We are Leading the Charge to Keep Hull Walking – Emma Hardy MP

This country is facing a crisis in vascular disease made worse by the effects of the Covid pandemic. However, there is a potential answer in the recommendations of the National Wound Care Strategy Programme, being implemented in places like Hull University Teaching Hospitals Trust, but for it to succeed it needs the full commitment and backing of government.

When I was younger my neighbour suffered from vascular disease, although I didn't understand at the time. The course of their disease meant an amputation and a life curtailed by pain and disability. I grew up as witness not only to their suffering, but to that of the loved ones and family around them. These memories came rushing back two years ago when I was visiting Hull Royal Infirmary and meeting the vascular service staff, patients, and their families. Suddenly I was reliving this experience through their eyes, and through the eyes of the medical staff who treat this awful disease. The effect on me was immediate and profound.

I learnt that the disease is caused by either a build-up of fatty deposits in people's arteries or leaky valves in the legs (or a combination of both) which interrupt the flow of blood around the body. Fatty deposits can affect any organ, but when this happens in the arteries to the legs, the restricted blood-flow can result in intermittent pain, muscle wastage, crippling untreatable pain and tissue death. The most severe form of the disease comes after the tissues have died resulting in foot and leg ulceration, threatening the life of the sufferer. If they do not receive successful treatment to restore blood flow and save their leg, they not only lose it, but face worse survival rates than people with heart failure, stroke, and most cancers.

I was completely unprepared for the scale and the severity of the disease in the UK. Nor was I expecting to hear of the lack of investment in treatment alongside the huge disparities in outcomes depending on where you lived. The General Election was announced shortly after my visit, but the experiences of that day haunted me. Particularly the words of a surgeon, as he showed me images of foot ulcers, that "time is tissue"; that the development of a foot ulcer from something that appears to be small and trivial into something that requires amputation, can be as short as 48 hours.

Many who are not at risk of an amputation must still live with wounds that struggle to heal on their own. Research suggests that around 730,000 wounds of the leg and feet occur each year in the UK. These wounds can be incredibly painful and debilitating, to the point that the person is unable to walk properly and struggles to cope with everyday activities, such as going to the shop or meeting with friends.

Once Parliament reconvened after the election, I joined the All-Party Parliamentary Group on Vascular and Venous Disease and was appointed Chair. As a result, I have had the privilege to meet some of the brightest clinicians and researchers working to revolutionise the way we care for people with these health conditions. Some of this innovative work is taking place right here in Hull.

The National Wound Care Strategy Programme is an initiative to improve the care of wounds, including those on legs and feet. I recently met with the passionate Hull Royal Infirmary and City Health Care Partnership teams who were awarded the opportunity to lead the development of this innovative programme with a national pilot site in Hull. They described the work required to re-organise and integrate the care system to deliver better outcomes for patients. The aim is to make it as easy as possible for people with these health issues to access the right care as soon as possible and the results have been extremely encouraging.

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Nurses report that patients' wounds are healing much better than they did before, and 100% of those treated have rated the new service as "good" or "very good". I'm heartened both by the positive impact this programme has had on patients, and by the fact that Hull is at the epicentre of this national revolution in healthcare.

Although the new systems are having positive effects, the teams are battling with a severe staffing crisis, particularly in community nursing. The Government needs to develop a comprehensive workforce plan to ensure our local NHS services in Hull can meet people's needs.

Vascular disease is a prime example of how investing in prevention and prompt treatment prevents chronic long-term conditions that ultimately cost far more, both in monetary terms and in human suffering. The cost of wound management in the NHS currently stands at a staggering £8.3 billion a year and the government must understand that if they provide the necessary resources now, our hardworking health professionals can make a real and profound difference to the futures of tens of thousands of people and reduce long-term financial pressures.

Emma Hardy, MP for Hull West and Hessle

Chair of the All-Party Parliamentary Group on Vascular and Venous Disease