

Pressure ulcers

Prevention and management



Information leaflet for patients and their carers

What is a pressure ulcer?

Pressure ulcers, also known as bed sores or pressure sores, are areas of damage to the skin and underlying tissue.



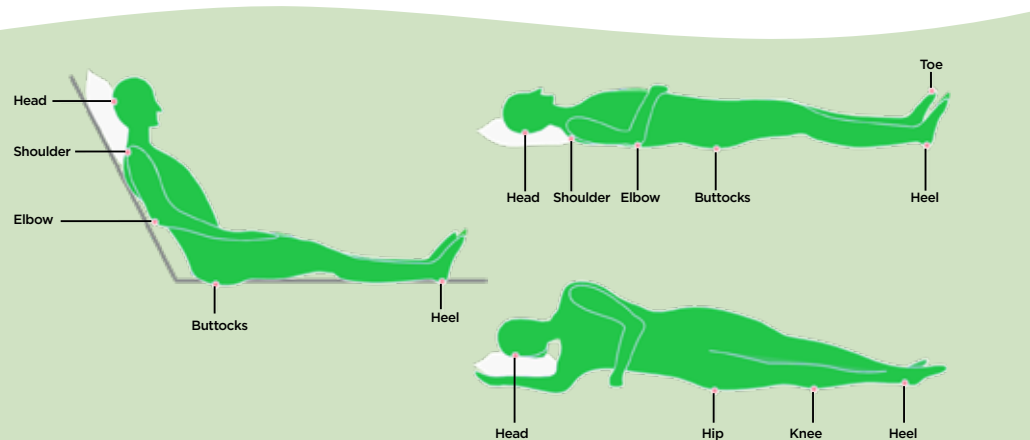
What causes a pressure ulcer?

Skin damage results from the weight of the body pressing down on an area of skin for too long without relief. Lying in one position for too long can cause this. This reduces blood supply to the area which may appear as a red area, blister or an open wound.

Shearing force can also cause skin damage. This is when layers of skin are forced to slide over one another, for example, when you slide down or are pulled up in a bed or chair.

What parts of the body can get a pressure ulcer?

Pressure ulcers can develop anywhere on the body but are mostly found over bony areas such as heels, elbows, hips, bottom, spine and ankles.



Who is most at risk of developing pressure ulcers?

You may be at risk of developing pressure ulcers for a number of reasons including:

- Difficulty changing position and poor mobility or breathlessness
- Poor circulation, vascular disease, diabetes or heavy smoking may affect circulation
- Reduced body sensation. Some conditions (e.g. diabetes, strokes, spinal injuries) may reduce sensitivity to discomfort or pain
- Poor nutritional status/reduced appetite and weight loss
- Presence of moisture. Urine, faeces and sweat can irritate the skin, causing it to break down more easily
- Certain medication can affect the integrity of skin (e.g. steroids)
- Have a history of pressure ulcers

Pressure ulcers towards end of life

People living with a terminal illness or at the end of life are at risk of developing pressure ulcers because they may not be moving around or eating and drinking as much.

Incontinence can damage the skin, making it harder to keep skin dry and the skin is less able to repair itself.

There are things that can be done to help reduce this risk and our staff can also help people with pressure ulcers to manage their symptoms to improve their comfort and quality of life.

If a pressure ulcer develops towards the end of life, the focus of treatment will be more about making sure the person is comfortable, rather than healing the pressure ulcer. Nurses can show family, friends or carers how to care for them in a way that protects their skin.

What you can do to help reduce the risk of pressure damage

Keep moving

Changing your position regularly, whether you are in a bed or in a chair, helps relieve pressure. If you are in bed, try changing sides regularly, sit up slightly and use the flat of your foot and not your heel to push you up the bed. If you have difficulty moving or changing your position alone, your carer or nurse will be able to help you. We appreciate that you may not wish to be repositioned regularly, but it is very important to do this to reduce the possibility of pressure damage occurring.

Nutrition

Eating a nutritious diet will help keep your skin in good condition and also help you to avoid pressure ulcers. Try to eat regular well-balanced meals.

We understand that you may not feel like eating or drinking but if you are able to this would be beneficial.

Skin inspection

If you are able to, check your skin for signs of early damage as this will allow action to be taken to prevent a pressure ulcer from developing. Be aware of your skin's normal colour, texture and temperature. Always check areas you lie on or ask others to check for you.

In the inpatient unit, the nurses will ask permission to check your skin on a regular basis.

Skin care

Keep skin clean and dry. Wash skin daily. If your skin requires more frequent washing, for example due to incontinence, use a soap substitute to prevent stripping the skin of its natural protective oils. In the inpatient unit, nurses can assist you in washing, if required.

Incontinence

If incontinence is a problem, this can increase your risk of pressure ulcers as your skin will be more vulnerable to damage. The use of pads to contain this may help. Seek advice from a health professional.

Early signs of a pressure ulcer are:

- A hard, swollen, warm area
- Broken skin/an open wound/blister
- Pain/discomfort

It is normal for a red mark to appear on the skin following pressure. Within 20 minutes of pressure relief this should disappear. If after 20 minutes the skin marking does not disappear this may indicate pressure damage. Those patients with darkly pigmented skin may develop a purple/blue patch.

Advice and support

We hope this leaflet will help you to recognise early signs of pressure damage, and offer a greater understanding of the steps needed to reduce the risk of pressure damage occurring. If you need any advice at any time, please contact your district nurse in the first instance or you can contact our 24-hour advice line if you are at home. If you are in IPU please speak with your nurse.

Contact numbers

24hr Advice Line: 01793 816109
(7 days a week)

Prospect@Home team: 01793 816160
(7 days a week 9am – 5pm)

March 2024

Prospect Hospice

Moormead Road, Wroughton,
Swindon, Wiltshire SN4 9BY

Telephone: **01793 813355**

Email: info@prospect-hospice.net

Visit: www.prospect-hospice.net

Follow us on social media:



Registered with
**FUNDRAISING
REGULATOR**



President: Her Majesty The Queen

Registered charity number: 280093

Company registration: 1494909

