

Plastic Surgery Unit

Skin Graft to the leg

Information leaflet for patients with a split skin graft (SSG) to the leg

Why do I need a skin graft?

You may have a skin wound as a result of an injury or burn, a severe skin infection or surgery to remove a lesion caused by skin cancer. If the area is small and the skin nearby is loose, the wound can be closed by bringing the edges together (direct closure). If the wound cannot be closed together or the wound is large, then the wound can be repaired with a skin graft.

What is a skin graft?

Skin grafting is a surgical procedure in which a shaving of healthy skin is completely removed from another part of the body (donor site) and placed over the wound where the lesion was present (graft site).

The graft heals by taking up a blood supply from the base of the wound which allows the grafted skin to survive. This process usually takes about five days. The main advantage of a skin graft is that it is a relatively simple procedure and can easily provide cover for larger wounds.

Risks/Complications

The skin graft may not take. This may require more surgery.

- Blood and fluid may build up under the graft and may need to be removed.
- There is a risk of infection. This may lead to partial or complete loss of



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the skin graft.

- Sometimes grafts fail. It is important to take care of the graft during the first two weeks to reduce the chance of it failing.
- **Do not smoke.** Smoking inhibits the growth of blood vessels, which will slow the process of taking up a blood supply.
- There may be raised scars and/or poor cosmetic appearance.
- The grafted area looks a bit like a patchwork to start with and may be depressed. It is never exactly the same as the surrounding 'normal' skin, although the appearance will improve with time.

What will my graft look like?

Early on the graft will appear reddish / purple and indented compared to the surrounding skin. However, the graft usually fades quite quickly and any indentation will often fill out to some extent over a period of many months. So the initial appearance should not cause alarm. It can take up to 18 months for a scar to 'mature', usually leaving a pale, soft, flat and supple surface.

When you go home

Take it easy for two weeks, building up slowly into your 'normal' routine. Do not exert your grafted area.

Depending on where your graft is, how big it is and what type of job you do you may need to take time off work, two weeks or more. Exercise that might stretch or injure the graft should be avoided for 3 – 4 weeks.

Long term care

- Use a non-perfumed moisturising cream such as E45 or Nivea two or three times a day on both the grafted site and the donor site for three months or longer if the area remains dry.
- Protect the grafted area and the donor site from direct exposure to sunlight. Keep it covered for the first year and then protect it with a sun block thereafter.
- Ask your surgeon about camouflage make-up if you are concerned about the appearance of the graft.

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- Expect skin discolouration at both the graft and the donor site. This will gradually improve over the following 9 to 12 months.

After the surgery

The graft may be stapled, stitched or glued in place. These techniques depend on the patient, the size of the graft and the area to which it is applied.

Do not disturb the dressing yourself. Please keep the dressings as dry as possible (unless you are advised otherwise).

You will have a padded dressing on the leg wound. This stays in place for five days, after which the skin graft will be looked at and assessed. The surgeon will arrange for the dressing to be removed at the plastic surgery dressing clinic in five to eight days' time.

The graft will then be redressed regularly until healed. The time varies from patient to patient but is usually about two weeks. However, this may be longer.

Depending on your individual circumstances you will be kept on bed rest for between 2 and 10 days. This is very important for the healing of your skin graft. Once allowed out of bed you may be given a support bandage to wear. This should be worn during the day but can be removed at night.

Once at home you should continue to rest your leg. You may gradually increase your activity but should not stand still – either walk short distances or sit with your leg up on a stool.

The donor site dressing is not usually changed for two weeks. It heals itself, as the skin graft is just a shaving of skin from that area. Occasionally the donor site is stubborn about healing, and needs repeated dressings over many weeks.

You may need to take painkillers such as paracetamol at regular intervals, but do not exceed the stated dose of no more than 8 tablets in 24 hours. The donor site often produces more discomfort than the grafted area.

Patient Information

Contact the hospital if there is severe or throbbing pain, bleeding or unpleasant smelling discharge in either the grafted area or the donor site.

Further information

If you have any questions about the service or your treatment, please contact:

Plastic Dressing Clinic: Tel. 024 7696 6474

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact us on 024 7696 5225 and we will do our best to meet your needs

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Document History

Department:	Plastics
Contact:	25225
Updated:	July 2022
Review:	July 2024
Version:	6.3
Reference:	HIC/LFT/329/07