

Pressure area care

Community Nursing

Patient Information Leaflet

A guide for patients and carers – pressure ulcers prevention and treatment

What is a pressure ulcer?

A pressure ulcer is damage that occurs on the skin and underlying tissue. Pressure ulcers are caused by three main things:

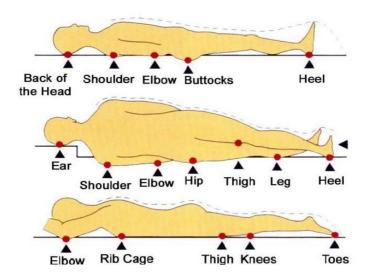
- 1. **Pressure** the weight of the body pressing down on the skin.
- 2. **Shear** the layers of the skin are forced to slide over one another or over deeper tissues, for example when you slide down, or are pulled up, a bed or chair or when you are transferring to and from your Wheelchair.
- 3. **Friction** rubbing the skin.

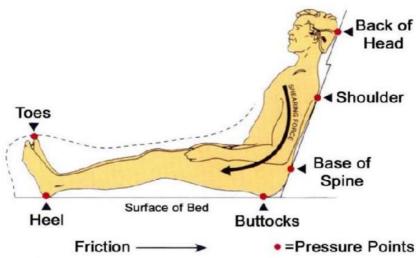
Who gets pressure ulcers?

People may be at risk of getting a pressure ulcer if, for example, they:

- Have problems moving and cannot change position by themselves without help
- · Cannot feel pain over part or all of their 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 old or very young
- Have damaged their spinal cord and can neither move nor feel their bottom and legs
- Are older people who are ill or have suffered an injury, for example a broken hip.

Common sites for pressure ulcers





As you may have observed, most pressure sores occur over a bony prominence

Preventing pressure ulcers

Pressure ulcers can develop very quickly in some people if the person is unable to move, even for a very short time – sometimes within an hour.

Without care, pressure ulcers can be very serious; they can damage not just the skin, but also deeper layers of tissue under the skin. Pressure ulcers may cause pain or mean a longer stay in hospital.

Severe pressure ulcers can destroy the muscle or bone underneath the skin, so they can take a very long time to heal. In extreme cases, pressure ulcers can become life threatening, as they can become infected, and sometimes cause blood poisoning or bone infections.

Keeping Moving

One of the best ways of preventing a pressure ulcer is to reduce or relieve pressure on areas that are vulnerable to pressure ulcers (for example, bony parts of the body).

This is done by moving around and changing position as much as possible.

A Good Diet

Eating well and drinking enough water is very important.

It is particularly important for those with a pressure ulcer as their condition can get worse or fail to get better without it.

Mattresses and Cushions

There are many different types of mattresses and cushion that can help reduce the pressure on bony parts of the body and help prevent pressure ulcers.

The equipment you have in place had been identified at the time of assessment to provide you pressure relieving support. If you have any problems with equipment or identify any damage with your skin, please contact your GP.

Skin Assessment

Your skin should be assessed regularly to check for signs of pressure ulcer development. How often your skin is checked depends on your level of risk and your general health.

Your or your carer should inspect your own skin for signs of pressure damage. You might need to look at awkward areas such as your bottom or heels.

What should you be looking for?

- Be mindful of different skin tones, in light toned skin you might notice a red area that does not disappear.
- In dark toned skin you might notice a purple/bluish area. Touch should be considered in darker toned skin to identify any heat or swelling over bony prominences.
- Blisters, or damage to the skin.
- · Patches of hot skin.
- Swelling.
- · Patches of hard skin.
- Patches of cool skin.

If you or your carer notice possible signs of damage you should contact your GP immediately.

Self-Care

It is important to move and change position yourself as often as you can. People with limited movement may need to have their limbs moved by someone else.

You, or your carer, should be encouraged to inspect your skin to check for signs of pressure ulcers – you may need to use a mirror to see awkward areas such as your bottom or heels.

If you or your carer notice possible signs of damage you should inform your GP.

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

http://dgft.nhs.uk/services-and-wards/

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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