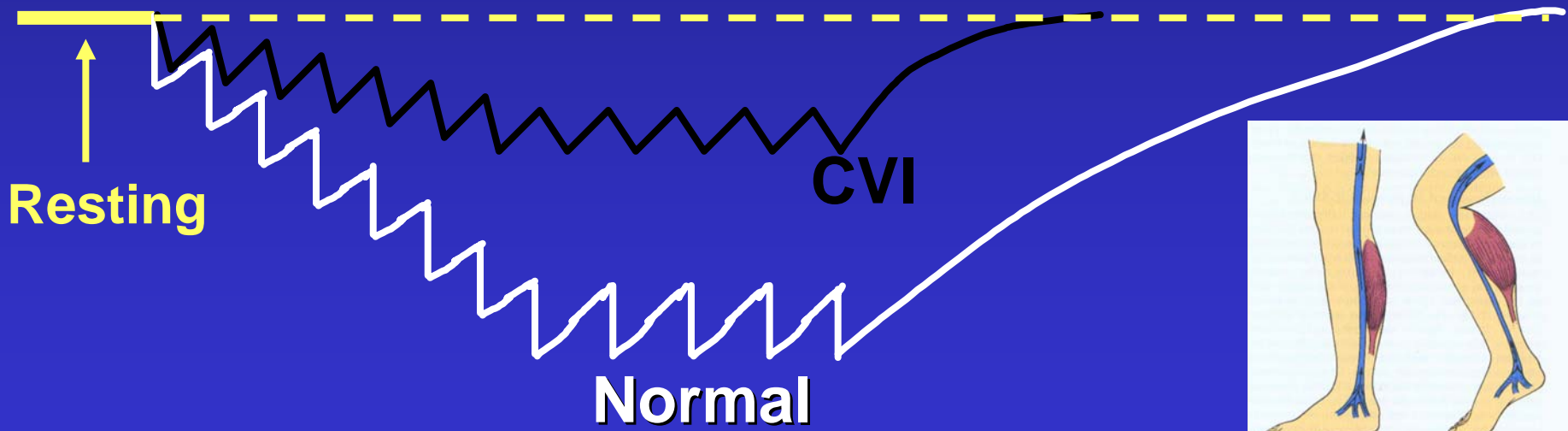
- High pressure transmitted to Superficial Veins
- Pump Efficiency Reduced

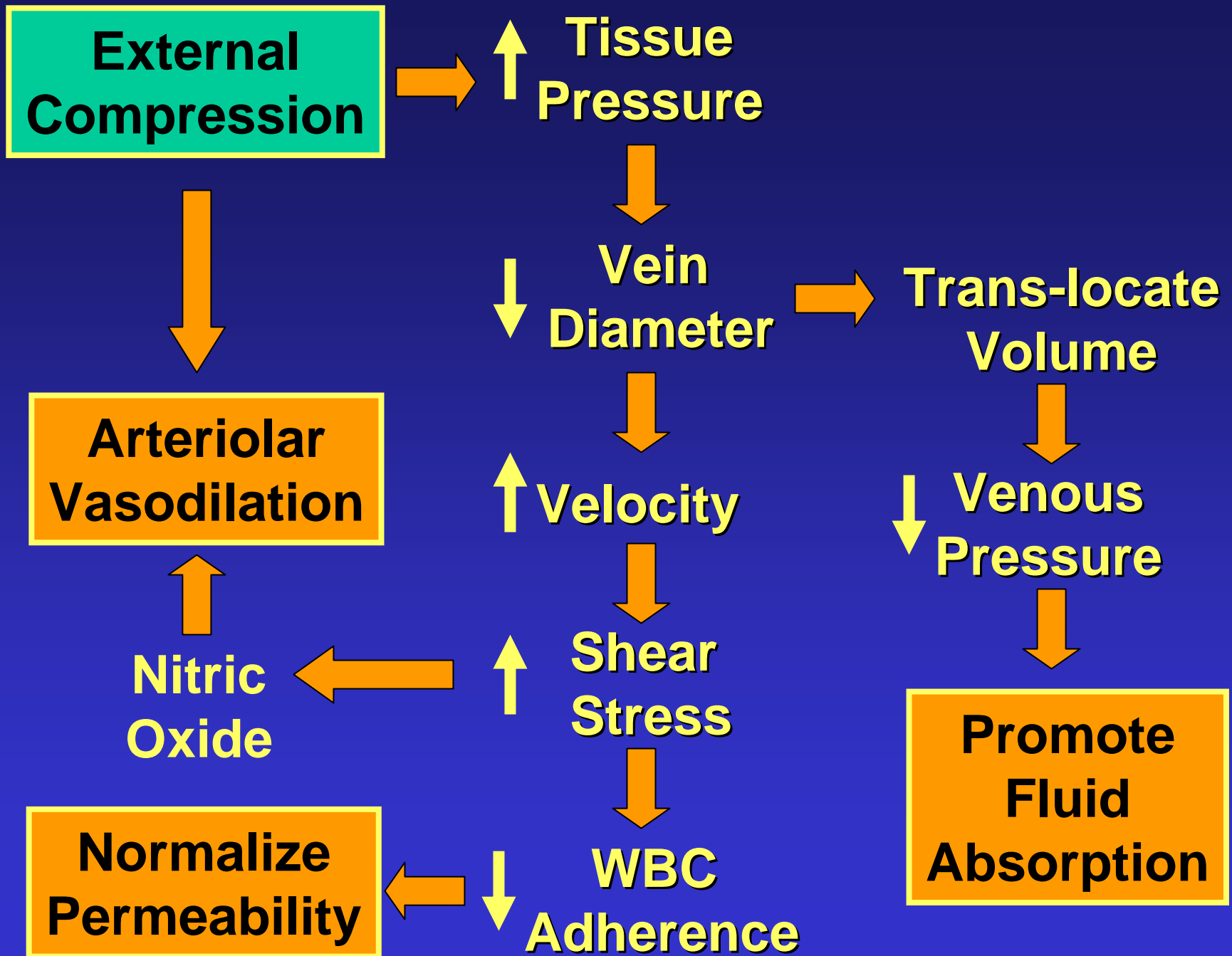
# Venous Valve Dysfunction



**Chronic venous hypertension due to  
Chronic venous insufficiency (CVI)  
predisposes to developing venous ulcers  
Increased Ambulatory Venous Pressure**

**Venous  
Pressure**

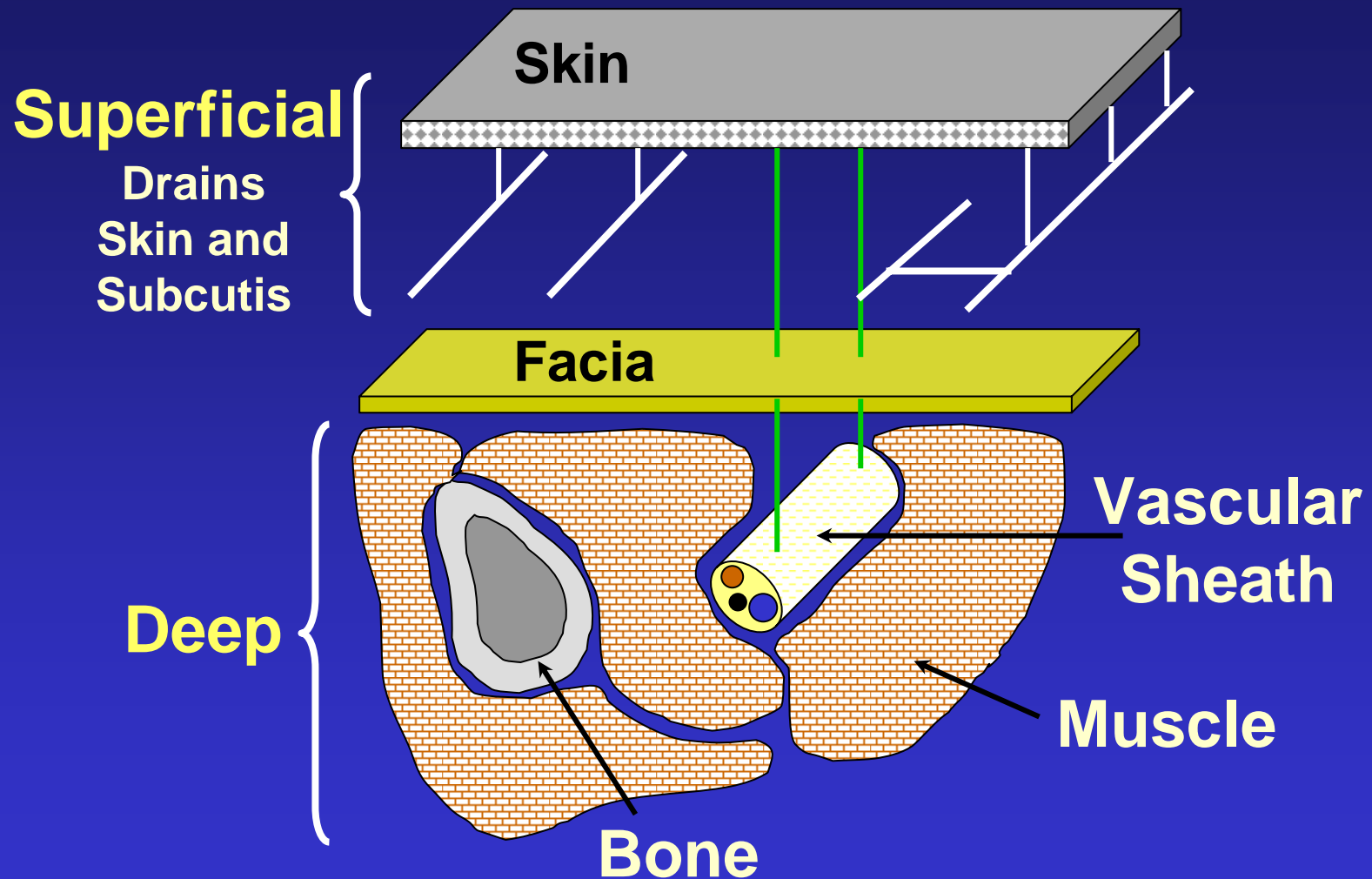




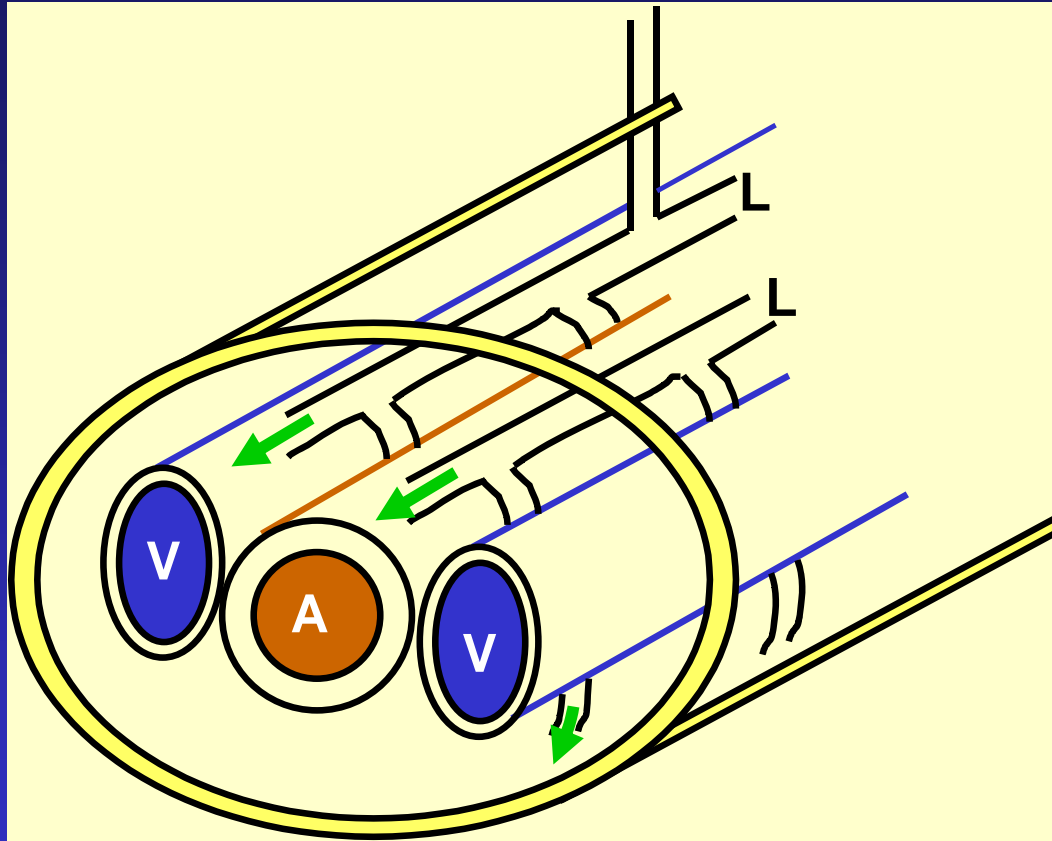
# Types of Compression

- **Bandage** → { **Short-Stretch**  
**Long -Stretch**
- **Bandage-like** → **Short-Stretch**
- **Pumps** → **Dynamic**
- **Stockings** → { **Prevention**  
**Maintenance**

# Arrangement



# Vascular Sheath



**Arterial Pulsations Can Mechanically Augment Lymph Transport**

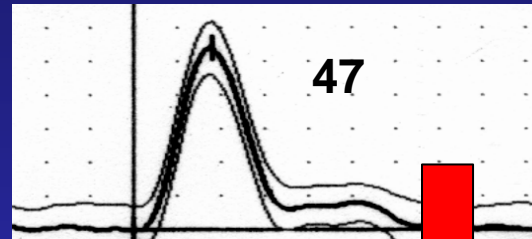
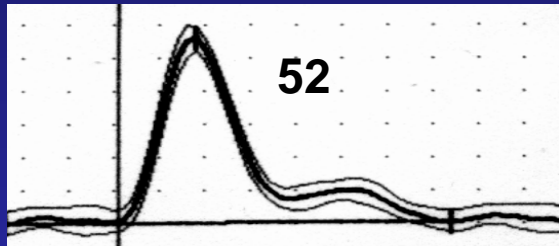
# Arterial Flow Pulses

Below Knee Blood Flow via Nuclear Magnetic Resonance

**Control Leg**

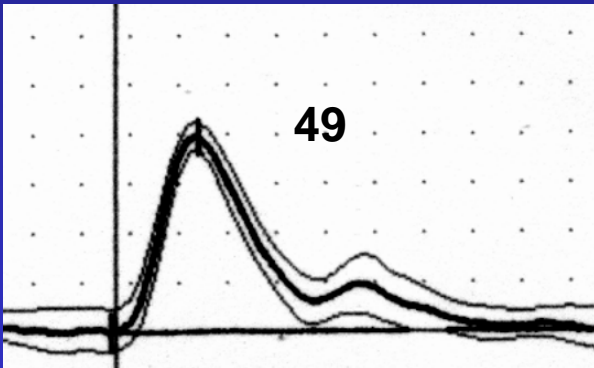
**Treated Leg**

ml/min



**Before  
Bandage**

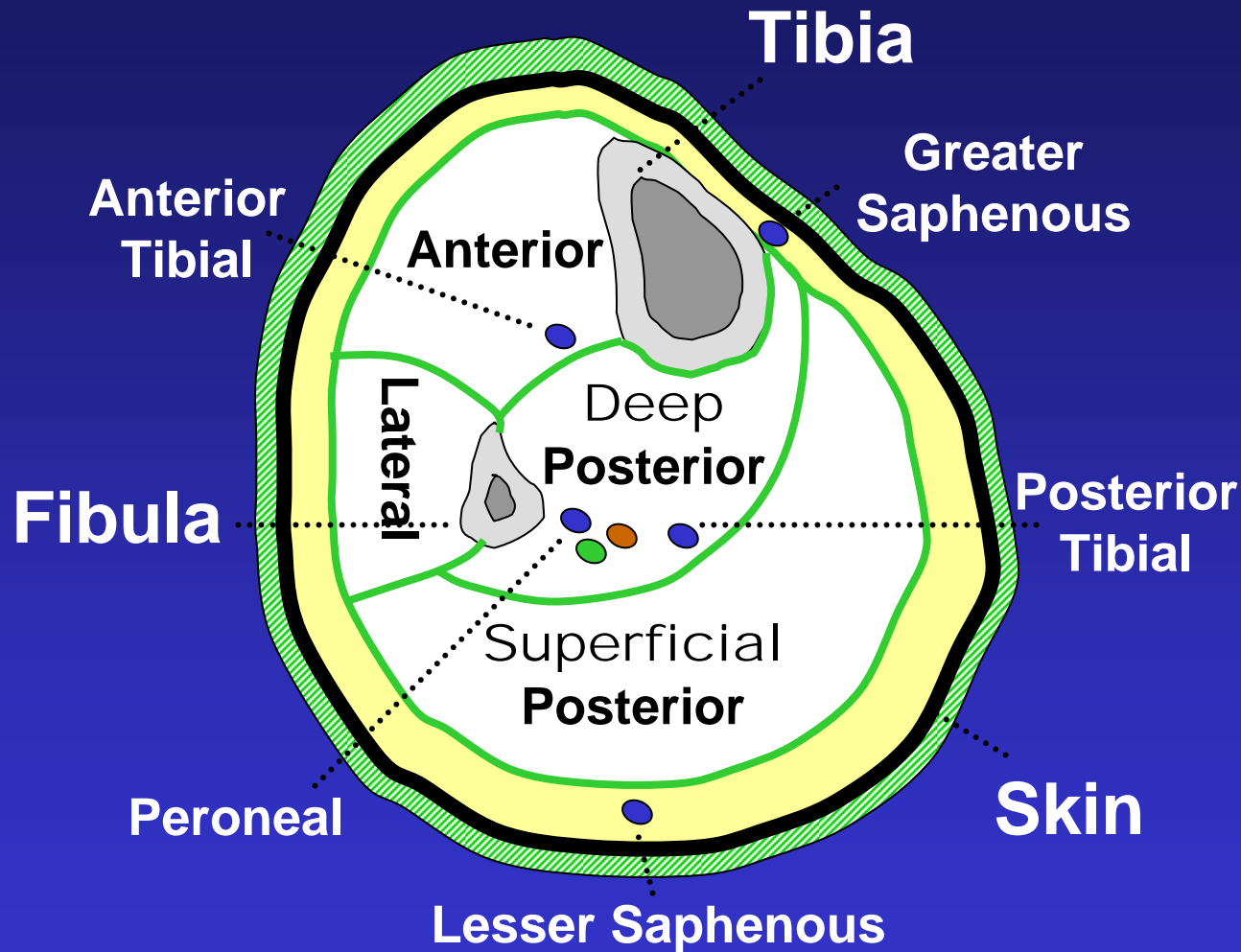
ml/min



**With  
Bandage**

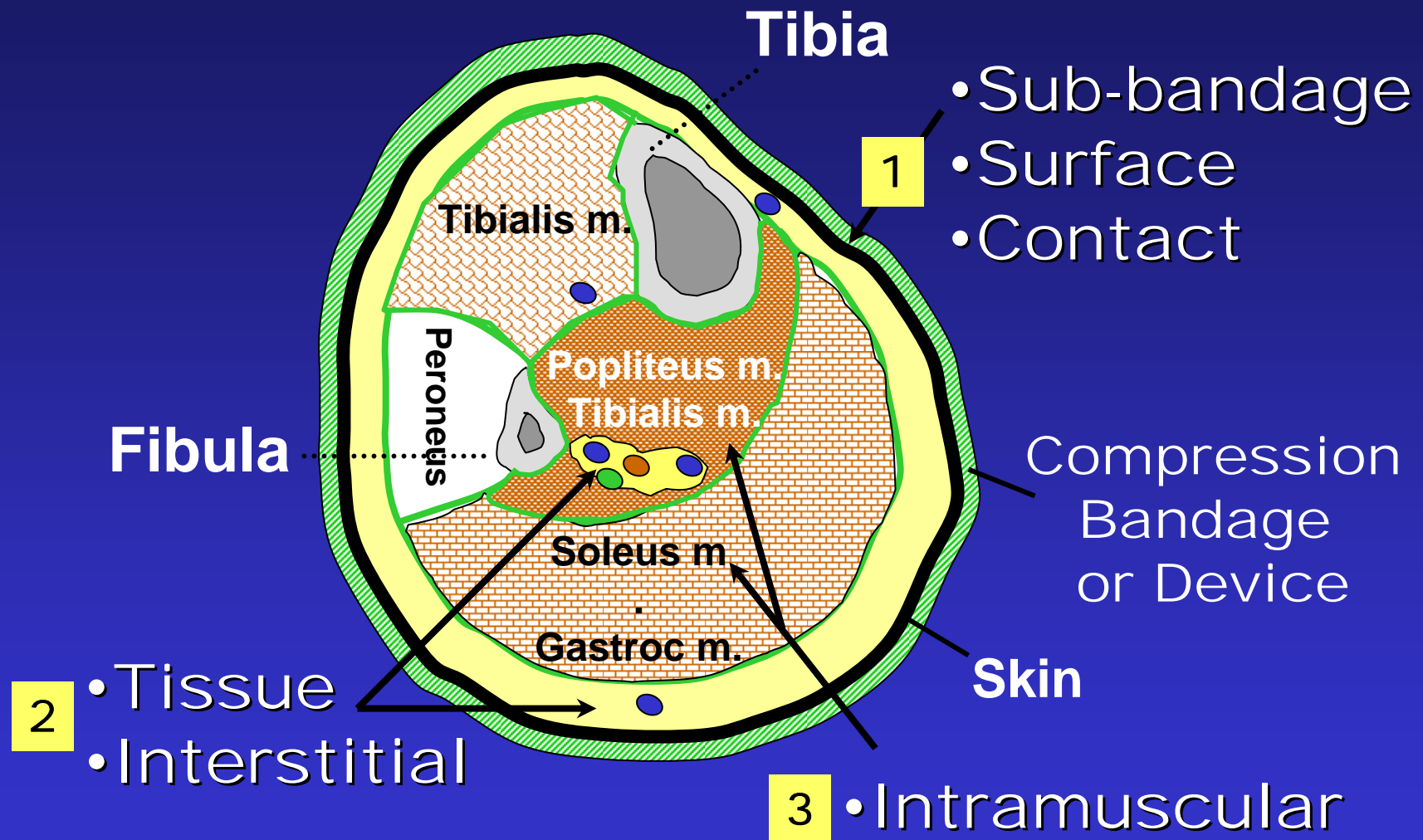
**Increased pulses  
likely augment  
Lymph/venous  
transport**

# Compartments



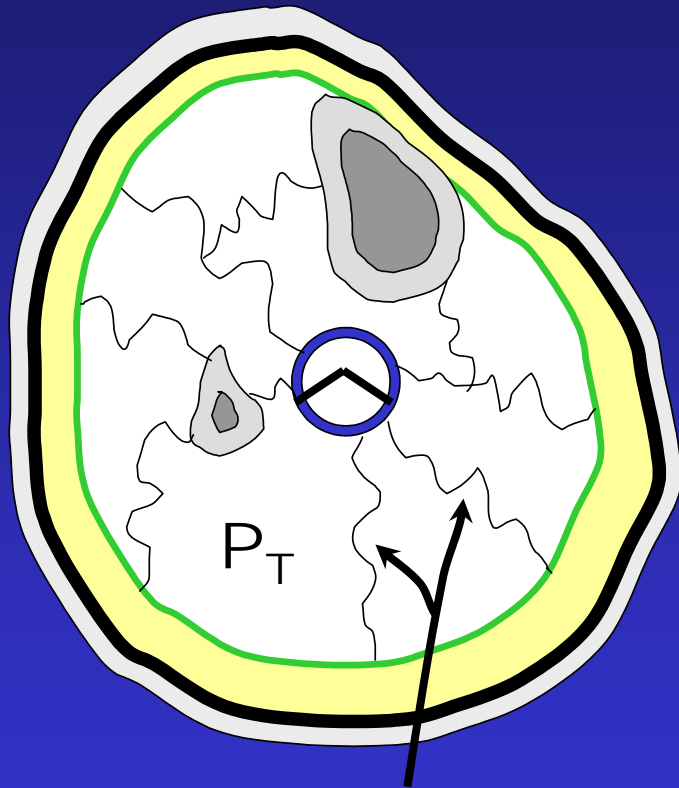
# Want Therapy to Affect Superficial and Deep

# Pressures of Interest

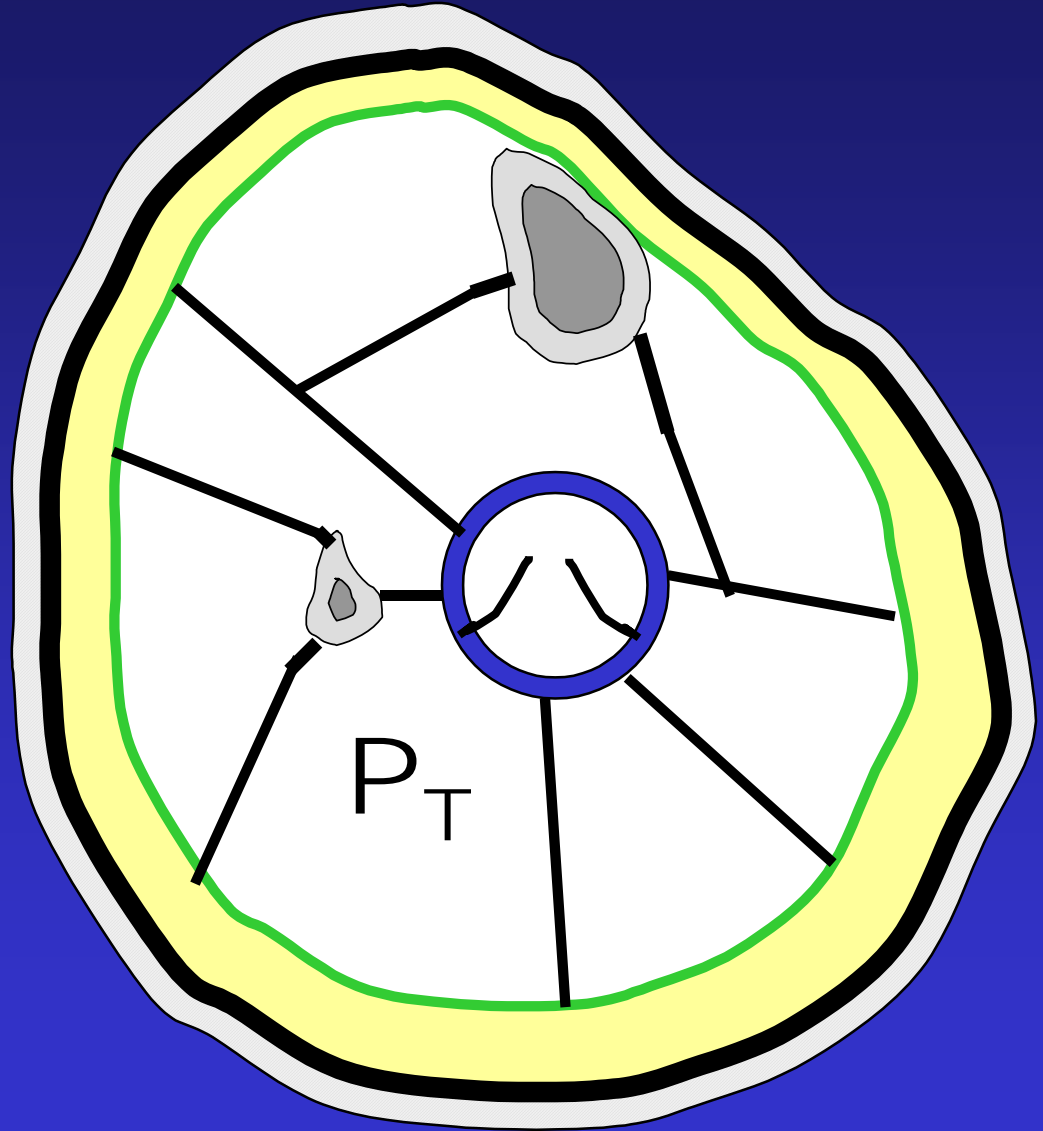


# Edema and Tissue Pressure

## Normal



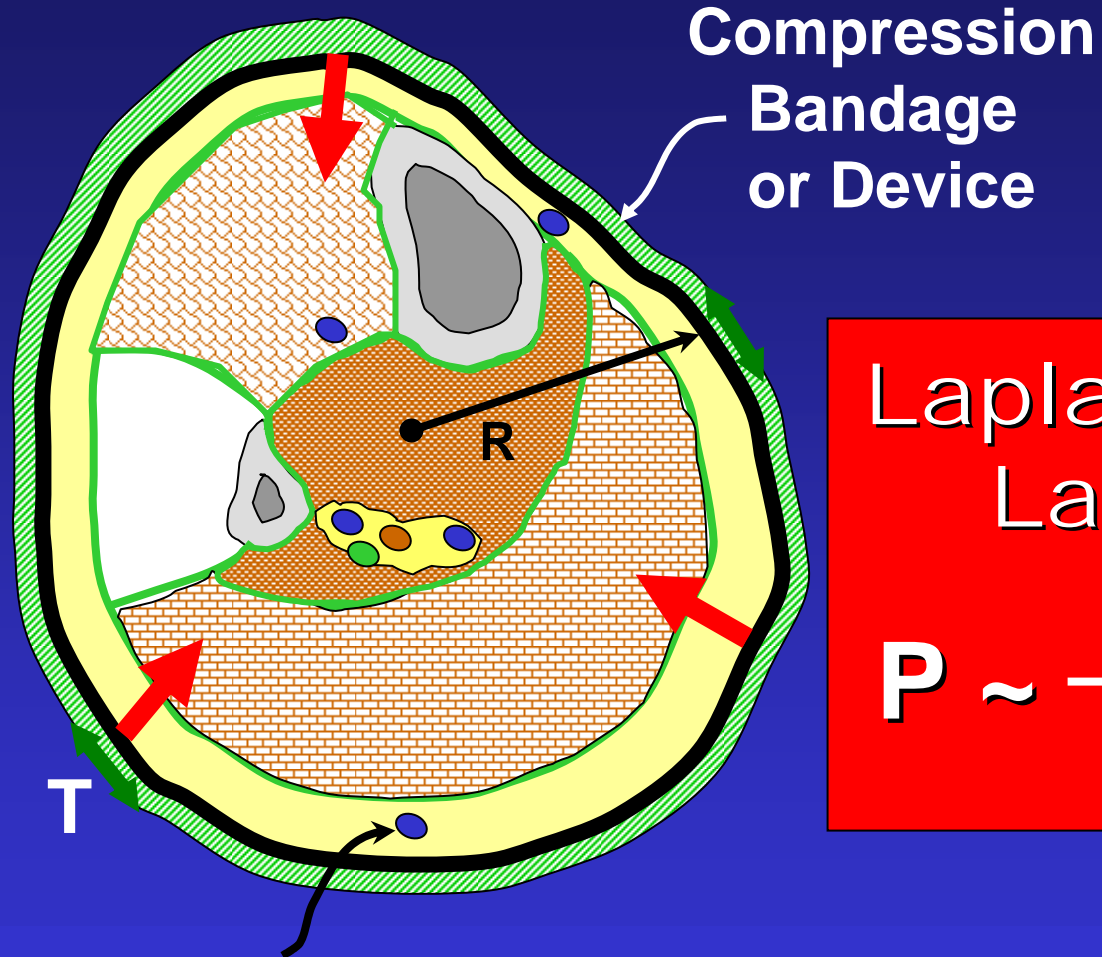
Loose Fibrous  
Trabeculae



# Resting (Static) Pressure

Muscles  
Relaxed

Pressure due  
to bandage  
tension (T)  
projecting  
an inward  
radial  
pressure (P)



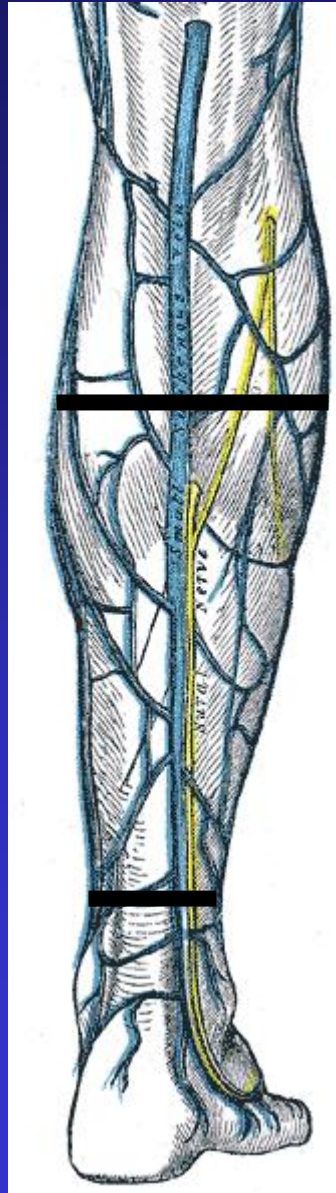
Laplace's  
Law

$$P \sim \frac{T}{R}$$

Superficial vessels affected the most

# Pressure Gradient Concept

$$P \sim \frac{T}{R}$$



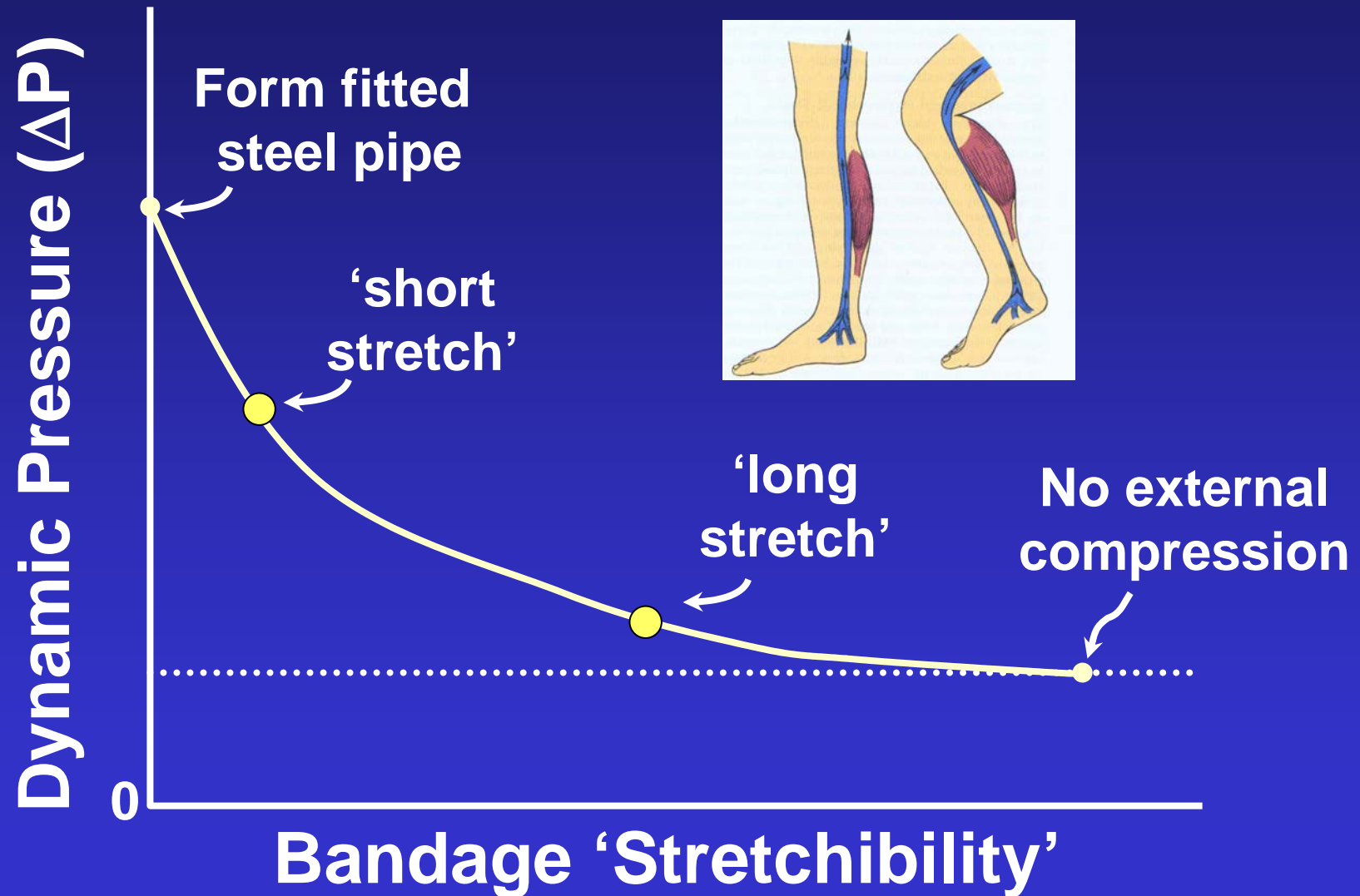
Compression Applied  
at Constant Tension

Increasing R  
Decreasing P

Mimics Normal  
Intravascular  
Pressure  
Gradient

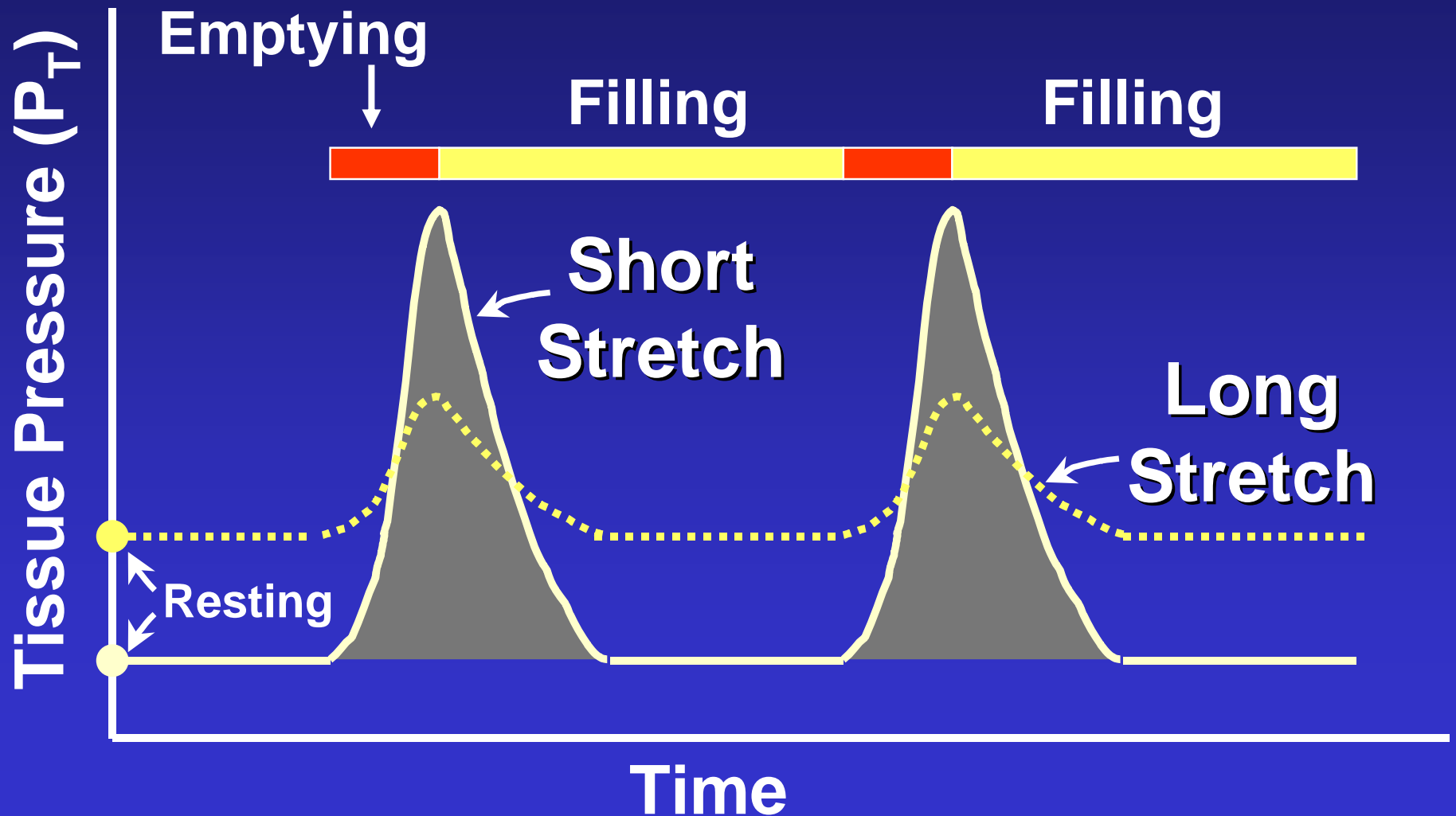


# Dynamic Pressure Depends on Bandage Material Features



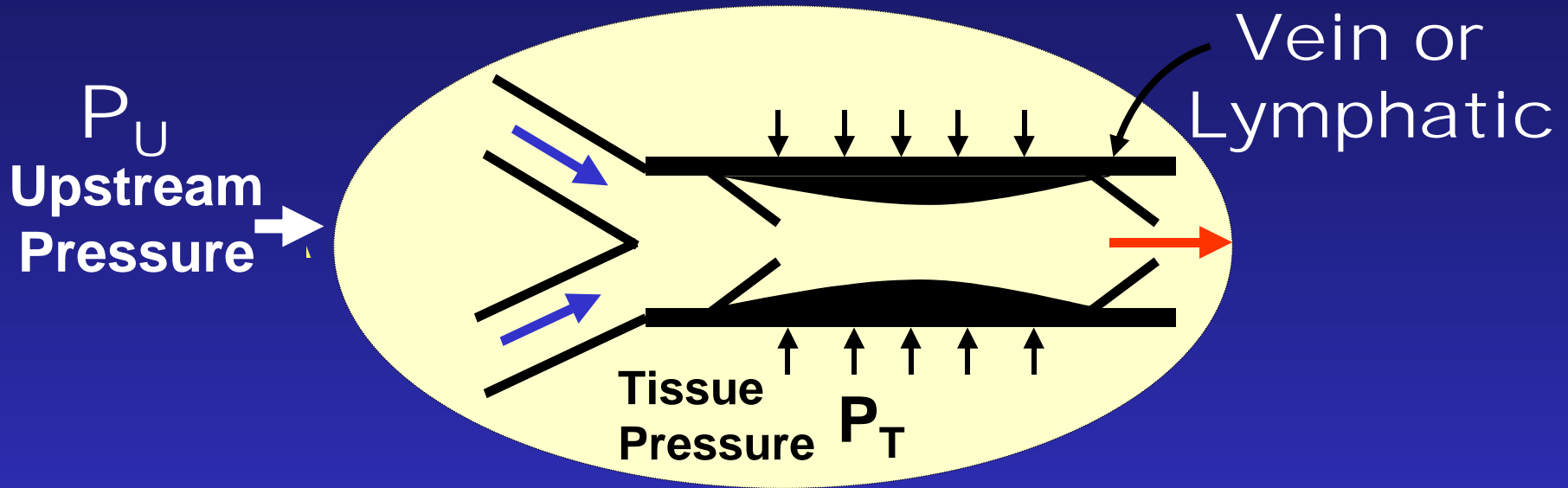
# Working vs. Resting Pressures

## Role of Compression Material



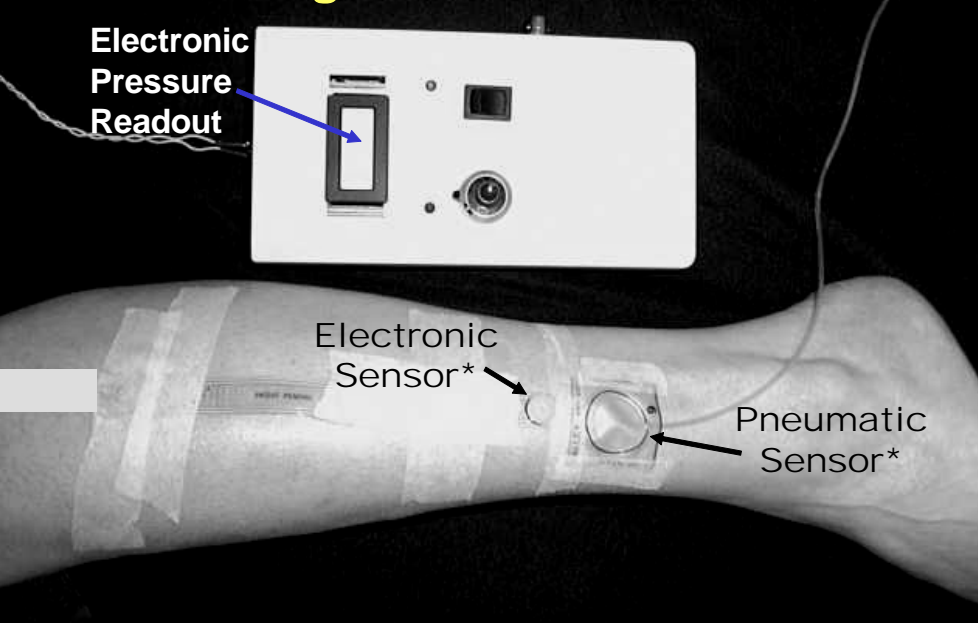
# Overall Impact of Compression

Depends on both working and resting pressures



- Filling: Inflow  $\sim P_U - P_T$
- Emptying: Outflow  $\sim \Delta V \sim \Delta P_T$
- Best: Adequate resting  $P_T$  and High  $\Delta P_T$

## Sub-Bandage Pressure Measurements



**Compression set at various static levels to compare dynamic sub-bandage pressures achieved with different bandages during calf muscle contraction and relaxation**

\*Pneumatic sensor: Talley Oxford Pressure Monitor

\*Electronic Sensor: <http://bioscience-research.net>

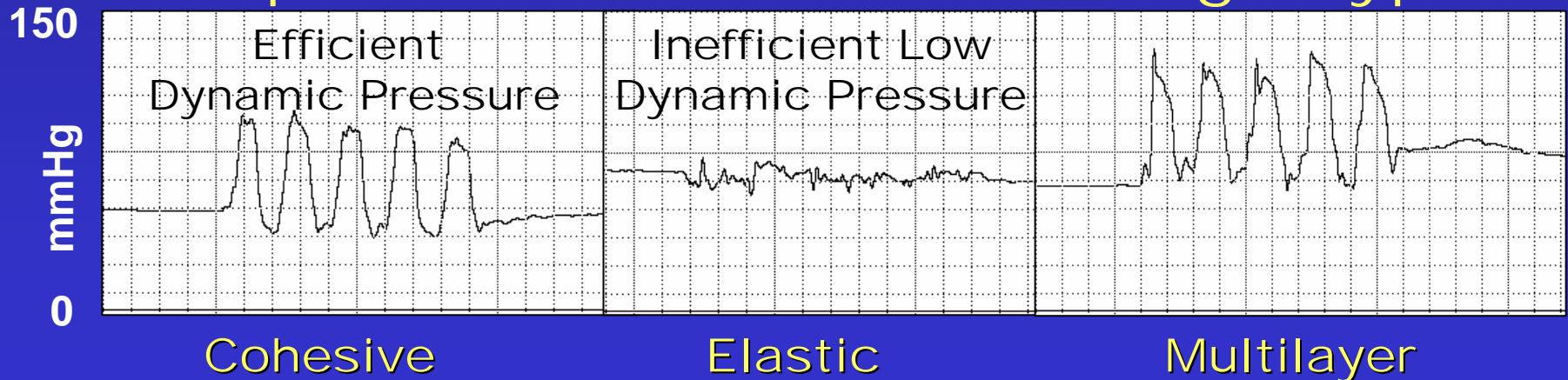
# Dynamic (Working) Pressures

## Static Pressures Set by Compression



Dynamic pressures via calf muscle contraction

## Comparison of Different Bandage Types



# Multiple Choice Questions

1. According to Laplace's law, if a limb is bandaged with constant tension, then the contact pressure experienced by the limb will be:
  - a) greater where the limb is widest
  - b) greater where the limb is narrowest\*
  - c) equal at all sites since the tension is constant
  - d) least over areas of bony prominence such as the malleolus
2. A short-stretch bandage, as compared to a long-stretch:
  - a) results in a greater resting pressure
  - b) affects the deep vessels more than the superficial vessels
  - c) results in a greater working pressure\*
  - d) has a greater effect on underlying blood vessels at rest
3. A short-stretch bandage provides more efficient venous and lymphatic filling and emptying because it produces:
  - a) greater working pressure and greater resting pressure
  - b) reduced working pressure and reduced resting pressure
  - c) greater working pressure and reduced resting pressure\*
  - d) reduced working pressure and greater resting pressure

## References

1. Mayrovitz HN, Larsen PB. Effects of compression bandaging on leg pulsatile blood flow. *Clinical Physiology* 1997;17:105-17
2. Mayrovitz HN . Compression-Induced pulsatile blood flow changes in human legs. *Clinical Physiology*, 1997;18:117-24.
3. Mayrovitz HN, Delgado M., Smith J. Compression bandaging effects lower extremity peripheral and sub- bandage skin blood perfusion. *Wounds* 1997;9:146-52.4.
4. Mayrovitz HN, Sims N (2003) Effects of ankle-to-knee external pressures on skin blood perfusion in the compressed leg and non-compressed foot. *Adv Skin Wound Care* 2003;16:198-202