

Practical Do's and Don'ts for avoiding pressure ulcers:

- **DO report any concerns to a healthcare professional.**
- **DO change your position frequently. Avoid being in one position for a long time.** If you can, get up and walk around as often as you feel able, at least every 2 hours. If you are sitting in a chair, try lifting your weight from side to side to relieve the pressure on your bottom. If your legs are stretched out in front of you, make sure your feet are flat on the floor. If you are being nursed in bed, change your change your position more frequently (if you are able to). Try lying on alternate sides, sit up slightly and try to distribute pressure evenly. If you need help to move please ask.
- **DO take good care of your skin. Keep it clean and free from too much moisture.** Soap is not recommended for elderly skin as it can dry it out. Use a non-drying cleanser and make sure you dry yourself completely. Avoid talcum powder which has a drying effect on the skin. Use a suitable moisturiser to prevent dryness.
- **DO try to eat a healthy balanced diet.** Drinking enough water is very important.
- **DO use equipment as advised by your nurse or therapist.**
- **DO check your skin for red/purple marks and report these to your healthcare professional.** Pay particular attention to heels, bottom and elbows. Signs to look out for are redness, swelling, blisters or cracks in the skin, and pain.
- **Do** only use medical grade sheepskins
- **Don't** sit on rubber ring cushions (they may cause more damage)
- **Don't** massage or rub pressure areas.
- **Don't** drag yourself over damp or creased bed clothes.
- **Don't** use incontinence sheets as these can crease up under you; use incontinence pads.
- **Don't** try to manage a pressure ulcer yourself — seek help from your nurse or other healthcare professional.

Pressure Ulcers

Information for patients, relatives and carers in Somerset



Information on pressure ulcers, how they develop, how they are treated, and the steps you can take to prevent them.

This leaflet can be provided in other formats
or languages on request.

November 2019

What is a pressure ulcer?

A pressure ulcer is an area of damage to the skin and underlying tissue, also known as a pressure sore or bed sore. It usually happens when you sit or lie in the same position for too long. Apart from being very painful, a pressure ulcer could affect recovery from your illness, cause pain, discomfort and distress, and result in a long stay in hospital.

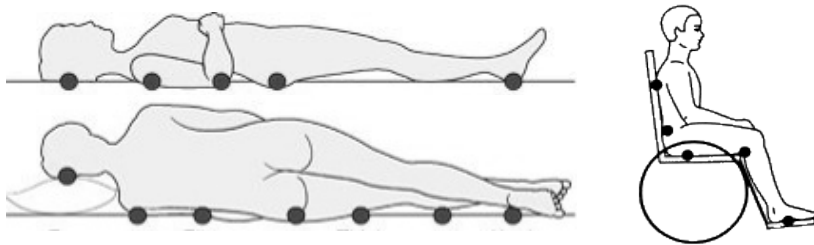
Pressure ulcers are caused by a combination of:

- **Pressure**—the weight of the body pressing down on the skin
- **Rubbing** (shearing) - when layers of skin are forced to slide over one another, for example when you slide down or are pulled up on a bed or chair.

The majority of pressure ulcers are preventable.

Where do pressure ulcers usually appear?

The most common places for pressure ulcers to occur are over bony prominences (where bone is close to the skin), such as bottom, heel, hip, elbow, ankle, shoulder, back and the back of the head.



How can you spot a pressure ulcer?

The first sign that a pressure ulcer might be forming is a change in the colour of the skin. This may get worse and can lead to an open wound. Look out for these warning signs:

- Red patches on fair skin or Purple/Bluish patches on dark skin that when pressed does not turn white
- Swelling and blisters
- Hard or swollen areas which may be painful.
- Patches of hot or cool skin.

Who is most at risk of developing a pressure ulcer?

Anyone can get a pressure ulcer but some people are more at risk than others. People with an existing pressure ulcer are also at risk of developing more. You may be at risk of getting a pressure ulcer if you:

- Have problems moving and cannot change position by yourself.
- Cannot feel pain over part or all of your 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.
- Are very young or very old.
- Have damaged your spinal cord and can't move or feel your bottom and legs.
- Are older and are ill or have suffered an injury, such as a broken hip.
- Have dementia, problems with thinking and or memory loss, a learning disabilities or brain injury.

What should you do if you think you have a pressure ulcer?

- You should seek advice from a health professional immediately. Proper medical care will be needed to ensure the ulcer heals as quickly as possible. Contact your GP, District Nurse, NHS 111, or if you are in hospital or a nursing home, speak to one of the nursing staff.

Pressure Ulcers can get better if you have the right treatment and look after yourself.

Please see the back page for Do's and Don'ts for avoiding pressure ulcers.

This leaflet can be downloaded from the website of Somerset Clinical Commissioning Group

www.somersetccg.nhs.uk/publications/patient-information