Preventing Pressure Ulcers (Bedsores)

A pressure ulcer, or bedsore, is a serious problem in the hospital and at home. Pressure ulcers can slow your recovery, causing pain, infections and other problems.

What is a pressure ulcer?

A pressure ulcer is an injury to the skin and the tissue beneath it. It is caused by pressure on the skin.

Pressure ulcers tend to occur over bony body parts (elbow, heel, hip, etc.) that you sit or lie on for long periods of time. The pressure squeezes tiny blood vessels that supply the skin with nutrients and oxygen. When the skin goes without nutrients and oxygen for too long, a pressure ulcer forms. The area turns red at first. Unless treated quickly (changing your position, for example), the pressure can damage the skin and muscles.

Pressure ulcers are more likely to develop or worsen if you:

- · slide down in a bed or chair.
- rub or create friction on the skin.
- cannot move or change positions.
- lose control of your bowel or bladder.
- don't get enough nutrients or fluids.
- have poor circulation or fragile skin.
- have problems thinking clearly.
- have problems feeling pressure or pain.

How can I prevent pressure ulcers?

- Limit pressure.
 - If you are in bed, change your position at least every one to two hours.
 - If you are in a chair and can shift your own weight, do so every 15 minutes. If you cannot shift your own weight, your caregiver should change your position at least every hour.

- Reduce friction.
 - When moving in bed, don't pull or drag yourself across the sheets. Also, don't push or pull with your heels.
 - Avoid repetitive movements. For example, don't scratch your foot by rubbing it on the sheets.
- Use padding carefully.
 - Avoid doughnut-shaped cushions. These can hurt the tissues under your skin.
 - Avoid using several layers (such as underpads, diapers and sheets) between you and your chair or bed.
- · Protect your skin.
 - Have someone check your skin often. Tell your caregiver if anything looks unusual.
 - Clean your skin well after using a bedpan or soiling a diaper or pad.
 - > Use moisturizer to prevent dry skin. Bathe every other day.
 - > Don't rub or massage the skin over the bony parts of your body.
 - Make sure you are getting adequate nutrition, especially protein, as well as enough healthy liquids (ex: water, milk and juice.)

If you have pain on your heels and buttocks, tell your caregiver. Pain may mean you have too much pressure on the skin.

If you must stay in bed for long periods of time:

• Try to keep the head of your bed as low as you can. If you need to raise it, raise it to the lowest point possible for as short a time as possible.

- Use pillows to keep your knees and ankles from touching each other.
- Avoid lying directly on your hipbone when on your side. Your care team may show you how to spread your weight more evenly.
- To keep your heels off the bed, place pillows under your legs from mid-calf to ankle. Never place pillows under the knee.
- Your caregiver may want to use a turning sheet to help you change position.
- If you cannot turn easily, ask your care team if you need a special mattress or mattress overlay to lessen the pressure.

If you have problems with bladder or bowel control:

- Only use pads made for incontinence (ones that pull moisture away from your skin).
- Clean the skin gently with a pH-balanced soap or cleansing product.
- Buy special cream or ointment to protect your skin from urine and stool. Ask your care team for suggestions.

If you have to wear stockings to prevent blood clots (anti-embolism stockings):

- Your stockings should be removed at least twice a day to let your legs "breathe" and to check your skin for any redness or open sores.
- Once you can get up and move around freely, you no longer need to wear the stockings.

If you are in a chair or wheelchair:

- Remember that comfort and good posture are important.
- Change your position often. Spend time out of the chair several hours a day.
- Ask your care team if you need a special chair cushion.

If you wear oxygen tubing and/or a mask:

- Remember that these can cause pressure ulcers behind the ears, on the bridge of your nose or even in your nostrils.
- These areas should be inspected by staff at least once a shift while you are in the hospital.
- Special pads may be used to protect these areas
- Tell your caregiver if you are having pain or discomfort in these areas.

What else can I do?

Be active in your health care:

- Involve your family and caregivers.
- Ask questions. Be sure you know what is being done and why.
- Explain your needs, wants and concerns.
- Learn what is best for you.

Knowing how to help your care team prevent pressure ulcers is an important part of your care.

