

# Preventing pressure ulcers

## Patient information sheet

### What are pressure ulcers?

- A pressure ulcer is damage to the skin and underlying tissue.
- Pressure ulcers are often referred to as pressure or bed sores.
- This can range from mild skin reddening to severe deep wounds.
- Reddening of the skin that disappears after pressure is removed is normal, and is not a pressure ulcer.

### Causes:

- It is thought pressure ulcers are caused by unrelieved pressure to an area of the body. If a person slides down in a bed or chair, blood vessels can stretch and bend (caused by shear and friction forces), which can cause pressure ulcers.

### Common places for pressure ulcers to form:

- Over bony prominences (where bones are close to the skin) for example bottom, heels, hips, elbows, ankles, shoulders, back, ears and the back of the head.

### You are at risk of getting a pressure ulcer if:

- You have problems moving around and changing position, for example after an operation.
- You cannot feel pain, are numb from pain relief or are a diabetic with reduced sensation.
- You suffer from incontinence or sweat a lot.
- You have a poor diet and do not drink enough water.
- You have had a pressure ulcer before.
- You are elderly.
- You are taking steroids.

### What to look for:

- On light skinned people red patches on the skin that do not go away.
- On dark skinned people bluish/purplish patches on the skin that do not go away.
- Blisters or damage to the skin.
- Patches of hot skin.
- Swelling, particularly on bony areas.
- Patches of hard skin.
- Cracks, calluses, wrinkles or broken skin.

**You and your nurse should inspect your skin regularly. How often this is done will depend on how mobile you are and your general health.**

### How to relieve or reduce pressure:

- Move around and change position as much as possible.
- Avoid sitting or lying in one position for more than two hours.
- After heart/lung surgery you will be shown how to move, not applying too much pressure through your arms.
- Extra pillows can be used for support.
- You may have been advised to keep your legs up when sitting in a chair to reduce swollen ankles. As a result of this your heels can become sore and should be moved regularly to another position or you can suspend them over the edge of the foot stool.

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A nurse or physiotherapist can advise you on how best to reduce pressure.

**What you can do to help:**

- Whilst in bed, change your position approximately every two hours.
- Whilst in bed, sheets should be flat with no creases.
- Whilst sitting, if you are able to move yourself, you should do so every 15 minutes.
- Pillows can be used to stop knees or ankles touching each other, but only put a pillow between the knees, never behind them.
- Reduce friction when moving – sliding equipment is available. Lifting or dragging is strictly forbidden.

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