

Pressure Ulcers

Information for patients, relatives and carers in Somerset



This leaflet was produced by NHS Somerset Clinical Commissioning Group in partnership with Somerset Partnership NHS Foundation Trust, Taunton and Somerset NHS Foundation Trust, Yeovil District Hospital NHS Foundation Trust and participating care homes in Somerset.

It is based on the NICE guidance document 'Pressure ulcers - prevention and treatment' September 2005

Information on pressure ulcers, how they develop, how they are treated and the steps you can take to prevent them.

This leaflet can be provided in other formats or languages on request

November 2019

What is a pressure ulcer?

A pressure ulcer is an area of damage to the skin and underlying tissue. It is also known as a pressure sore or bed sore. It usually happens when you sit or lie in the same position for too long. Apart from being very painful, a pressure ulcer could affect recovery from your illness, cause pain, discomfort and distress, and could result in a long stay in hospital.

How do pressure ulcers develop?

Pressure ulcers are caused by a combination of:

- Pressure - the weight of the body pressing down on the skin
- Rubbing (shearing) - when layers of skin are forced to slide over one another, for example when you slide down or are pulled up on a bed or chair

The majority of pressure ulcers are preventable

Where do pressure ulcers usually appear?

The most common places for pressure ulcers to occur are over bony prominences (bones close to the skin). This includes the bottom, heel, hip, elbow, ankle, shoulder, back and the back of the head.

Please see the diagram opposite.

Further information

Patient advice from the NHS

<https://www.nhs.uk/conditions/pressure-sores/>

Advice for patients and carers

<https://nhs.stopthepressure.co.uk/patients.html>

Advice for registered managers of care homes

<https://www.nice.org.uk/about/nice-communities/social-care/quick-guides/helping-to-prevent-pressure-ulcers>

NICE (National Institute for Health and Care Excellence) guidelines

<https://www.nice.org.uk/guidance/cg179/ifp/chapter/About-this-information>

Your Turn

A national movement working to reduce the number of pressure sores (sometimes know as bed sores) in the UK

www.your-turn.org.uk

NHS 111

Call 111, the free NHS telephone service, when it is not a 999 emergency, but you need medical help or advice fast

Pressure ulcers can get better if you have the right treatment and look after yourself

Practical hints and tips

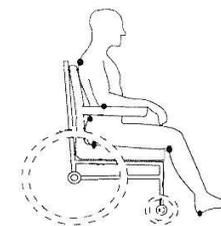
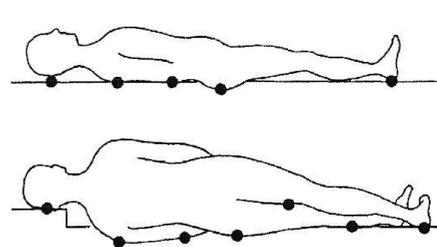
Do:

- Change your position frequently, while in bed or sitting in a chair. Avoid being in one position for long periods of time
- Take good care of your skin. Keep it clean and free from too much moisture
- Try to eat a healthy balanced diet
- Use the equipment as advised by your nurse
- Inspect your skin for red or purple marks and report these to your healthcare professional

Don't:

- Sit on rubber ring cushions (they may cause more damage)
- Massage or rub pressure areas
- Drag yourself over damp or creased bed clothes
- Use a sheepskin to help relieve pressure
- Use incontinence sheets, use incontinence pads instead
- Try to manage a pressure ulcer yourself - seek help from your nurse or other healthcare professional

Prevention is better than cure



Who is most at risk of developing a pressure ulcer?

Anyone can get a pressure ulcer but some people are more at risk than others. People with a pressure ulcer are also at risk of developing another pressure ulcer. You may be at risk of getting a pressure ulcer if you:

- Have problems moving and cannot change position by yourself
- Cannot feel pain over part or all of your body
- Are incontinent
- Are seriously ill or undergoing surgery
- Have had pressure ulcers in the past
- Have a poor diet and don't drink enough water
- Are very young or very old
- Have damaged your spinal cord and can't move or feel your bottom and legs
- Are older and are ill or have suffered an injury, such as a broken hip
- Have dementia, problems with thinking and or memory loss, a learning disability or brain injury

How can you spot a pressure ulcer?

The first sign that a pressure ulcer might be forming is a change in the colour of the skin. This may get progressively worse and can lead to an open wound. Look out for these warning signs:

- Red patches on fair skin
- Purple/bluish patches on dark skin
- Swelling and blisters
- Hard or swollen areas which may be painful
- Temperature change to an area of the skin

What should you do if you think you have a pressure ulcer?

If you think you have a pressure ulcer you should seek advice from a health professional immediately. Proper medical care will be needed to ensure the ulcer heals as quickly as possible. Contact your local GP, NHS 111 or, if you are in a hospital or nursing home, speak to one of the nursing staff.

What can health professionals do to help?

Your doctor or nurse will examine your pressure ulcer and may dress the wound. They will give you advice on how to avoid getting more pressure ulcers and how to make sure this one doesn't get any worse. Your healthcare team will agree with you to use a range of treatments and approaches to ensure your pressure ulcer heals as quickly as possible. This may include the use of special beds, mattresses and dressings and they will discuss this with you fully. They will also regularly assess your skin to check for warning signs of pressure ulcer development.

What can you do to help?

- Change your position regularly. If you are mobile get up and walk around as often as you feel able, or at least every two hours
- If you are immobile but sitting in a chair, try lifting your weight from side to side to relieve the pressure on your bottom
- If you have your legs stretched out in front of you, make sure your feet are resting flat on the floor
- If you are being nursed in bed and are able, change your position frequently. Try lying on alternate sides, sit up slightly and try to distribute pressure evenly. If you are unable to move yourself your healthcare team will assist you by altering your position regularly
- Eat a well balanced diet. Drinking enough water is very important
- Keep your skin clean and free from too much moisture. Soap is not recommended for elderly skin as it can dry it out. Use a non-drying cleanser and make sure you dry yourself completely. Avoid talcum powder which has a drying effect on the skin. Use a suitable moisturiser to prevent dryness
- Check your own skin, especially heels, bottom and elbows. Signs to look out for are redness, swelling, blisters, cracks in the skin and pain
- Ask a carer, care worker or member of your healthcare team if you have any concerns