

Looking after your skin

Helping reduce the risk of pressure ulcers for yourself or those you care for



What is a pressure ulcer?

A pressure ulcer, (occasionally known as a 'bed sore'), is an area of skin and underlying tissue that has been damaged by direct pressure to the area, friction and poor circulation.

A pressure ulcer can be anything from a painful red area to an open wound. The wound may be deep with a lot of leakage and need to be dressed by a nurse to keep the area clean and free from infection.

If they do get infected, pressure ulcers can make you unwell and, in some cases, can need hospital treatment or be lifethreatening.

Pressure ulcers can be caused when sitting and lying, and can affect any area of the body that is in prolonged contact with a surface, e.g. bottom, hips, elbows, heels.

AM LAT RISK?

If you are unable to move or need help moving, you are at risk if you have:

- + Thin fragile skin
- + Poor circulation, e.g. peripheral vascular disease
- + Major surgery
- + Reduced sensation, e.g. stroke, paralysis
- + Underlying medical problems, e.g. diabetes
- + Illness leading to poor appetite
- + Diabetes and are in medium/high risk category for foot ulcers

Common pressure areas SHOULDER SPINE BASE KNEES HEAD ELBOW BOTTOM HEELS

WHAT CAN I DO TO REDUCE MY RISK?

You can reduce your risk of pressure ulcers by remembering the mnemonic:

SSKIN:

Surface – lying and sitting on the correct mattress or cushion can help spread the pressure and reduce the risk. We have foam, air, gel and alternating pressure systems you can use.

Skin assessment – changes to your skin need to be picked up early. Check your skin for redness, pain, bruising, or any other changes at regular times during the day, paying particular attention to the bony parts of your body.

Keep moving – one of the easiest ways to prevent pressure damage is to keep moving:

- + Stand up
- + Walk about
- + Change your position in bed
- + Elevate your heels over the end of a cushion

Incontinence/moisture – if your skin is wet, or has urine or faeces on it, it's at a higher risk of damage. Clean your skin the way your nurse advises. Use the correct fitting shaped pads and only use non-oil-based barrier products, such as Cavilon cream or spray, for any redness.

Nutrition – if possible try to eat regularly. If your skin is healthy it is less likely to be damaged, and if you have breaks in your skin you will benefit from a high protein diet. If you cannot eat a normal diet, ask a health professional for advice. Try to drink plenty of fluids to prevent your skin becoming dry.

WHAT SHOULD I DO IF I SEE CHANGES TO MY SKIN?

Tell your nurse, GP or diabetic podiatrist/ foot specialist if:

- + Any parts of your body are reddened or sore
- + You think you are at risk of developing a pressure ulcer
- + There's anything in this leaflet you're unsure about

YOU CAN FIND OUT MORE AT:

www.tissueviabilityonline.com

We welcome your comments on this leaflet and the services we provide. You'll find our feedback portal in reception and you can comment via our website.

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