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Treatment

If we think you are at risk, we may implement some or all of the following:

- Pressure relieving cushion/mattress.
- Regular reassessment of your skin
- Establish a repositioning routine with you
- Discussion of your concerns and needs and
- A treatment plan if required

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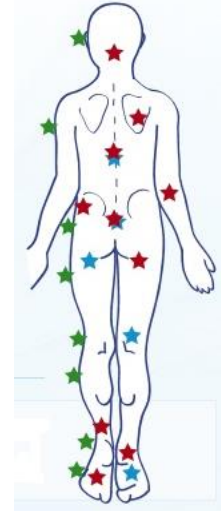
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Pressure Ulcers

Prevention and Treatment



Helping people to be
the best they can be

Introduction

You have been given this leaflet by your Community Nurse because you are either at risk of developing a pressure ulcer or have a pressure ulcer. This leaflet will give you information on the prevention and treatment of pressure ulcers.

What is a pressure ulcer?

A pressure ulcer is an area of damaged caused by pressure that may have been known as 'bedsores' in the past.

Pressure ulcers can happen by sitting or lying in position for too long without moving, or from medical devices you may be using.

If there is pressure to an area blood cannot circulate causing lack of oxygen and nutrition to the skin; if the pressure continues then damage can occur very quickly.

Early signs of pressure ulcers

- Redness
- Discomfort
- Pain
- Patches of hard skin
- Blue/purple patches
- Blisters or visible skin damage or area's that are cool or hot

Report any skin changes immediately to your carer or healthcare professional who can advise on pressure area care.

Where are pressure ulcers most likely to develop?

Usually on parts of the body which take your weight and where the bone is close to the surface (see coloured stars on figure on front of leaflet).

They can occur from medical devices such as oxygen tubing, braces and plaster of paris. **It is much better to stop this happening.**

Below are some implications of having a pressure ulcer from people who have had one:

- 'Embarrassing'
- 'Smelly'
- 'Painful'
- 'Results in lack of sleep'
- 'Affects my ability to carry out normal routine'

Who gets pressure ulcers?

Anyone can get a pressure ulcer, but some people are more likely to develop one than others:

- People who have problems moving and cannot change position by themselves without help
- Cannot feel pain over part or all of their body
- Are incontinent
- Are seriously ill or undergoing surgery
- Have had pressure ulcers in the past
- Have a poor diet and don't drink enough water
- Very old or very young

- Have damaged their spinal cord and can neither move nor feel their bottom or legs
- Older people who are ill or have suffered an injury, for example a broken hip

If you are considered to be at risk you should be reassessed if there is a change in your condition.

Preventing Pressure Ulcers

One of the best ways of preventing a pressure ulcer is to reduce or relieve pressure on the areas that are vulnerable to pressure ulcers (bony parts of the body.) This is done by moving around and changing position. Your Community Nurse will be able to give you advice.

Self-Care

It is important to move and change position as often as you can. You or your carer should inspect skin to check for signs of pressure ulcers – you may need to use a mirror to check awkward areas. If you notice any signs of damage you must tell your Community Nurse or GP immediately.

A good diet

Make sure you eat a well-balanced diet and drink plenty of fluids. Extra protein may help if you have an existing pressure ulcer.