

Pressure Ulcer Prevention: Information for Patients and Family

What is a pressure ulcer?

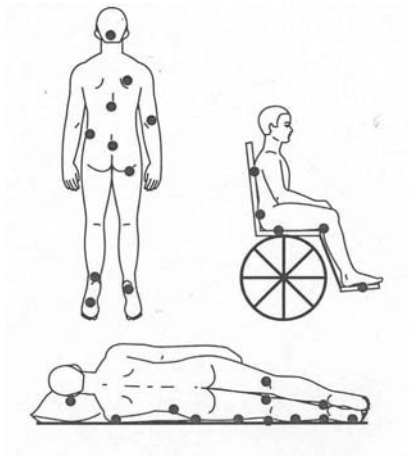
A pressure ulcer is an injury or sore on the skin that sometimes includes the tissue below the skin. It may be called a pressure sore, decubitus ulcer, or a bedsore. It is usually caused by pressure from sitting in a wheelchair or chair, or from lying in bed in one position for too long.

Risks for developing a pressure ulcer:

- Inability to move by yourself
- Loss of bowel and bladder control
- Poor nutrition
- Decreased mental awareness
- Decreased feeling or sensation caused by a medical condition or medications
- Sliding down in a bed or chair (shear)
- Being pulled across a bed during position changes (friction).

Where do pressure ulcers form?

Most pressure ulcers form over bony areas of your body such as the: lower back (sacrum), over the hip bones (trochanter), heels, back of the head, and even the rims of the ears. Pressure ulcers can also form on the knees, ankles, shoulder blades, elbows, and spine.



How can I prevent pressure ulcers?

Take good care of your skin

Inspect your skin every day. Use a mirror to look at hard to see areas. Look for areas that stay red after a change of position, especially over bony areas.

If you have dark skin the area may simply become darker than normal. A redness or change in the color of the skin that goes away after turning and changing position are normal. **But if there is redness or a change in skin color that stays, this may be a pressure ulcer.** Keep your skin clean and free from perspiration, urine, stool, and wound drainage.

Bathe in warm (not hot) water. Pat your skin dry and avoid rubbing it. Use a mild soap and apply moisturizer after bathing.

Protect your skin from injury

Avoid massaging bony parts of your body. Massage may injure the tissue below the skin.

Reduce friction on your skin. Use your arms to lift yourself up instead of dragging yourself. If you use a hospital bed, ask about using a trapeze bar to lift your body when you position yourself in bed.

If you must stay in bed:

Ask about using mattresses and cushions that may help to decrease pressure. Change your position at least every two hours. If you can't move on your own, a caregiver will help you. Keep a written time schedule for turning and positioning.

Use pillows or soft pads to keep ankles and knees from touching each other. See picture insert.

When you are lying on your back, you can place pillows lengthwise under your legs from your calf to ankle to keep your heels off the bed. Don't put pillows under your knees when you are in the back-lying position.

Change your position at least every two hours. If you can't move on your own, a caregiver will help you. Try keeping a written time schedule for turning and positioning.



When you are lying on your side, avoid lying directly on your hip bone. A 30 degree side-lying position is best. Tuck pillows under one side and between your knees and ankles as seen in the picture on the right.

The head of the bed should be raised as little as possible, usually 30 degrees, except when you are eating or drinking. If you raise the bed too much, you will slide down. Sliding down can cause injury to the skin on your lower back.

Check with your doctor or nurse when deciding how high the head of the bed should be.

If you are in a wheelchair/chair

Ask about using a special seat cushion for reducing pressure. But do not use donut-shaped cushions. These can decrease blood flow to the skin.

Reposition yourself every hour. If you can't do this by yourself, your caregiver will assist you. Do small weight shifts and lifts in the chair every 15 minutes if you are able.

Nutrition is Very Important

Eating enough calories and protein helps to keep you healthy and protect your skin from damage. Be sure to drink the right amount of fluids to stay well hydrated too.

Let your doctor or dietitian know if you are having trouble eating or if you are losing weight. If you still have problems eating a balanced diet they may suggest nutritional supplements such as shakes.

If you want more information about pressure ulcer prevention, contact the following organizations:

National Pressure Ulcer Advisory Panel
1255 Twenty-Third Street NW, Suite 200
Washington, DC 20037
(202) 521-6789
www.npuap.org

Agency for Healthcare Research and Quality
540 Gaither Rd, Suite 2000
Rockville MD 20850
(301) 427-1364
www.ahrq.gov

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If you are confused or have a question about your pressure ulcer, please call us at 212.932.4325, at any time. You can also find information at our website: www.ColumbiaWoundHealing.org.

This information is brief and general. It should not be the only source of your information on this health care topic. It is not to be used or relied on for diagnosis or treatment. It does not take the place of instructions from your doctor. For answers to your health related questions talk to your health care providers before making a health care decision.