

3M™ Coban™ 2 Layer Compression Systems

Engineered for comfort. Designed for real life.

Compression Bandaging FAQ



General Advice

Are there any warning signs associated with compression bandaging?

Yes, if you experience any of the following signs or symptoms please contact your healthcare provider straight away, do not delay.

- Pain or excessive tightness
- Your fingers or toes are blue or white
- Any tingling or numbness
- Excessive itching and/or a rash

What type of food should I eat?

Eating a balanced diet is important, including consuming starchy food such as bread, pasta and rice. Eating fruit and vegetables helps provide essential vitamins. Meat, fish and eggs provide protein and lastly, dairy products such as milk and cheese are vital to a healthy diet.

Maintaining a healthy weight is good for both conditions as it helps with mobility and reduces stress on joints.

Contact your healthcare provider for advice.

3M™ Coban™ 2 Layer Compression System

Compression bandaging



	Lymphedema patients	Venous leg ulcer patients
Why am I wearing a bandage? Your healthcare provider has undertaken a full assessment and has prescribed a compression bandage.	Patients with lymphedema usually wear compression bandages to help reduce the swelling in their limbs and alleviate the symptoms of heaviness and tightness.	Patients with venous leg ulcers benefit from compression as it helps reduce swelling, supports the veins, improves blood flow and helps to heal venous leg ulcers.
How long will I need to wear a bandage for?	Lymphedema patients, undergoing an intensive period of bandaging, will differ in treatment time depending on the clinic that they attend. It is normally in the range of between 2–6 weeks.	Venous leg ulcer patients will wear their bandages until the leg ulcer has healed and then for 2–4 weeks post healing. Average healing rates tend to be between 8–12 weeks. However, larger wounds and those that have been present for months or years may take longer to heal.
How often should the bandaging be changed?	In lymphedema, the Coban™ 2 Layer Compression System is changed twice a week, as this has been found to be the most beneficial in terms of reducing swelling.	In venous leg ulcer patients the bandaging is changed weekly. Nurses may elect to bandage more frequently if there is excessive leakage from the wound or presence of infection. There is no evidence to suggest that more frequent bandaging increases healing rates.
Is exercise important when wearing compression bandaging?	Exercise is particularly important for patients with lymphedema. Muscular movement helps move lymph fluid and decreases swelling. Walking, swimming and cycling are all good for overall fitness. Specific exercises for chronic leg edema are available at 3M.ca/Lymphedema .	Patients with venous ulcers are encouraged to walk in order to activate the calf muscles. This aids blood flow back to the heart and helps heal leg ulcers. Even a little walking around the home and garden can be beneficial. Chair exercises such as flexing the feet up and down at the ankle and rotating the feet can also help. This needs to be done regularly throughout the day.
Will I always need to wear some form of compression garment or hosiery?	Yes. After bandaging, most lymphedema patients are fitted for hosiery or a garment that continues to maintain the fluid loss. The benefit of these is that they can be removed in order to bathe.	Yes. Once the ulcer has healed, you will be fitted with a compression stocking/sock. This will continue to provide support to your veins and reduce the risk of an ulcer reoccurring.



Comfort



Simple application



Increased mobility

To learn more about Coban™ 2 Layer Compression Systems and to hear what other patients say, please visit 3M.ca/Lymphedema or 3M.ca/VenousLegUlcers.



Available in Canada from

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