

Preventing pressure ulcers

A patient's advice sheet

What are pressure ulcers?

- A pressure ulcer is damage to the skin and underlying tissue.
- Pressure ulcers are often referred to as pressure or bed sores.
- This can range from mild skin reddening to severe deep wounds.
- Reddening of the skin that disappears after pressure is removed is normal, and is not a pressure ulcer.

Causes:

- It is thought pressure ulcers are caused by unrelieved pressure to an area of the body. If a person slides down in a bed or chair, blood vessels can stretch and bend, causing pressure ulcers.

Common places for pressure ulcers to form:

- Over bony prominences (where bones are close to the skin) for example bottom, heels, hips, elbows, ankles, shoulders, back and the back of the head.

You are at risk of getting a pressure ulcer if:

- You have problems moving around and changing position, for example after an operation.
- You cannot feel pain, are numb from pain relief or are a diabetic with reduced sensation.
- You suffer from incontinence.
- You have a poor diet and do not drink enough water.
- You have had a pressure ulcer before.
- You are elderly.
- You are taking steroids.

What to look for:

- On light skinned people red patches on the skin that do not go away.
- On dark skinned people bluish/purplish patches on the skin that do not go away.

- Blisters or damage to the skin.
- Patches of hot skin.
- Swelling, particularly on bony areas.
- Patches of hard skin.
- Cracks, calluses, wrinkles or broken skin.

You and your nurse should inspect your skin regularly. How often this is done will depend on how mobile you are and your general health.

How to relieve or reduce pressure:

- Move around and change position as much as possible.
- Avoid sitting or lying in one position for more than two hours.
- After heart/lung surgery you will be shown how to move, not applying too much pressure through your arms.
- Extra pillows can be used for support.
- You may have been advised to keep your legs up when sitting in a chair to reduce swollen ankles. As a result of this your heels can become sore and should be moved regularly to another position.

A nurse or physiotherapist can advise you on how best to reduce pressure.

What you can do to help:

- Whilst in bed, change your position approximately every two hours.
- Whilst in bed, sheets should be flat with no creases.
- Whilst sitting, if you are able to move yourself, you should do so every 15 minutes.
- Pillows can be used to stop knees or ankles touching each other, but only put a pillow between the knees, never behind them.
- Reduce friction when moving – sliding equipment is available. Lifting or dragging is strictly forbidden.