

Pressure Area Care



Alice House Hospice
Serving the communities of
Hartlepool & East Durham

What are pressure ulcers and why do they occur?

A pressure ulcer is damage to an area of skin and or deeper layers of tissue under the skin. They usually occur over a bony prominent area. Common area's pressure ulcers can occur are on elbows, heels, sacral area and spine. Pressure ulcers occur when pressure is applied to an area of skin for a period of time, which stops blood supply, which can then cause breakdown of that area.

Pressure ulcers can also be referred to as pressure sores, bed sores, open ulcers/wounds, pressure injury, deep tissue injury and each pressure ulcer is categorised depending on how damaged the area of skin/tissue is, this can range from an area of intact skin that is red or discoloured to a broken area of skin affecting different layers of tissue. Pressure ulcers can occur over time or quickly over hours.

Without care pressure ulcers can deteriorate and become very painful, they can become a source of infection and will affect how the wound heals.

What are the early signs of a pressure ulcer?

Early signs of a pressure ulcer are:

- Pain, discomfort and itchiness.
- A patch of skin that has not broken that feels different to the surrounding skin area, for example feeling spongy or hard and or warm.
- A patch of skin maybe red, which occurs more with pale skin or become discoloured and turn purple or blue, which tends to happen with darker skin.

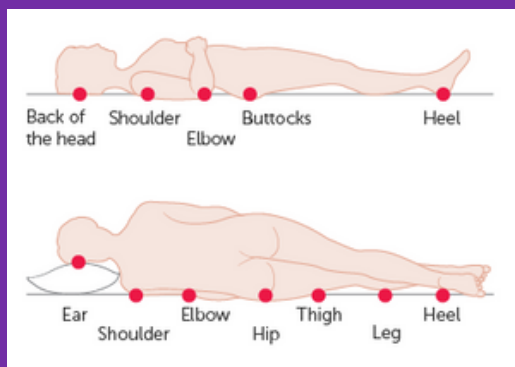
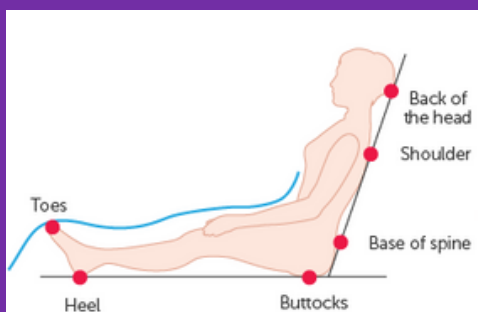
The nurse may refer to these early signs of a pressure ulcer as a **Category 1**.

Types of pressure ulcer that can develop

- The area can breakdown and become an open wound – **Category 2**.
- A deeper wound that can affect deeper layers of skin – **Category 3**.
- A much deeper wound, which then affects bone and muscle tissue – **Category 4**.

Other terminology your nurse may use to describe a patch of skin or blister that has become a dark purple or black in colour is unstageable and or deep tissue injury.

Pressure Area Points



How your nurse will manage the care of a pressure ulcer

- Depending on your nurses assessment of the pressure ulcer they may choose to use a suitable dressing to cover the wound.
- Will assess the need for pressure relieving equipment, such as a pressure mattress and or a pressure cushion.
- Pain relief– pressure ulcers can be painful, stronger pain relief such as opioids may be offered to help relieve pain. Pain relief can also be given prior to dressing changes to ease a person's pain and discomfort.
- Assist with regular positional changes to prevent the pressure ulcer from worsening and the encourage healing.
- Help and encourage a good nutritional diet intake and encourage good hydration.
- Can offer complementary therapies and emotional support – for example using music and relaxation therapies, touch and aromatherapies.

How can you help yourself prevent a pressure ulcer



Keep moving - change your position regularly, at least every 2-4 hours, the team can assist with this if needed, but by making small changes to your position safely yourself either if your laid in bed or sat in your chair can aid in the prevention of pressure ulcers. Also in some cases a combined use of pressure relieving equipment maybe needed alongside if you're showing signs of a pressure ulcer developing.

Eat well and keep hydrated - nutrition and ensuring you drink plenty of fluids is very important when it comes to pressure care prevention and it also plays a vital role in the healing process as your body needs nutrients combined with hydration to promote quicker healing and to prevent infection. The team will complete a nutritional assessment and, if needed will refer to a dietitian for support.



Take care of your skin and moisturise - keep your skin clean and dry and try not to use products that may dry out your skin like some soaps or shower gels can. Water based moisturisers used daily can help care for your skin and help prevent breakdown.

Always tell your care provider or nurse if you are experiencing any of the above symptoms.



Caring for a person's pressure areas who are nearing end of life

When a person is approaching the end of their life, pressure ulcer development is a higher risk as they don't tend to eat or drink a lot and are perhaps not able to move around or change their own position, they may lose their ability to control their bladder and bowel movements and become incontinent at times, which can damage skin and be uncomfortable.

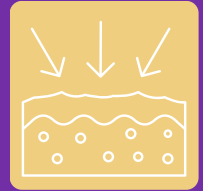
We will be always assessing a person's pressure care and will communicate and discuss with each patient and

their family how we can help maintain their comfort and prevent any discomfort or distress.

A person who is in their last days of life and who may have already developed a pressure ulcer will be assessed regularly and a care plan will be in place to support the person. The nurse caring for that person will assess the need for pain relief prior to dressing changes and repositioning and we aim to always maintain dignity and respect throughout.

Moisture associated skin damage - what is it and how is it managed?

Moisture associated skin damage occurs when skin has been exposed to moisture for a prolonged period of time, this can cause inflammation and erosion of the skin. Skin can become very sore, resulting in abrasions. Moisture skin can be exposed to be urine, faeces, sweat, saliva and mucus.



We can help manage moisture associated skin damage by using a barrier cream; a type of cream used to prevent this kind of skin damage and also help protect skin against excessive exposure to fluids/moisture.

Washing our patients using a soap substitute rather than everyday soaps can also help as they are kinder to skin, don't irritate already damaged skin and help lock in healthy moisture to aid healing and comfort.



Please make a member of the team aware if you are experiencing any soreness or redness, sometimes skin can blister if exposed to moisture for a prolonged period of time.

References and acknowledgments:

- Marie Curie: Pressure Ulcers (February 2020).
- NICE Guidelines: Pressure Ulcers: prevention and management (April 2014).
- Better Health.gov: Skin care and preventing pressure sores in hospital (2020).
- NHS Conditions: Pressure sores (April 2020).
- Wound Source: Moisture Associated Skin Damage (2019).
- NHS Clinical Review: Skin Barrier Film (2017).