

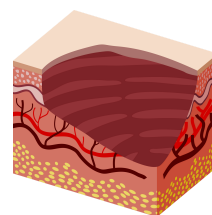


Pressure ulcers affect up to 20% of all patients in hospitals, nursing homes and residential homes. The vast majority of pressure ulcers can be avoided with effective patient care. Prevention is important because pressure ulcers can be very hard to treat once they develop, and they can even be fatal.

This leaflet aims to give you tips for how to prevent and / or relieve pressure ulcers.

What are pressure ulcers?

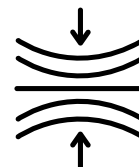
Pressure ulcers are also known as bed sores or pressure injuries. They are damage to the skin, or the tissue under the skin, or both. They can start as a painful inflamed area, and can develop into a large deep wound. This can happen quickly. They can also develop in the deeper layers of the tissue but not break the skin, so you don't see a sore but you feel it.



Healthcare professionals use a staging system to describe the severity of a pressure ulcer. It ranges from Stage 1 to 4, where Stage 4 is the most damage.

What causes pressure ulcers?

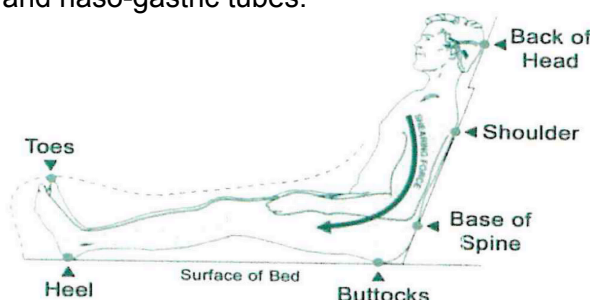
Pressure ulcers are caused by too much pressure on the skin, which stops blood and oxygen from reaching the skin. Moisture, friction (such as rubbing), and shear (when skin is moved against a fixed surface) increase your risk of developing a pressure ulcer.



Pressure ulcers often occur from sitting or lying too long in one position. Body weight squashes the tissues, reducing the blood supply to the affected areas, which reduces oxygen and nutrient supply to the tissues.

Where can you develop pressure ulcers?

Pressure ulcers usually occur over bony areas on the body, such as the shoulders, elbows, buttocks and heels. These are areas where bones or joints may stick out more, because there is little flesh over them. Pressure ulcers can also develop under medical devices such as masks, casts, and naso-gastric tubes.






Pressure Ulcers: Information for Patients and Carers



“ASSKING” to Stop the Pressure!

The ASSKING care bundle is a tool healthcare professionals use to guide the prevention and management of pressure ulcers. It can also help patients and carers to know what to look out for.

A	Assess Risk	<p>Anyone who is confined to a bed or chair, or is unable to move, is at risk of developing pressure ulcers. Other factors also increase your risk, including:</p> <ul style="list-style-type: none"> • Loss of sensation or inability to feel pain • Loss of bowel or bladder control • Poor diet • Smoking • Age over 70 • Certain health conditions that can reduce blood flow, including diabetes, heart failure, kidney failure, and peripheral vascular disease.
S	Skin Care	<p>Ask a healthcare professional to show you or your carer how to check your skin regularly. Look for:</p> <ul style="list-style-type: none"> • Patches of skin that are red, or even shades of purple or blue • Skin feeling too warm, too cold, or numb • Swelling or blisters • Shiny areas • Patches that are dry and/or hard 
S	Surface	<p>Ensure your body has the right support to relieve pressure and encourage healing, especially if you cannot move or change your own position. Special equipment such as air mattresses, cushions and booties can help reduce pressure on certain parts of your body. Your healthcare professional can advise which equipment you should use, if any. Also be aware of bedding and clothes - thick seams, zips, studs or buttons can cause or worsen pressure damage.</p>
K	Keep Moving	<p>The best thing you can do to prevent or relieve pressure is to keep active and change your position regularly. Where possible, and with help if needed: try standing up, walking short distances, walking on the spot, or even changing your position when sitting. If you cannot move yourself, your healthcare professional or carer can help you change position regularly.</p> <p>Your nurse or healthcare professional can give you tips on:</p> <ul style="list-style-type: none"> • the correct seating and lying positions • how to adjust your lying or sitting position, and • how often you need to move or reposition 
I	Incontinence	<p>Your skin can get damaged if it is wet for a long time. This can be from sweat, leaking wounds, urine and / or stool. Being incontinent increases your risk of getting a pressure ulcer.</p> <p>What can you do? Wash the area (your healthcare professional will advise you on products for cleansing, if required). Pat dry and do not rub the skin. Use recommended creams as needed.</p>
N	Nutrition	<p>A healthy diet with plenty of fluids can reduce your risk of skin damage. If you are underweight or overweight, you have a greater chance of getting a pressure ulcer.</p> <p>Try to have 3 meals a day with lots of different fruit and vegetables, and drink 6-8 cups of fluid a day (e.g. water, juice, tea / coffee). Inform your healthcare professional if you are worried about your diet or if you lose your appetite and don't know why.</p>
G	Give Information	 <p>If you or your carer notice possible signs of damage, even if you don't think it's a pressure ulcer, tell a healthcare professional immediately. Contact a nurse if you are in hospital, or your public health nurse or GP if you are at home.</p>

Need more advice? Ask your nurse or other healthcare professional.