

The Myton Hospices

Patient & Carer's Guide to Preventing Pressure Ulcers



Information for
patients, families
and carers



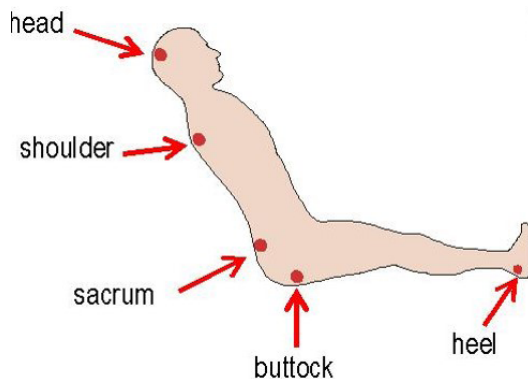
What is a Pressure Ulcer?

A pressure ulcer/bed sore is an area of the skin and underlying tissue which is damaged. This is due to lying or sitting in one position for too long without moving, or by rubbing, dragging or sliding down or across the bed, which can strip the top layers of the skin.

What is a Pressure Ulcer?

Pressure ulcers are most likely to develop over bony areas. The areas most at risk are the heels, bottom, and base of the spine, elbows, shoulders and the back of the head.

- Red or darker patches of skin which do not disappear within 1-2 hours
- Heat or cold
- Discomfort or pain
- Blistering
- Any numbness, soreness, swelling or hardening of the skin



Who is at risk?

Anyone can be at risk; however people with an increased risk of developing a pressure ulcer are those who:

- Have difficulty moving and changing their own position
- Are not eating or drinking properly
- Are in pain and therefore are reluctant to move
- Have loss or no control over their bowels or bladder causing the skin to dampen
- Are frail, elderly or weak
- Have loss of sensation to some parts of their body
- Have a serious illness or are undergoing surgery
- Have diabetes or poor circulation

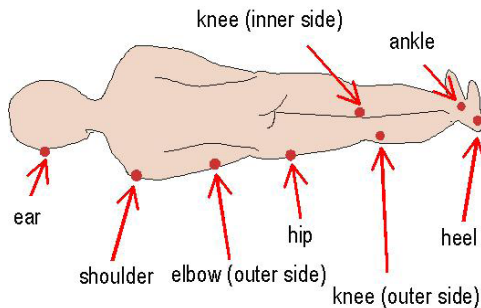
What to expect from your Health Care professional?

Assessment: within 6 hours of admission to the hospice to identify your risk of developing a pressure ulcer. Regular assessments of your skin will be made.

1. Surface: mattress and cushions will be provided, depending on your level of risk.
2. Keep Moving: Assistance with repositioning using correct equipment will be provided for immobile patients.
3. Incontinence: will be assessed and skin kept clean and moisturised.
4. Nutrition: will be assessed, and assistance to eat and drink will be provided. Supplements and snacks offered and a referral to a dietician made if you are identified as at risk.

What can you do to prevent a pressure ulcer?

Skin: if you are able to, check your skin regularly, or ask a carer or relative. Do not continue to put pressure on reddened areas, particularly at risk areas.



Keep Moving: one of the best ways to prevent a pressure ulcer is to relieve the pressure on the at risk areas by regularly changing position. This can be as simple as standing and walking on the spot for a few minutes every hour if you are able to. If you are sitting, try and lift your bottom off the seat regularly. If you are in bed, try and change your position without digging your heels into the bed as this can cause damage. Try not to slide down the bed as this can cause damage to the skin - ask a health care professional for advice if this is a problem.

Incontinence: Wash and dry your skin carefully. Do not use talcum powder or perfumed soap as these can dry out the skin. If you have loss or no control over your bladder or bowels, speak to your nurse or doctor about the best way to control it.

Nutrition: eat a well-balanced diet and drink plenty of fluids.

Key Points to Remember

- If you need help, do not be afraid to ask
- Try and keep moving
- Eat a balanced and varied diet
- Wash and dry your skin very carefully
- Look out for red or darker areas or changes in texture
- Remember special equipment is available for those at risk of developing pressure ulcers

Contacts whilst in the Hospice

- Health Care professionals on the ward
- Tissue Viability Link Nurse on your ward - ask a member of staff

Contacts whilst you are at home

- GP/Own Doctor
- District Nurse
- Practice Nurse
- Carer

Document History

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