

Information for patients and carers

Pressure Ulcer Prevention



Nursing Directorate, Corporate Division



What is a pressure ulcer?

A pressure ulcer is damage to the skin and the deeper tissue. Pressure ulcers are sometimes known as "pressure sores" or "bed sores". Pressure ulcer severity can range from a reddening of the skin to an open cavity wound with damage to the muscle and even bone.

In people with darker skin tones, it is sometimes difficult to identify early signs of pressure damage; this can be due to darker skin tones rarely showing reddening, making early detection hard to identify. It is important to look out for changes in skin tone, texture, temperature and pain.

What causes a pressure ulcer?

The most common causes of a pressure ulcer are:

- Pressure to the same area of skin that is not relieved. This cuts off the blood supply to that area, stopping nutrients and oxygen getting through. When this happens for a long period of time the skin and deeper tissues are damaged and a pressure ulcer develops
- Shearing: this is stretching and tearing between the skin layers and deeper tissue, causing damage and a pressure ulcer can develop
- Friction against the top layers of the skin can cause damage. This
 can lead to a pressure ulcer developing as the skin is more at risk

Who is at risk?

Anyone can develop a pressure ulcer. Some people are more at risk than others.

You are more at risk if you:

- Have problems moving or changing position
- Smoke. Smoking reduces the levels of oxygen in your blood. It also weakens your immune system, which increases your risk of developing pressure ulcers
- Cannot feel pain in some areas of your body, e.g., your feet
- Have poor circulation due to damage or partial blockage of blood vessels vascular insufficiency
- Have problems controlling your bladder and/or bowel
- Are seriously ill or have had major surgery
- Have a poor or reduced diet and do not drink enough water
- Have had a previous pressure ulcer
- Are over the age of 70

How can pressure ulcers be prevented?

Pressure ulcers can develop very quickly. In people who are at high risk a pressure ulcer can develop within a few hours.

One of the best ways to prevent a pressure ulcer is to reduce or relieve pressure by moving. Nurses will prompt patients about repositioning regularly usually every 2-4 hours or ask patients to stand or have a small walk to relieve pressure.

It is important that you inform the nurse or medical staff if you are reluctant to move, so that they can help to reassure you. If pain is an issue when moving, the staff can review your pain medications, pain relief can also be timed with repositioning.

Heels are highly susceptible to pressure, reducing the pressure can be achieved by placing a pillow length way down each leg with the heels hanging over the end, also a piece of equipment may be used by the nursing staff to reduce pressure to the heels.

30-degree tilt is a position that nurses may leave you in while in bed. This is achieved by placing pillows or wedges behind your back and leg, this reduces pressure to the bottom, hip, heels shoulder, ear, elbow and head. 30-degree tilt is a position where a person is not fully on their side so they can still eat, drink see relatives and interact with each other.

In hospital there are several types of mattresses that can assist in the prevention of pressure ulcers, however a mattress will not compensate for repositioning, so movement is vital. A blower box can be added to the mattress which introduces air into the mattress cells, this in turn allow the cells to move and helps to reduce the pressure to the body's bony prominences.

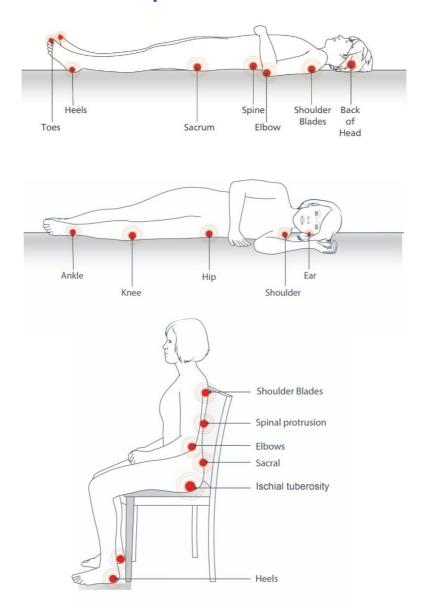
If you use a wheelchair or sit out in a chair this may also require a special seating cushion. Some of the chairs in the hospital already have pressure relieving cushions built into them. Staff may assist or prompt you to stand every 30 minutes and walk if you are able to do so to relieve pressure. While sat in a chair it is important to be aware bony areas such as elbows resting on the hard arms of a chair, if they become sore pillows can be placed underneath them or dressings maybe applied to protect the area.

If the skin is too wet a dry a barrier cream can be applied this increase in moisture can be due to incontinence or perspiration. The barrier cream will help to protect the skin. When washing it is best to use a pH balanced soap and to pat skin dry, do not rub dry. If the skin is too dry an emollient cream maybe prescribed by the medical team.

If an area starts to feel sore let the nursing staff know as soon as you notice the pain, so they can check the area for any signs of damage.

The nursing team will perform regular skin checks, usually a few times a day, this is to check if any damage is developing and signs of pressure so interventions can be put in place as soon as possible.

Common areas for pressure ulcers to occur



What can you do to help yourself?

There are some simple steps that you can do to help prevent pressure ulcers.

- Wash daily using warm water and pat dry, do not rub your skin as this can cause damage.
- Check your own skin (as much as you are able to) and alert staff if there are any signs of:
 - Red patches
 - Purple patches
 - Blisters
 - Swelling
 - Pain
 - Patches of hard skin
 - Changes to skin tone/pigments
 - · Change to the texture of the skin
 - Hot or cold areas
- Keep moving and change position regularly at least every 4 hours
- Lift your arms and legs to reduce pressure to your elbows and heel(s)
- Stop smoking. If you are a smoker, giving up is one of the most effective was of preventing a pressure ulcer
- Eat well and drink plenty of water. Not doing so leads to poor skin condition and delays wound healing. (see 'The eatwell plate' below)

The eatwell plate



Use the eatwell plate to help you get the balance right. It shows how much of what you eat should come from each food group.



Without care, pressure ulcers can become very serious. They can cause pain or mean a longer stay in hospital. Severe pressure ulcers can damage the muscle or bone making you very unwell and take a very long time to heal.

Working together we can reduce your risk of developing a pressure ulcer. Nursing staff will complete an assessment that will help them in providing you with the right equipment and care. The staff on the ward will assist you in repositioning to help prevent pressure ulcers. Both you and the nursing staff need to work as a team to help prevent pressure ulcers from occurring.

Contact details

Should you require further advice or information please contact:

Tissue Viability Team

Telephone: 01772 522655

E-mail: tissue.viability@lthtr.nhs.uk

Sources of further information

www.lancsteachinghospitals.nhs.uk www.nhs.uk www.patient.co.uk www.accessable.co.uk

National Institute for Health and Clinical Excellence (NICE). Pressure ulcer prevention, treatment and care. Information for the public. April 2014 https://www.nice.org.uk/guidance/cg179

NHS Choices. (2020). *Pressure ulcers*. (Online) Available from: https://www.nhs.uk/conditions/pressure-sores/ (Accessed 03/08/21). NHS Choices Your health, your choices. Pressure ulcers. September 2014. http://www.nhs.uk/Conditions/Pressure-ulcers/Pages/Introduction.aspx

https://www.food.gov.uk/business-guidance/the-eatwell-guide-and-resources -viewed 29/07/22

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

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If you want to stop smoking, you can also contact the Quit Squad Freephone 0800 328 6297.

Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

Gujarati:

આ માહિતીને સમજવામાં સહાયતા જોઇતી હોય તો કૃપા|કરીને પૂછો. આ માહિતી મોટા છપાણ માં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે

Romanian:

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi."

Polish^{*}

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

Punjabi:

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੀੱਚ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਹੀੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੀੱਚ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

Urdu:

دو سر ی زہانوں او ر بیڑ ی اگر آپ کو دی معلومات سمجھنے کے بےل مدد یک ضرورت ہے تو ی کی چھا بھی بہا اب اس مسکت ہے براغ میر بیان ہو ہی جہات معلومات

Arabic:

مطبو عة با حر ف كبير ة و بلغات إذا كنت تريد مساعدة في فهم هذه لمعلومات يُر جي أن تطب

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