Preventing pressure ulcers
Information for patients and carers

Introduction
The assessment carried out by the ward nursing staff has shown that you are/may be at risk of developing pressure ulcers. This leaflet explains what pressure ulcers are and how to prevent them.

What are pressure ulcers?
Pressure ulcers are areas of damage to the skin and underlying tissue. They are also known as pressure sores or bed sores.

If care is not taken, pressure ulcers can be serious. They can damage not just the skin but also the fatty tissue beneath. Pressure ulcers can be painful, or become infected leading to a longer stay in hospital.

Why are you at risk?
You may be at risk of developing pressure ulcers if you have problems with sensitivity to pain or discomfort, problems with movement, weight changes, poor circulation, moist skin, pressure ulcers in the past, inadequate diet or fluid intake.
What you and your carer can do (self care)
Staff can teach you and your carer how to inspect your own skin. You or your carer should inspect your skin regularly, looking for signs of possible or actual damage. If you or your carer need further help or advice, the nursing staff will be pleased to help.

The signs to look for are: purplish or bluish patches on dark-skinned people, red patches on light-skinned people, swelling, shiny areas, dry patches, cracks, calluses, wrinkles, blisters.

The signs to feel for are: hard areas, warm areas, swollen skin over bony points.
If you or your carer notice possible or actual signs of damage, tell the nursing staff straightaway. If you are at home, contact your district nurse or GP.

Equipment: You should not use the following ‘aids’: water-filled gloves, synthetic sheepskins, genuine sheepskins or doughnut-type devices. This is because research shows that these do not help to relieve pressure.

Relieving pressure
The nursing staff will give you and your carer advice on how best to relieve or reduce pressure on areas of your skin that are susceptible to pressure damage including:

- advice about adjusting your position and how often
- how to avoid pressure, for example by making sure bedding is free of creases, clothing does not have thick seams, zips, studs or buttons, and shoes and socks are not too tight.

What staff can do to help

Skin inspection: the nursing staff will inspect your skin regularly (depending on your condition).

Position: If you are able to move, the staff will encourage you to change your position frequently and advise you about correct seating positions, supporting your feet and posture. If you need help, the nurses will help you to change position. If you are uncomfortable at any time, tell the staff who are looking after you.
Within Critical Care
The previous points apply to patients in the Critical Care Unit (CCU), but sometimes these patients are too unwell to either want to or be able to move themselves. Also, some of the equipment that we have to use in the CCU can cause pressure on the skin. This increases the possibility of developing a pressure ulcer, so the CCU nurses will:

- re-position the patient every two hours, this does not mean a full roll but may be moving from side to back and re-positioning limbs
- change position or re-apply some equipment (such as tightly fitting masks)
- change bedding on a regular basis so that the sheets are dry and crease-free

For specialist information on pressure ulcers contact:
The Tissue Viability Society,
c/o Professor Jane Nixon, Clinical Trials Research Unit (CTRU),
University of Leeds, Leeds, LS2 9JT
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We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact patient.info@christie.nhs.uk

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