If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.


Help to support North Bristol NHS Trust:

Southmead Hospital Charity

All Aboard

Information for Patients and Carers

Exceptional healthcare, personally delivered
What is a Pressure injury?

- A pressure injury, also referred to as a pressure ulcer or bed sore, is an area of damaged skin or underlying tissue that develops when constant pressure on a part of the body shuts down the blood vessels feeding that area.
- Pressure injuries usually develop on bony prominences and on anyone who sits or lies down for prolonged periods of time.
- Shearing from slipping or sliding down the bed/chair can contribute to pressure injuries.

What are the symptoms of a pressure injury?

A Pressure injury may initially appear as a red area of skin that does not disappear when pressed gently.

Look for changes in skin condition including pain or tenderness, heat and swelling. The area may become painful and purple in colour.

Continued pressure and poor circulation can cause the skin and tissue to break down.

Please inform your health care provider if you experience any of these symptoms.

Stages of Pressure Injuries

**Grade 1** - An area of red intact skin, which may appear differently in darkly pigmented skin. Presence of changes in sensation, temperature, or firmness.

**Grade 2** - A superficial broken area of skin or an intact/ ruptured blister.

**Grade 3** - Full-thickness loss of skin, in which fat is visible in the ulcer.

**Grade 4** - Full-thickness skin and tissue loss with exposed muscle, tendon, ligament, cartilage or bone in the ulcer.

How can you help as a patient/carer in avoiding pressure injuries?

- Change you position regularly, every few hours and check your skin for any redness or broken areas and report immediately to the nursing/medical staff.
- If you are able have short walks up and down the ward to increase your blood flow to your skin and increase tone in your muscles.
- If you wear compression stockings (TEDS) do not allow them to roll down as this can cause pressure and skin damage.
- If you have problems with continence please speak to a member of the nursing team for advice on skin care.
- Try to have a minimum of 8-10 cups of fluid daily unless on a restriction as advised by your doctor.
- Eat a well-balanced diet to give your skin the right nutrients for repair and growth. If you are finding it difficult to eat and drink properly, talk to your nurse who will refer you to a dietician.
Heel pressure injury prevention

- Most people think of bottoms with pressure injuries/ bed sores, but HEELS are the number one problem area.
- Ensure when you are elevating your legs, that pressure is evenly distributed throughout the foot and not just resting on you heel.
- Change your position minimum of every 2 hours.
- Do not drag your heels up the bed causing friction and shearing damage.

Any concerns please speak to a member of staff.

Good Seating Posture

When sitting centrally in a chair that is the right size for you, your weight should be evenly distributed through your feet, thighs, bottom, back and forearms.

To ensure the chair is the size for you:

- Feet should be flat on the floor
- Your bottom should reach back of the seat with spine in its natural line
- Ankles, hips and knees should be at 90 degrees
- Buttocks and thighs should be supported by length of the seat, with a space behind the knees of just 2-2.5cm
- Top of thighs should be parallel to the floor
- Your bottom and thighs should fit the width of the chair with approx. 2.5cm each side for comfort.
- Forearms should rest on both the armrest without hunching or dropping your shoulder.

Recognising ill-fitting seating

If the chair is too high: you will tend to slide forward to get your feet on the floor.

If the seat is too low: your knees will be higher than your pelvis, tilting your hips backwards forming a C with your back and pushing weight through the base of the spine.

If the seat is too deep: you’ll slide forward to get your feet on the floor. This tilts your pelvis backwards again forming a C shape and pushing weight onto your sacrum.

If the seat is too wide: You will slump leading to uneven pressure on your buttocks and elbows as you fight gravity to stay upright.

If arm rests are too low: you lose forearm support adding additional weight on to your buttocks.

= pressure points
Prevention of Pressure Injuries for Wheelchair Users

The risk of pressure injuries amongst permanent wheelchair users is high. When seated a high proportion of body weight is supported by the ischial tuberosity (sitting bones), buttocks, sacrum, upper thigh and arms.

Appropriate or specialist equipment can enable an optimum seated posture. Poor seating or an asymmetric posture can be a key cause of skin breakdown.

**Pressure Injuries can develop while seated:**

- Ischial tuberosity
- Sacrum
- Trochanter
- Back/ between the Knees
- Bony prominences of the spine
- Scapula
- Heels

Changing your position at least once every 15 to 30 minutes to take the pressure off your buttocks and the bony areas can reduce pressure injuries (NHS Choices 2013).

There are some pressure relieving manoeuvres possible in a wheelchair such as;

- Lifting your bottom off the seat by extending arms.
- Leaning from side to side
- Leaning forward until you can slide your hands under your buttocks.

Always seek the advice of your doctor or other qualified health provider before starting any new treatment or with any questions you may have about your medical condition.

Your Skin Matters

Pressure injuries are an area of damage to the skin and underlying tissue. This injury, also known as a bed sore, can seriously impact the quality of your life and it’s important to understand whether you may be at risk, so you can help prevent skin damage from developing.

5 simple steps to help you to prevent pressure ulcers:

**Skin inspection:** Check every day for marks, especially your bottom, heels and bony bits. Let staff know if you have any existing skin problems or damage

**Surface:** Surfaces you’re sitting on should not be hard or causing marks. Let staff know if your skin is starting to mark

**Keep moving:** Keep changing your position. Never sit in one position for a long period of time. Let staff know if you need assistance to change position.

**Incontinence:** Incontinence or sweat can damage the skin. Keep skin clean, dry and moisturised. Let staff know if you need assistance to the toilet.

**Nutrition/hydration:** Eat and drink well, let staff know if you have missed a meal

http://nhs.stopthepressure.co.uk

There is a dedicated website set up for pressure injury prevention which has been supported by healthcare professionals. Here you can read patient own experiences of pressure injuries and more ways to prevent them.

www.your-turn.org.uk