

What is a pressure ulcer?

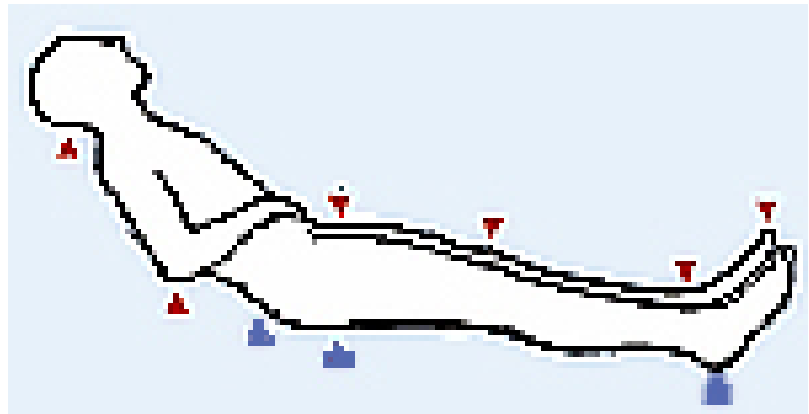
- Bed sores, pressure sores, pressure ulcers and decubitus ulcers are all terms used to describe tissue damage caused by remaining in one position too long.
- When you visit the cinema, by the end of the film (approximately two hours) you will complain of feeling 'numb'. This is the beginning of a pressure ulcer.
- The 'numb' feeling will go within a short period of time as you leave the cinema and walk away.
- If you decided to stay for another feature film, your 'numb' feeling would increase to a very uncomfortable pain, and you would be repositioning yourself in the seat to try to relieve the discomfort.
- The area that is 'numb' would now also be very red and hot to the touch (see picture 1) and would take a much longer time to recover once you stand up.
- Now you understand how a pressure ulcer begins.
- Imagine now, that you are sitting all day and you are unable to move. Your skin is squeezed hard against the bone underneath the skin. This stops your blood from feeding the skin and, starved of nourishment and oxygen, the skin in that area dies. Now you have a large, deep, painful and foul smelling pressure ulcer.



Picture 1. this would be very sore and uncomfortable

Where would I get a pressure ulcer?

- Pressure ulcers form over any of your bony areas, such as your elbow, heel, hip bone, and sacrum.
- The most common places to develop these ulcers are over the areas with blue arrows in picture 2.



Picture 2. The blue arrows show the most common areas for pressure ulcers. The red arrows show areas less likely to develop ulcers

Why would I get a pressure ulcer?

- You will only develop a pressure ulcer if you are unable to move for any reason
- Anyone who cannot move has increased risk of developing pressure ulcers if they are not eating or if they are ill with a low blood pressure.
- If you cannot move independently, you will be at much greater risk if you cannot help sliding down in a chair or bed
- You will be at very high risk if your heel is placed on the floor and you cannot move it without help
- You will be at very high risk if you have an operation and you are not provided with an appropriate mattress

How would I know if I had a pressure ulcer developing?

- If you can feel pain, then you will be aware of any pressure damage that is occurring (a little like being in the cinema too long). This pain gradually increases and acts as a warning to you.
- If you are unable to feel pain, then you may be unaware of the damage and will need to ask someone to look at your likely pressure areas to see if there is any redness.
- If you experience a 'numb bottom' that isn't relieved by changing position, pain or redness that does not go away, and you are often in one position for many hours, then you must call your Doctor or District Nurse and ask for help
- You must urgently call on your Doctor or District Nurse for help if you have any blistering over a bony prominence, or very red and hot skin. (If you have darker skin, this may show as a bluish area).
- Pressure ulcers can be very serious. Without treatment, they can damage the skin and the deeper layers of tissue under the skin.

How do I know if I am at risk of developing a pressure ulcer?

- If you become ill and you are unable to move, for any reason, then you must ask your nurse for a "Pressure ulcer risk assessment"
- Your nurse will be able to tell you if you are at risk and will provide you with a mattress and a cushion which will reduce the risk
- If you have pain in any pressure area (see picture 2)
- If you feel sore in any of the pressure areas

When will I be at most risk?

- If you are unable to move
- If you are having an epidural
- If you have diabetes and do not move much
- If you have poor blood supply to your feet
- If you have low blood pressure and are not able to move very much
- If you are constantly sliding down in a chair or bed

What can I do to help prevent a pressure ulcer?

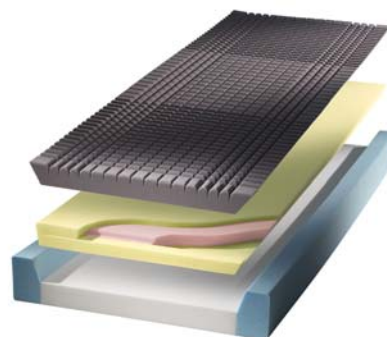
- The most important way of preventing a pressure ulcer is to be aware that it can happen so that you can work with your nurse and understand what is needed
- One of the best ways for you to help is to keep moving so either move yourself every hour or ask to be moved
- Ask your nurse or your carer to examine your pressure areas every day (see picture 2)
- Eating well and drinking enough water is important as it keeps your skin healthy and hydrated
- If you are unable to move, you **MUST** have a suitable mattress or cushion to prevent pressure damage

How do I select a suitable mattress or chair to prevent or treat pressure damage?

- The type of mattress and cushion you need is determined by the risk level you have
- A soft 'memory' foam or a 'castellated' foam is enough to prevent most pressure ulcers over a short period of time



Picture 3. Memory foam



Picture 4. Castellated foam

- If you are unable to move at all and you are ill, then you may require an air mattress that makes the movements for you (picture 5) or a static air mattress (picture 6)



Picture 5. An air mattress (and cushion) will inflate and deflate and mimic your movements



Picture 6. A static air mattress will not move but will reduce the pressure from your mattress or chair

How can I stop my skin from becoming sore when I slide in the chair or bed?

The soreness is caused by friction and shear. Friction occurs when:

- Your skin is repeatedly rubbed against a surface like a mattress, bedding or other equipment. This damages the top layer of skin and can expose the next layer of skin (exactly like when new shoes rub and you get a blister).

Shear occurs when:

- Your skin is pulled across a surface in opposite directions. Being pulled up or down the bed can cause this. Your skin may become sore and the skin may split and break.
- Friction and shear can easily be prevented with Parafricta material. Parafricta comes in the form of sheets, undergarments and booties (see pictures 7 and 8). These protect all of the areas that are at risk of shear or friction



Figure 7. The undergarments are comfortable and have been shown to be successful at preventing friction and shear



Figure 8. The booties protect the heel against friction and shear

Am I at increased risk if I have a continence problem?

- Yes. Moisture against the skin makes it very soft and easily damaged
- It would be important to protect the skin with something like 'Cavilon', which is a film that covers the skin
- The Parafricta garments would also protect the fragile skin against further damage from shear and friction
- Do not use soap on the skin, but use an emollient when you wash

Am I at increased risk if my weight is above or below normal?

- Yes. If you are overweight, you may find it more difficult to move and greater pressures will build up on your skin
- If you are underweight, you will have less fatty tissue to protect you against the pressures. There will be more bony areas that can rub against the bed or the chair.

What can I do if I develop a pressure ulcer?

- A pressure ulcer can be life threatening and so you must contact your doctor and ask if you require antibiotics
- Your nurse MUST ensure you have an appropriate mattress and chair cushion
- If you can move yourself independently, then reposition yourself every 15 to 30 minutes
- Eat well and drink plenty of water

What dressings am I likely to have on a pressure ulcer?

- There is a large variety of dressings that can be used on a pressure ulcer
- Vacuum therapy is helpful in the case of pressure ulcers as it pulls blood into the tissues and removes any bacteria
- If the pressure ulcer is black, the nurse will apply a wet dressing such as a gel or gel sheet
- The 'rule of thumb' is wet dressings on dry wounds and dry dressings on wet wounds. So, as your wound changes, your nurse will change the type of dressing on your wound
- Pressure ulcers often have a foul odour which is due to bacteria which sits in the wound. There are excellent dressings that will reduce bacteria in your wound such as honey, silver or iodine.
- Maggot therapy will sterilise a wound in 7 days and actually destroys bacteria such as MRSA