What is pressure damage?
A pressure ulcer, (previously often referred to as a ‘bed sore’ or ‘pressure sore’) is a localised area of damage to the skin and / or underlying tissues.

They may appear to be minor such as redness, but can develop into something more serious developing from a blister to an open wound, which could affect deeper tissue or even bone. If untreated it can deteriorate further and seriously affect general health and / or delay your recovery.

Pressure ulcers can develop in a relatively short time, therefore it is important to prevent them or notice and recognise early signs of damage.

A pressure ulcer can be painful and take a long time to heal.

NOTE FOR CARERS
If you are looking after someone who has to spend time in a bed, chair or a wheelchair, you should also find this leaflet useful.

What causes this to happen?

Pressure ulcers may be caused by one, or, a combination of the following:-

- As the result of direct unrelieved pressure, occurring by sitting or lying in one position for too long, putting pressure on one area.
- As the result of shearing action, skin and muscles twist causing distortion of the blood vessels. This happens for example when sliding down, or, by being dragged up a bed or chair.

- As a result of friction, occurring when two surfaces rub together, for example when the skin is scraped along a surface when moving.

**Which parts of my body are at risk?**
Pressure ulcers are most likely to develop on parts of the body which take your weight and where the bone is close to the surface, particularly your bottom and heels.

**High risk areas are shown in the diagrams below**
What makes me at risk of developing pressure damage?

**Being unable or, unwilling to change position puts you at high risk, as moving is the body’s first line of defence.**

Usually people can relieve the effects of pressure, friction or shearing. However, when you are poorly and if -

- you are unable to move around freely
- you are on bed rest all or most of the time
- you have to use a wheelchair most of the time, or
- you spend long periods of time, sitting in a chair

There is an increased possibility of developing pressure damage.

**Other factors that can increase the risk include:-**

- Pain or discomfort which may make it difficult to move or alter position.

- Dragging the skin across a surface can cause grazing as a result of friction. This will weaken the skin, increasing the risk of further damage. Sliding or slumping down in the bed/chair can also damage your skin.

- The build up of moisture on the skin, due to perspiration or incontinence, can cause the skin to become soft and therefore easily distorted.

- Poor diet and fluid intake, both under and overweight, frail old age, severe or acute illness and long surgical procedures

- Chronic illness, such as diabetes, circulation disorders, or the effects of a stroke may reduce sensitivity to pain or discomfort.

- Sometimes an additional infection such as ‘flu or a urine infection can upset your normal balance causing you to feel generally unwell and feverish.
How can I help myself to avoid developing pressure ulcers?

**If you are mobile** – You should get up from your bed or chair at least once every 2 hours during the day and take a short walk.

**If you are confined to a chair / wheelchair** - you should lift your bottom off the seat for a few minutes every half hour by pushing up on the arms of the chair, or, you could roll from cheek to cheek for a short while.

**If you are confined to bed** – If able, you should change your position in bed at least every 2 hours. If you are too ill or unable to move, your nurse will help you or teach your carer to relieve pressure. If appropriate she/he may advise you to have a special mattress or cushion as well as regularly changing your position.

**IN ALL SITUATIONS, WHEN AT RISK** –

**Check and care for your skin** –

Check for signs of damage at least daily. Look for skin that doesn’t return to its normal colour after you have taken your weight off it. Using a mirror may help you check areas that are difficult for you to see; or ask a carer to do this for you.

Do not lie on skin that is ‘redder’ or darker than usual. For patients with darkly pigmented skin you should not lie on skin that appears ‘bluish or purplish’ in colour or that feels softer than usual or, that may be ‘shiny’.

Always keep your skin clean and dry – avoid rubbing and pat your skin dry.

Avoid the use of talcum powder because it can dry the skin of its natural oils. The skin can then become dry and cracked and open to possible infection.

A schedule of regular repositioning should be agreed with your nurse or carer.
**Eat the right foods** – Do try to eat a balanced diet with plenty of fruit and vegetables and a good intake of protein. Even if your appetite is poor, try to eat small amounts often. Stay well hydrated by drinking fluids regularly. This will help improve the overall condition of your skin.

**Can I help pressure ulcers to heal if I develop them?**
If you do develop a pressure ulcer there is a great deal that can be done to help you. Nurses will care for the wound and reduce discomfort. However, healing can be slow and we need to work together to eliminate the cause and prevent it getting worse. Avoid lying or sitting on the affected area.

You may be referred to a wound specialist nurse for further advice.

Remember to change position regularly.

If you have any type of wound, including a pressure ulcer, it is really important to get enough calories to help healing.

It is important for you to receive adequate pain relief. You should discuss this with your nurse or GP.

Try to drink a full glass of water or juice whenever you take any tablets. Drink water when eating your meals in addition to your usual cups of tea or coffee. High protein drinks will help improve your calorie intake.

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**TRY NOT TO WORRY**
Pressure ulcers can sometimes occur even if you are doing everything you can to avoid them. So, do not blame yourself.

Pressure ulcers, although an added problem for you, can be cured if you get the right care and treatment; but it will take time. Nurses are here to help you and your carer.

You and your carer should discuss a prevention and/or management plan with your nurse. Do not be afraid to ask for information or help.
Note useful contact telephone numbers here -

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